KNOWLEDGE, ATTITUDE AND BEHAVIOR ABOUT THE MISUSE OF DRUGS AT TRIYUGA HIGHER SECONDARY SCHOOL STUDENTS GAIGHAT, UDAYAPUR

BY

Purushotam Rajdhami

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> TRIBHUVAN UNIVERSITY FACULTY OF EDUCATION JANTA MULTIPLE CAMPUS ITAHARI, SUNSARI August, 2014

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(Supervisor)

Estd: 2045 (Science, Humanities, Management & Education)

Itahari, Sunsari

RECOMENDATION LETTER

This thesis entitled "KNOWLEDGE, ATTITUDE AND BEHAVIOR ABOUT THE MISUSE OF DRUGS AT TRIYUGA HIGHER SECONDARY SCHOOL STUDENTS GAIGHAT, UDAYAPUR" submitted by Purushotam Rajdhami for the partial fulfilment for the requirement of the Masters degree in Health Education under my supervision. Therefore, it is recommended for viva voice.

Mr. Sanjib Kumar Yadav, Lecturer Head of Department of Health Education Janta Multiple Campus, Itahari, Sunsari

Ref:

λü

E-mail: jmcith@gmail.com



(025 - 580064 581300

Janta Multiple Campus

Itahari, Sunsari Estd: 2045 (Science, Management, Humanities & Education)

Date :

APPROVAL SHEET

This thesis entitled "Knowledge attitude and behavior about the misuse of drugs at Triyuga Higher Secondary School Students, Gaighat, Udayapur" submitted by Purushottam Rajdhami in partial fulfillment of requirements for the Master Degree in Health Education has been approved.

4

Thesis Evaluation Committee

Ref:

1. Mr. Sanjib Kumar Yadav, Lecturer

Head, Department of Health Education

Janata Multiple Campus

Tribhuvan University, Itahari, Sunsari

Mr. Manoj Kumar Chaudhary, Asst. Lecturer
 Department of Health Education
 Janata Multiple Campus
 Trbhuvan University, Itahari, Sunsari

 Pro. Dr. Shyam Krishna Maharjan Chairman, Health and Population Education Subject Committee FOE, T.U., Kirtipur

Viva Date: 26th November 2014

(Chairman/Supervisor)

Signature

(Member)

(External)

Declaration

This thesis is written by me and it is original. The report of this thesis has not been submitted in any other University.

Prushotam Rajdhami

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ABSTRACT

This study was carried out entitled "Knowledge, Attitude and Behavior about the misuse of Drugs between HPE and Non-HPE Students of Triyuga Higher Secondary School Gaighat". The investigator tried to find out knowledge, attitude and behavior towards drug misuse, abuse and addiction of HPE and Non-HPE students of higher secondary level.

This descriptive study was carried out with an expectation to fulfill the three objectives, viz., to identify the knowledge about drug use, abuse and addiction of HPE and Non-HPE students of higher secondary level, to find out the attitudes between HPE and Non-HPE students of higher secondary level towards drug use, abuse and addiction, to identify the behavior of HPE and Non-HPE students of higher secondary level towards substances misuse. Researcher purposively selected HPE and Non -HPE students of Triyuga Higher Secondary School Gaighat with the help of school record. There were 200 students in higher secondary level. From 50 HPE students were randomly selected through lottery method on the same way from 50 Non-HPE students were selected. Questionnaire was a major tool of the study. Some were reviewed from the report of different organizations related to research topic and also retrieved from internet surfing. Descriptive analysis and interpretation of the data was some being based on quantitative and qualitative discussion. Question had divided into four parts according to the objectives. According to study, the mean age of HPE students was 17.7 year and Non-HPE was 17.6 year. Out of 50 HPE respondents 56 percent were male whereas, Non-HPE was 40 percent. About, 38 percent of HPE and 22 percent of Non-PHE respondents were farmer background. Similarly, 22 percent of HPE and 24 percent of Non-HPE respondents were from service holder. Likewise, 72 percent of HPE and 24 percent of Non-HPE student know about drug abuse, 82 percent of HPE and 76 percent of Non-HPE students had knowledge about drug addiction, 80 percent of HPE and of 64 percent of Non- HPE students knew about the effects of drug abuse, 76 percent of HPE and of 60 percent Non-HPE students intended to suggest drug abuser. Moreover, about 70 percent of HPE and 40 percent of Non-HPE students were disagreed with the option drug enhance personality, 60 percent HPE and 50 percent Non-HPE were agreed with the prescribed medicine cure diseases, about 24 percent HPE and 34 percent Non- HPE students were undecided with the option drug should be allowed for personal interest, more than half (60% of HPE and 50% of Non-HPE) students were agreed with over dose drugs is dangerous for health. Moreover, about 56 percent of HPE and 62 percent of Non-HPE percent used substances, 14.28 percent of HPE and 19.35 percent of Non-HPE students used prescribed drugs to cure disease, 25 percent of HPE and 32 percent of Non-HPE respondents used substances for religious purpose more than half (67.8% of HPE and 58 percent of Non-HPE) student started substances use during the age of 15-20 year, 53.5 percent HPE and 48.3 percent Non-HPE respondents managed money for substances by borrowing from friends. Likewise, nearly half, (64.2% HPE and 41.9% Non-HPE) respondents were planning to give up substances.

To address these critical problems, it is necessary to give health education through school and college. An awareness program should be conduct from local level. Parents should be care and watch their children's activities. Anti drug rules and regulation should be making and strictly implemented by government level.

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ACRONYMS/ABBRIVIATIONS

AIDS	=	Acquired Immune Deficiency Syndrome
ATS	=	Amphetamine –type Stimulants
CWIN	=	Children Worker's in Nepal
CICD	=	Center for International Career Development
HIV	=	Human Immune Deficiency Virus
HPE	=	Health and physical Education
INGOS	=	International Non- Government Organizations
L.S.D.	=	Lysergic Acid Diethylamide
NGO	=	Non Government Organization
Non HPE	=	Non- Health and physical Education
NCASC	=	Nepal Centre for AIDS and STDS Control
STDS	=	Sexual Transmitted Diseases
UNAIDS	=	United Nations Assistance for international Development
UNICFF	=	United Nations International Children's Emergency Fund
UNODC	=	United Nations Office on Drugs and Crime
WHO	=	World Health organization

CHAPTER-I INTRODUCTION

1. Background of the study

Health is one of the most important factors for the fulfillment of human needs and quality life. A healthy man is always strength of mind and self confidence. According to WHO "Health is a state of complete physical, mental and social well being and not merely the absence of disease or infirmity"

Nepal is one of the world least developing countries. It has low socio-economic condition as well as a lot of problems in health sectors such as communicable disease, poverty, lack of education rapid population growth, Lack of basic health service, environmental health problem, malnutrition, Lack of health education, tobacco and alcohol use and drugs abuse etc. People are using drugs, alcohol and tobacco knowingly or unknowingly which are harmful for health. Drug abuse is creating the main problems of public health in worldwide and also in Nepal. (Unpublished thesis Karna R. K. L. 2010)

Etymologically drug is derived from old French 'drogue' possible deriving later in to "drog-vate" from middle Dutch meaning 'dry barrels' referring to medicinal plants preserved in them (Http://en/wikipedia.org/wiki/drug/etemology)

Drug is defined variously: There is no single precise definition as there is different meaning. Broadly speaking "Drug is any substance that when absorbed into the body of living or living organism, alters normal bodily function (http:/en.wikipedia.org/wiki/drug/medication).

The free online dictionary (2005), defines drug is "A chemical substance, especially on prescribed by a medical provider that is use in the diagnosis, treatment or prevention of a condition or disease. Drugs are prescribed for a limited amount of time as for an acute infection or on a regular basis for chronic disorder such as hypertension". In another way, the free online dictionary (2005) defines drug as "A chemical substances such as a narcotic or a hallucinogen that affects the central nervous system and is used recreationally for perceived desirable affects on personally for perceived, desirable effects on personality, perception or behavior. Many recreationally drugs are used illicitly and can be addictive".

As defined by the food, cosmetic act and drugs are "articles (other than food) intended for used in the diagnosis, cure, mitigation treatment or prevention of disease in man or other animals or to affects the structure or any function of the body of man or other animals" (www/dcri.duke.edu/patient/glossary.) likewise, WHO defines drug as "Any substance when taken into the living organism modifies one or more of its function" (www.WHO.org)

Drug as a spiritual and religious use has been occurring since the dawn of our species. Human beings have always had a desire to eat or drink substance that make them feel relaxed, stimulated or euphoric. Human beings have used drugs of one sort or on another for thousand of year. Wine was used at least from the time of the early Egyptians narcotics from 4000 B.C. and medicinal use of marijuana has been dated to 2737 B.C. in China. As time went "home remedies" where discovered and used to alleviate aches, pains and other ailments. Most of their preparations were herbs, roots, mushrooms or fungi. They had to be eaten, drunk, rubbed on the skin, or inhaled to achieve the desired effect (www.drugrehabs.org). Drug that are considered to have spiritual or religious use are called in thrones. It is mentioned that "Soma Ras" A kind of liquor extract from herbal plants was commonly used our Vedic and pre Vedic age. Hermit's Sadhu saint took" Ganja-Bhang" (Cannabis plants and seed) to overcome hunger, thirst and to concentrate on meditation. Large quantities of "Ganja" are consumed around the holy temples during festivals like Shivaratri and Holy as "Shiva-Buti or Shivaji Ko Prasad" Some rural inhabitants still use it to overcome fatigue, pain and have a therapeutic use in our society opium, Dhaturo (atropine) are strictly confirmed to medical practitioners and Helens. The higher caste people were forbidden to consume alcohol used to enjoy the puffs to Ganja naming it as holy and the others drew pleasure in alcoholic drinks. All cultures possess a set of ideal attitudes towards the consumption of or abstention from alcoholic beverages and define the expected and prohibited behaviors while drinking. Some religions are based completely on the use of certain drugs (Dhital, et al., 2001)

Park J. E and Park K. (1991) as cited in Waggle, D (2056) there are different kinds of hard drugs such as :-

- a) Depressants / sedatives: Alprazolam, Librium, helium, Ativan, Bus cam etc.
- b) Stimulants :- Amphethetamines, cocaine
- c) Hallucinogens / psychedeues: mushrooms, L.S.D., D.M.T., mescaline, Ganja, Dhaturo etc.
- d) Narcotics:- morphine, Heroin (Brown sugar, white powder, smacks etc)

"When drug reaches the brain cells and succeeds in changing the chemical reaction within these changes about the way people think, feel, and speak and more about. All these mind alerting drugs are addictive in nature and change the functioning of the body in such a way that after sometime the body begins to 'demand' them in such condition of the drug is not taken then the person become lethargic, listless and feels restless. But as soon as the person gets the drug she the fees energetic and after sometime again she the becomes restless, then the person becomes an addict An addict is a person who needs his daily quota of drugs (repeated consumption of drugs) even in fit involves stealing or even restoring to graver crimes such as murders. Therefore, an addict soon becomes a curse not only himself but to the whole society as well (www.who.org.)

Drug is not harmful in itself. It has been made for medical purpose to cure disease. But when it is misused then many problems like physical and mental problem, Economic crisis, violence, crime etc. Therefore drug abuse is not only an individual problem. It concerns with family, community as well as worlds problem so it should be better to do anti drug abuse campaigns. People can make aware of the health hazards of drug abuse by Radio, T.V. Inter Net, News paper, Magazine, Poster and other Audio visual aids.

1.2 Statement of the problems

Nepal is very small landlocked and poor country of the world with the area 1, 47181 sq km and elongated from east to west. According to the census of 2068 B.S. the total population is the physical trend of language, culture and religions very. There are Hindu, Buddhist, Muslim, Christian, etc religions in Nepal. Nepal is poor country. So,

Nepalese have difficulty in obtaining enough nutrition's food, health care and other health related requirements. In this condition we have bad habits relating to substance use that are a serious problem and especially drug abuse.

The Student studying at secondary level is almost of aged 14-16. So, they are called adolescents. This age is also known as the age of storm and stress. In this age, students are impatient and their understanding power is very poor by which they are unable to distinguish what is right and what is right; they can be lured to the activities like drug addiction and so on for monetary relax without thinking about their valuable life when they get same type of company. Same case is here in Shree Triyuga Higher Secondary School, Gaighat Udayapur. In the present Context drug addiction is burning and fatal problem of this locality.

Today's children are tomorrow's nation builders, if they involve in such activity, there will be negative impact on the all round development of the nation. Furthermore, how can the society bring Socio-economic Change if youths are in such tracks? Instead there may be the possibility of different sorts of crime activities such as rape, robbery, murder, assault, fraud and others. So, it is necessary to activate the state mechanizes and concerning Social institutions working as NGO, INGOS and government offices to minimize the potential effects of such activities on time.

Due to the drug addiction students are learning their school and college day by day by which the family members and school administration have negative attitude towards them and the future of such youths is being worse. It is in dispersible to bring such groups in the right track, by involving them in physical education awareness program, other awareness programs against the drug addiction etc.

According to public health Report (1994) "over the past of decades, there has been an increasing trend towards drug use, often in valuing experimentation with more than one substance, among youth in and out of school for example, a survey of students at teachers' colleges in northern Thailand showed that at some time in their line 30-40 Percent of the males respondents and 3-6 percent of the female respondents have used cannabis and that 18-20 percent of the males and 12-27 percent of the females had sniffed volatile solvents. The same survey showed that 5-10 percent of both the males and females had used stimulants and nearly 2 percent had used heroin. During the 1970s the abuse of heroin and other opiates emerged as serious problems of epidemic nature, predominantly affecting young people in many countries of south, East Asia. While opiates, including heroin have been abused by inhaling and by smoking there has recently been an increasing trend towards injecting heroin of high purity (80-90 percent pure heroin). Heroin addiction spread first to the populations of capital cities and then to other cities and towns and even to the hill tribes as studies in Thailand have revealed. Most recent studies have shown that heroin abuse has spread further in Asia, both socially and geographically involving such countries as India and Sri-Lanka, which had no previous experience with the problem. Studies have also shown that the abuse of manufactured psychotropic substance has been increasing and that heroin addicts resort to these substances when heroin is difficult to find.

Chronic alcohol use can damage any organ systems besides the well known liver complications. There can be enlargement of the heart with weakening of the muscle celled cardio-sympathy and subsequent heart failure. There is an increased risk of mouth, throat, stomach colon, liver, breast, and other estrogen related cancers (WHO, 2000).

In Nepal more than 60 percent of drug addicts are believed to be the young person's between the age of 16-30 some of the young street boys, often involve in black marketing of cinema tickets and brokerage of money exchange and prostitution have been found booked on drugs (UNAIDS and UNICEF, 2001) further UNAIDS and UNICEF (2001) Write that, initially there boys from the troubled families were misused as pushes, sample distributors and brokers by drug dealers. Most of the addicts' families are involved in some of business. Higher percent of addicts have educational background of secondary school to proficiency certificate level. But many of them have been found to have discontinued their education. This educational background also indicates that majority of addicts belong to the family of middle class income group. Only a few female addicts have been identified. So, far although 2-3 percent of addicts are believed to be the females. The average addict spends Rs 100 per day on 'smack'. They usually inject heroin in groups. They, who are taking drugs intravenously, are vulnerable to HIV and AIDS infections. Many youths of Nepal use Alcohol, cannabis, Hashish, Psychotropic and other drug as a substitute when smack is not available. Most of the youths of urban areas were engaged in cigarette and ganja smoking (ibid. 2001).

According to CWIN report (2009), drug abuse is local problems especially in the urban, semi-urban areas. There is a lot of drug smuggling in Nepal. Most of the drug addicts are found in Kathmandu, Lalitpur, Bhaktapur, Pokhara, Birgunj, Nepalgunj, Biratnagar, Dharan and Bhairhawa. There are about 30,000 drugs users in Kathmandu valley among them 15,000 are injecting drugs and 40 percent of these youth are today already infected with HIV/AIDS. Further CWIN report shown that, Thamel, Gongabu, New Bus-park, Ratanpark, Bir hospital area, Gaushla, Airport, Pashupati area, sinamangal Anamnagar, Kalanki area of Kathmandu valley are famous for drug abusers.

In Nepal Marijuna (Cannobis), Grows in Terai, were many farmers wed every year to get rid of it but it just keeps coming back. Many of them have readymade buyers and while some of them will sell it domestically one can easily pass drugs such as marijuana from Tarai capital city Kathmandu. Which is smuggled to India through land borders and some drugs are brought to cities like Kathmandu, Pokhara, The distillate Marijuana and hashish are consumed by some Nepalese during the Holifestival as port of the colorful festival season. Various sweet products containing the drugs are available in disguised shops offering sweet products during the festival season. Most of teenagers in Nepal have smoked Marijuana. Most of the travelers and Nepalese hi the streets to find drugs like hashish police too are often involved in drug Business. After reviewing related literature it was found that, most of drug smugglers are found in urban and semi-urban areas. Among them Udayapur is a district situated in a mid Tarai Eastern region of Nepal. It's headquartered; Triyuga Municipality-1 Gaighat Bokse is situated to the middle south of the district. This district has one municipality and 44 VDCs. In this district, Gaighat, Beltar and Kattari are famous for drug smuggling. Triyuga Higher secondary school also lies in Gaighat Bazar. Researcher will try to find out whether the students of this school were affected by drug abuse or not. This type of research has not yet been done in this area. Thus, this title and area have been selected for research.

1.3 Objectives of the study

The main objective of the study was to compare the knowledge, attitude and behavior of HPE and None HPE Students about the drug abuse. The specific objectives were as follows:

- 1.3.1 To identify the knowledge of higher secondary level students about drug misuse, abuse and addiction.
- 1.3.2 To find out the attitude about drug use, abuse and addiction between HPE and None HPE students of higher secondary level.
- 1.3.3 To identify the behavior of higher secondary level students of HPE and Non HPE towards substances misuse.

1.4 Significance of the study

Drug addiction is becoming a critical social problem; however, mainly the young generations are becoming the victim of this problem. This problem cannot be solved only by the critical method and providing lead provision against the drug addiction and trafficking because it is only one part of controlling because it is only one part of controlling measures. Drug abuse is a psychology and emotional problem too. So to control this problem deep research will be useful and significant. Many studies have been conducted focusing on drug abuse in Higher secondary level but haven't yet been done on co- operative study between the students of HPE and Non HPE. So to compare the know ledge, attitude, and behavior about drug abuse, to find out the effectiveness of Health and physical Education, this research will play significant role.

This specific significance of this research study is as follows:

- 1.4.1 This research would be helpful to find out the situation of drug abuse among the higher secondary level students.
- 1.4.2 This research will be helpful for further research as a reference material.
- 1.4.3 The finding of the research would be guide lines for the Health planners, policy makers, Health workers and related NGO and INGOS.
- 1.4.4 It will be helpful for the curriculum planners for the inclusion for drug education in the school and college curriculum.
- 1.4.5 The finding of this study will give suggestion for different rehabilitation centre to improve their program and treatment procedure.

1.5 Delimitation of the study

This study was delimited due to time and resource constraints. So, it was focused only on particular area which was investigated within the limit of the researcher's capacity. It was delimited in the following areas:

- 1.5.1 This study was delimited in Triyuga Higher Secondary School Gaighat, Udayapur.
- 1.5.2 The respondents will be higher secondary level students only.
- 1.5.3 This study will be delimited within the response of selected within the response of selected respondents.
- 1.5.4 This study includes some variables such as knowledge, attitude and behavior towards drug use, misuse and abuse.
- 1.5.5 This research followed both qualitative and quantitative research design on descriptive method where 50 respondents are from HPE+50 respondents are from Non -HPE.
- 1.5.6 Respondents were identified through simple random sampling method (Lottery method)

1.6 Operational Definitions of the Key Terms

These operational definitions were adopted as explanation to make the study analysis more specific and precise to the general readers and researchers.

Adolescents:- According to Wikipedia (200) Adolescent is the person growing up age 12/13 or 18. In this study Adolescent means those entire students who are presently. Who are presently enrolling in class 11 and 12?

Attitude:- Attitude means position of a person, emotion or action towards as object or person.

Behavior:- Persistently used and misused of drug.

Bhang:- Beverage or substance made by crushing and rubbing of the leaves and seeds of cannabis plant.

Cannabis :- it is Latin word for hemp' mild hallucinogen and widely grown in Nepal.

Charesh: it is the form of cannabis resin. It is mostly smoked with tobacco or in cigarette.

Drug: Any substance, when taken into the living organism may modify one or more if it functions.

Drug abuse: Use of any drug in a manner that deviates from approved social or medical pattern.

Drug addiction: Drug addiction is a pathological or abnormal condition which arises due to frequent drug use. (www.en.wikipedia.org/wiki/drug addiction cached)

Drug misuse: when a drug is taken for the intended use but not in the proper quantity frequently, strength or manner.

Drug use: A biologically compound or mixture used to cure prevent or detect disease to control biological process or to alter mental state is called drug use. (www.chemdiv.com.en.information/glossary.)

Heroin: Popularly called smack, brown sugar or even white powder. It is analgesic in nature and is derived from opium.

Substance: Tobacco, alcohol and drugs that affect our nervous system through intoxication produced by its repeated or chronic use change our mood, perception and sensation.

CHAPTER- II REVIEW OF RELATED LITERATURE

Related Literature review is important aspect for research. It gives general guidelines to the researcher. It helps the researcher to gain knowledge about related field. Also it helps to gain insight on particular research, issue which assist in formulizing the research problem and acknowledge in the previous effect made by the scholar and researchers. It can be a strong bridge between the previous and the present effects to carry out the fundamental assumption, without which a research work can never be original. Similarly, literature studies on drugs field has been reviewed on various grounds to provide its relevant concept and it is significance in the world and Nepalese context. Overall, the purpose of this chapter is to review briefly the different existing view of experts on this field and to layout a frame work for the present study. In this topic the researcher has discussed about the previous researcher on drug abuse related study.

2.1 Review of Theoretical Literature

WHO (2001) Writes that adolescent covers the period of life between 10-20 years age. Adolescence is often divided by psychologist into three distinct phase early,, mid and late adolescence the combination of these three stages is really transitional stage of development between childhood and adulthood this period represents the period of time duration which a person experiences a variety of biological changes and encounters a number of emotional issues. Actually adolescence can be a specifically turbulent as well as a dynamic period of one's life. It has been identified as a period in which young people abstract thinking abilities. If any disturbance appears in their thinking and desire they develop negative thinking and attitude. Due to that they develop negative habit and test the harmful and addicted substances. (www.who.org.)

A survey done by CWIN (2001), about drug and alcohol abuse among 426 children aged between 10-17 years show that 17.4 percent were using alcohol, 3.1 percent drug and 12.7 % tobacco during the last 12 months.

The study also showed association between the consumption of alcohol, durgs, Tobacco and the age educational status and gender of that age group. The study summarized that males predominated per males by five for taking drugs. The younger generation was more likely to have experienced drugs during the last 12 months as compared to the older generation. Cannabis was appeared as the most common drugs in Nepal.

According to WHO (2005) heavy drinking has been known for centuries to be a health hazard and cause of death. Effort to quality the disease burden associated with different risk factors clearly demonstrate that hazardous and harmful alcohol drinking is one of the leading risk factors is responsible for 4 % of the global disease burden with its humongous social problem associated with disorders attributable to alcohol use is distributed unevenly poor and underprivileged group age often at higher risk and are deprived of health and social enter venations that can help to alleviate individual and family distress.

According to NCASC (2007), about half of the HIV/AIDS cases in Nepal are in the 20-29 age groups. HIV prevalence in Nepal at present is estimated to be 0.2-0.4 of the general population. Nepal center for AIDS and STD control (NCASC) record in February 31, 2006. The total of 1741 cumulative cases of HIV infection, of these, 542 had progressed to full blown AIDS. A recent assessment of drug users and HIV indicates the drug injection is the predominant mode of HIV transmission. HIV/AIDS is spreading increasingly through the sharing of unclean needles. Further NCASC (2006) writes that prevalence of HIV infection among injecting drug users is high as 50 % majority of drug users start taking marijuana and pensile between the ages of 15-20. NCASC estimates that there are about 70,000 are drug users in Nepal, out of which 20,000 are injecting drug. Among them 22% drug users in Nepal are 16-20 years age group. And 34% are between 12-15 years. Peer pressure, curiosity, frustration, uncertainly, over job prospects and failure in love is major factors that drive the youths, mostly male, towards drug abuse and HIV infection. Among those who contract HIV from drug injection were children of middle class families, students, rickshaw pullers, boatman vegetable vendors and people with odd jobs.

Word Bank (2007) reveals that alcohol is most widely consumed drug in the most widely consumed drug in the world about half those 15 and older has consumed alcohol in the past year. Pattern is difficult to interpret because moderate drinking even by youth is accepted in many countries. The proportion of young people who a ported drinking generally exceeds 60 % of whom 10-30 % engage in single drinking

in united kingdom, young people between 16 and 24 are the heaviest drunker in the population and the least likely to abstain from drinking limited data from developing countries suggest that young people are beginning to drink alcohol and to frank heavily, though consumption among girls in some countries (Specially in Latin America) has begun to approach or even surpass that of young man.

2.2 Review of Empirical Literature/Previous Studies

Dhital (2000) carried out a research entitled a study on alcohol use in Nepal. It was the first large scale study in the country converting 2400 household in 16 districts representing both rural and urban areas as well as all ecological and development regions. The study found that about 60% of the Nepalese population has experienced alcohol and 41 % have taken it during the past 12 months. Among them who have ever drunk, 38 % were found to be using it regularly 9 1-5 days in 30 days) and 10 % are daily users (20 days in a month). More men than women during 21 % female as compared to 50 % male are taking any type of beverage in the last 30 days. As same as, one third of sample house hold was producing alcohol for both consumption and sale. The per capital production of alcohol was 33 names (1.5 Liter) of which two thirds are sold. The capita income for alcohol was Rs. 327 per month making the economic contribution of alcohol in the household quite significant and a major source of income in some of the poorest households.

CICD (2004) carried out the Research entitled "Research on substances abuse alcohol, tobacco drugs use in adolescence population in Dhangadi municipality". The study showed that 35 % of respondents believing that alcohol are used for fun, it shows that people are ignorant to be side effects of alcohol use/abuse and use it very frequently as a release from tension. 60% of respondent admitted alcohol is the main drug factoring in violent crime. This indicates that the prevalent negative effects of alcohol on families and communities. As a whole 124 respondents out of 150 agreed that alcohol is a community disease. Thus alcohol use is acknowledged as a growing community problem even within this young age group.

Khadka (2004) carried out a research entitled "Factors leading to drug abuse a case study on residential client of Navakiran Rehabilitation centre Kathmandu". He maintains that the most of the addicts are from Chhetri between the age group of 21-25 years. Most of the addicts from single family and they attained higher education. Higher number of addict was from Hindu religions. Out of the hundred, 55% addict had started drug because of the peer pressure and 20% addicts had started drug to reduce the tension.

Lamichhane (2004) carried out a research entitled "Socio demographic characteristics of drug addicts and their rehabilitation in Kathmandu valley". The study comprised 25 drug addicts as respondent randomly selected in Kathmandu valley later study showed that higher incidence 40 % of drug addicts come from new communities. Most of the respondents were found to be at the age group of 17 to 25 years and religiously high percent of drug addicts family members' habit of smoking cigarettes and drinking alcohol which might have attributed their children towards habit of smoking and then to drug addiction.

Rai (2005) studied "Knowledge and attitude of high school teachers regarding drugs addiction among adolescents in Kathmandu". The study found that 90-66 % of respondent had knowledge about smack and 72 % know 'Heroin and Brown sugar' as hard drugs 68% of respondent know that prevalence age group (14-19) involved in drug addiction. Majority of respondents 73-33 % were found to be aware of HIV/AIDS as associated disease with drug addiction. This could be due to different reasons mainly being lot of anti addiction drug problem coverage by various media. The respondents were found to be not well versed on physical sign and symptoms.

Dangol (2006) Students "Alcoholism in major community of Bidur Municipality Nuwakot district". To find out the causes of alcoholism and social problems related to alcohol in major community. It was sample size 100 and sampling procedure was purposive sampling. The study found that, about 75% respondent drinks weekly, 6% drink it sometimes in the special occasion, 46% were influenced by their family, 43% were influenced by their friends and 11 % were influenced by their own culture. Out of total respondents, 55.5 % used to figure against their wife, 33.3 % quarreled with their other family members and 11.1% quarreled with alcohol seller. In the same way 48% respondents were revealed having sickness caused by taking alcohol. The major sickness was 6.3% faint 47.9 % gastritis, 39.6 % body pain and 6.3 % tuberculosis.

After reviewing the above mentioned literatures tobacco use, excess of alcohol in adequate physical, obesity, improper food and polluted environment has significant role in increasing burden of communicable and non communicable and disease in the nation, similarity mental health, oral health having impairment, blindness, cardiovascular disease, hypertension, malignancies and problems of elderly are the health issues that need to be

addressed effected by controlling and reducing risk factor other as necessary. It has found that drug abuse is burning problem among adolescence. It has been affected on mental, physical, social and socio economic and health status, this is a serious problem of family society and nation too. Likewise many research studies have been carried out on drug abuse. But no research was found to have been conducted in on drug abuse comparing knowledge in on drug abuse between HPE and Non HPE Students.

2.3 Implications of the review for the Study

Reviewing the literature drawn from Dhital (2000) entitled 'Alcohol used in Nepal' helped a lot to carry out this research. Similarly CICD (2004)'s research on substances abuse alcohol, tobacco drugs use in adolescence population in Dhangadi municipality highly helpful for carrying out this research. Khadka (2004)'s research entitled on factor leading to drug abuse a case study on residential client of Navakiran Rehabilitation Centre, Kathmandu was also a helpful tool to carry out this research.

This implication of the review is highly beneficial to explore the clear information to find out the knowledge, attitude and practice about drug for the students of HPE and Non-HPE students of Triyuga Higher Secondary School.

No doubt drug misuse, abuse and addiction are the great problem for the community as well as the whole country. To eradicate the above mentioned problems from the grass-root level all the responsible authority members should play their role. As we know all the youngsters are the backbone of any nation, so, it is necessary to discourage them who are involved in it. The parents, the society and concerned authority should keep their eye on it. The study of this finding may help concerned authority to check the problems.

2.4 Theoretical /Conceptual framework

To find out the knowledge, attitude and practice about the drug for the students of HPE and Non-HPE students of Triyuga Higher Secondary School, Socio-Cultural taboos and family type are highly important. Students from Janajati, community, uneducated families are found more drug addicted and they have less knowledge about it . Peer group it\s also one of the key factors to involve their friends to misuse the drug. Communication facilities such as T.V., Radio, and Computer etc are now a day's essential tools to discourage the abuse of the drugs. HPE group is more familiar about the knowledge, attitude, behavior about drug the knowledge, attitude, behavior about drug in comparison to the Non-HPE group.

CHAPTER -- III

METHODS AND PROCEDURES OF THE STUDY

3.1 Design and method of the Study

Research design was the conceptual structure within which research was conducted. Descriptive research is a fact finding operation searching for adequate information. Which is generally conducted to assess the opinions behaviors or characteristic of a given population and to describe the situation and events occurring at present (Wolf and Pant, 2005 as cited in Baral, 2008). This research had also based on particular small area and aimed to find out the specific small size populations facts. So, descriptive type of survey was be used for this study. This study was quantitative in nature.

3.2 Population Sample and Sampling Strategy.

Triyuga Higher Secondary School was selected for the purpose of study. Mainly, the population of the study was HPE and Non-HPE Students of higher secondary level. There were 200 students in higher secondary level among them 100 were from HPE background and 100 were from Non – HPE background.

3.3 Study area/field.

For the collection of necessary data, first of all, the researcher made the list of total students of the selected area with the help of school record. From 100 HPE students 50 were selected for sample. Likewise, from 100 Non-HPE students 50 were selected for sample. Both sample were taken through simple random sampling procedure i.e. lottery method.

3.4 Data Collection Tools and Techniques

The achievement of the study depends upon the collected data or information. So that, for the useful and effective achievement, data should be accurate and reliable. To collect accurate and reliable data, questionnaire including attitude scale were used where, closed and open type questionnaire were used to test knowledge and behavior and attitude scale to test the attitude of the students. The questionnaire were divided into different parts for collecting the different parts for collecting the different information of HPE and Non-HPE higher secondary level students' personal

information together with the knowledge attitude and behavior of drug use, abuse and misuse.

After developing the questionnaire, it was submitted to the supervisor for getting suggestion. Then the revised tools were administered to the 15 respondent of Triyuga Higher Secondary School for the pre-test to insure its practicability and to avoid error of tools. The tools were improved further on the basis of trail test result. After wards, the tools were finalized on the basis of feedback of the trial test as well as supervisors' feedback.

3.5 Data Collection Procedures

First of all, researcher visited the principal and subject teacher of Triyuga Higher Secondary School with a request letter from the Health Education Department, Janta Multiple Campus Itahari. And it was handed over to the principal of the concerned school. The researcher explain him the purpose of nature of the study after getting permission, researcher organized small informal meeting with higher secondary level students with the help of subject teacher. After assured their identity researcher explained about the objectives and the importance of the study. Then researcher informed the procedure of filling questionnaire to the selected respondents and requests them to fill up the questionnaire inside the classroom. Same question were asked to the HPE and Non- HPE students. During the questionnaire administration time, researcher herself assisted the students.

3.6 Data Analysis and Interpretation Procedure

After collecting the necessary data from the respondents, possible errors and inconsistencies were removed. The data was processed with the help of excel programmed of computer software. And it was carefully edited to insure its quality. The required frequency and table was generated through collected data. The information was classified, categorized and sub categorized according to the objectives. Then, result was compared and analyzed between HPE and Non HEP students. Processing, analyzing and interpreting were followed with the help of tables.

CHAPTER-IV

ANALYSIS AND INTERPRETATION OF RESULT

4 Analysis of Data and Interpretation of the Results

This study had been carried to find out the knowledge, attitude and behavior of the higher secondary level students towards drug. Analysis and interpretation of data is an important process in every research. So, this chapter is concerned mainly with the analysis and interpretation of the collected data from respondents. To make this study effective and meaningful, collected data has been classified, grouped, tabulated and tabulated. Data are analyzed and interpreted with the help of tables. They are analyzed and interpreted as per objectives.

4.1 Personal Description of the Respondents

A total of 100 students were included in the study. Only common personal information was collected which can not disclose their personal identity due to the socially unrecognized research matter. Under this section following age, study grade, sex, parental occupations are discussed in separate headings below:

4.1.1 Distribution of the Respondents According to their Age

Age is the basis characteristic of demography. Age structure of the population determines major components of population change. So, it has provided the number of persons in the table.

Age Group	HPE Students		Non-HPE Students	
	No.	Percent	No	Percent
16 Year	8	16	6	12
17 Year	14	28	19	38
18 Year	18	36	17	34
19 Year	5	10	5	10
20 Year above	5	10	3	6
Total	50	100	50	100

Table No. 1: Distribution of the Respondents According to their Age

Table no. 1 shows that, among the HPE respondents, highest number 36 percent were age of 18-28 percent were age of 17, 16 percent were age of 16, 10 percent were age of 19 and 20. The mean age of HPE student was 17.7 year. On the other hand, the highest number of non- HPE respondent 38 percent was age of 17, 34 percent were

age of 18, 12 percent were age of 16, 10 percent were age of 19 and 6 percent were age of 20. The mean age of non- HPE student was 17.6 year. In comparison, on the basis of mean age of HPE and non-HPE students, HPE students were slightly older than non-HPE students.

4.1.2 Respondents by Grade wise

Education is the backbone of development. "Plants are developed by cultivation but men are developed by education". Even though, educational status of Nepalese people is not very good. But now day's literacy rate is growing fast. Educational status and health improvement of the people is positively associated with given knowledge. In this study researcher wanted to take equal respondents from each class but in simple random sampling producer i.e. lottery method the following number of respondents were selected, with is shown as follows:

Grade	HPE	Students	Non-HPI	E Students
	No.	Percent	No	Percent
11	24	48	26	52
12	26	52	24	48
Total	50	100	50	100

Table No. 2: Study Grade of the Respondents

Table No. 2 shows that, 48 percent of HE students were from grade 11 and 52 percent were from grade 12. Similarly, among the non-HPE students 52 percent were from grade 11 and 48 percent were from grade 12.

In comparison, More than half (52%) Non-HPE students were included in the study from grade 11 whereas; same percentages of HPE students were included in the study from grade 12.

4.1.3 Sex of the respondents

Sex is the biological attributes; sex structure of the population determines major components of sex group. In this study, researcher intended to take equal respondents (both girl and boys) but it has quite different which is provided in the table.

Table No. 3: Sex of the Respondents

Sex	HPE Students		Non-HPE Students		
	No.	Percent	No	Percent	
Male	28	56	20	40	
Female	22	44	30	60	
Total	50	100	50	100	

Table No. 3 reveals that, out of 50 HPE students 56 percent were male and 44 percent were female. Similarly, among the Non-HPE students 40 percent were and 60 percent were female.

In comparison, it was found that the participation of male students was more in HPE whereas; in Non-HPE female students' participation was more.

4.1.4 Parental Occupation of the Respondents

Occupation is the base of lovely hood for population, which determines the living status of people. It has become an essential feature of modern economic life and to fulfill increasing demands of family and society. People are essentially associated with different occupations such as agriculture, business, labors and service etc. In this study parental occupation of the respondent is shown as follows:

Occupation	HPE Students		Non-HPE Students		
	No.	Percent	No	Percent	
Service	11	22	20	40	
Farmer	19	38	11	22	
Business	10	20	8	16	
A board Employment	4	8	5	10	
General Worker	6	12	6	12	
Total	50	100	50	100	

Table No. 4: Parental Occupation of the Respondents

Table No. 4 shows that among the HPE students the highest proportion (38%) were from farmer background and the lowest proportion (8%) wee from abroad employment. On the other hand, among the Non-HPE students, the highest proportion

(40%) were from service holder and lowest proportion (10%) were from abroad employment.

In comparison, the parents of HPE students were more farmer than Non-HPE students. Similarly, the parents of Non – HPE students more service than HPE students. But both the parents of HPE and Non – HPE Students from abroad employment were in the same proportion.

4.2 Knowledge about Drug Misuse

In this section, respondent's knowledge about drug misuse, meaning of drug misuse, knowledge about abuse, meaning of drug abuse, knowledge about drug abuse, knowledge about preventive measure of drug abuse, approach to minimized drug abuse, suggestion intended by respondents and suggestion for drug abuser are discussed in separate leading.

4.2.1 Respondents' Knowledge about Drug Misuse

There are many drugs in the natural world. These drugs are essential for our life. Some drugs have well and some have bad effect on our health, therefore drug is neither good nor bad. So, to know the knowledge level of the secondary level students' researcher had asked them about drug misuse. And the response reported by them are presented in table No. 5

Variable	HPE	Students	Non-HPE Students	
	No.	Percent	No	Percent
Yes	36	72	12	24
No	14	28	38	76
Total	50	100	50	100

 Table No. 5: Respondents Knowledge about Drug Misuse

Table No. 5 reveals that, 72 percent of HPE students had knowledge of drugs misuse. Whereas; 24 percent of non-Students had knowledge of drug misuse that non-HPE students

4.2.1.1 Meaning of Drug Reported by the Respondents

In the broadest sense, drug means any chemical entity or mixture of entities, other than those required for the maintenance of normal health, the administration of which alters the biological functions and possibly structure. Those respondents who through that they had knowledge about drug misuse were asked question to find out their knowledge about drug misused and the response is shown in the table No. 6

Variables	HPE S	HPE Students		Non-HPE Students	
	No.	Percent	No	Percent	
Prescribed medicine	8	16	9	18	
Tobacco Product	16	32	14	28	
Alcoholic Drinks	13	26	16	32	
Prohibited medicine	1	2	3	6	
Drug store in pharmacy	4	8	6	12	

Table No. 6 Meaning of Drug Reported by the Respondents

Table No. 6 present that; 32 percent of HPE students were agreed in the option tobacco product. Likewise, 26 percent were agreed with alcoholic drinks and 2 percent were agreed with the option prohibited medicine. On the other hand, the highest number (32%) of Non- HPE students were agreed with the option alcoholic drinks; likewise, 28 percent were agreed with the option tobacco product and 6 percent were agreed with option prohibited medicine respectively.

After analyzing the table No. 6 it is found that, HPE students had more knowledge about drug than Non- HPE students.

4.2.2 Knowledge about Drug Abuse

Drug abuse is define as a maladaptive pattern of tobacco, alcohol and drug use leading to clinically significant impairment or disease, as manifested by one or more symptoms such as failure to fulfill major role if, related field physically and mentally hazardous, drug related to social dysfunction and legal problem. Students were asked whether they have knowledge about drug abuse or not, and the response reported by them is presented in table No. 7

Variable	HPE	Students	Non-HPE Students		
	No.	Percent	No	Percent	
Yes	35	70	23	46	
NO	15	30	27	54	
Total	50	100	50	100	

Table No. 7: Knowledge about Drug Abuse

Table No. 7 mentions that, 70 percent of HPE students had knowledge about drug abuse. On the other hand 46 percent of Non-HPE students had knowledge about drug abuse.

In comparison the highest number of HPE students had more knowledge about drug abuse than Non-HPE students of Non-HPE students which might be due to the students HPE

4.2.2.1 Meaning of Drug Abuse given by the respondents

Those respondents who had knowledge about drug abuse were again asked to report that suitable meaning of drug abuse and the answer reported by them is presented in table No. 8

Variables	HPE Students		Non-HPE Students		
	No.	Percent	No	Percent	
Using more drugs without Doctor's prescription	11	22	13	26	
Using Medicine without medical	12	24	11	22	
purpose					
Medicine use for entertainment	15	30	14	28	
Percent exceed more than 100 due to the multiple response					

Table No. 8: Meaning of Drug Abuse Given by the Respondents

Table No. 8 shows that, 30 percent the highest number of HPE students was agreed with the option medicine use for entertainment. Similarly, 24 percent were agreed with using medicine without medical purpose and 22 percent were agreed with using more drugs without doctor's prescription. One the other hand, 28 percent of Non-HPE students were agreed with the option medicine use for entertainment. Similarly, 26

percent were agreed with using more drugs without doctor's prescription and 22 percent were agreed with using medicine without medical purpose respectively.

4.2.3 Knowledge about Drug Addiction

Drug addiction is the state of periodic or chronic intoxication prohibited by the repeated consumption of drug, natural or synthetic. Students were asked whether they save knowledge about drug addiction or not, and response reported by them is presented in table No. 9

Variables	HPE	Students	Non-HPE Students		
	No.	Percent	No	Percent	
Yes	41	82	38	76	
No	9	18	12	24	
Total	50	100	50	100	

Table No. 9: Knowledge about drug addiction

Table No. 9 shows that, 82 percent of HPE students had knowledge about drug addiction. On the other hand, 76 percent of Non-HPE students and knowledge about drug addiction.

In comparison, the highest number of HPE students had knowledge about drug addiction than Non-PHE students.

4.2.3.1 Meaning of Drug Addiction Given by the Respondents

Those respondents who had knowledge about drug addiction had again asked the suitable meaning of drug addiction and the response reported by them is presented in table No. 10

Variables	HPE Students		Non-HPE Students		Total		
-	No.	Percent	No	Percent	No	%	
Regular use of drug	5	12.19	5	13.45	10	25.64	
Occasional use of drug	7	17.07	4	12.52	11	29.59	
Fully dependent on drug	10	24.39	18	47.36	28	71.75	
Drug use for intoxication	19	46.35	10	26.67	29	73.02	
Total	41	100	37	100	78	200	
Exceed 100% because multiple response							

Table No. 10 Meaning of Drug Addiction Given by the Respondents

Table No. 10 shows that the highest numbers (46.34%) of HPE students were agreed with the option drug use for intoxication. Likewise, 24.39 percent was agreed with the fully dependent on drug. Similarly, 12.19 percent agreed with the regular use of drug and 17.07 percent agreed with the occasional use of drug. On the other hand, in Non-HPE side, the highest number (47.37%) of students agreed on fully dependent on drug, 26.31 percent agreed on drug use for intoxication 10.52 percent agreed on occasional use of drug and remaining 13.15 percent agreed on regular use of drug.

In the comparison, Non-HPE students had less knowledgeable than HPE. Hence, it is necessary to provide knowledge to them. If somebody uses drugs for short time pleasure for long time as a medicine without doctor's prescription, not for cure of any diseases is called drug Addiction.

4.2.4 Source of information about Drug Abuse for the Respondents

Now a day's media is going ahead to solve the social problem by awareness program through the means of media like radio, television, internet, newspaper etc. These all means of media are used by youth mostly. They are the one who fall on the ambush of drug and media plays the vital role to reduce this social problem which helps nation for the further development. Students were asked the question about the sources of information towards drug abuse and the responses reported by them are as follows.

Variables	HPE	Students	Non-HPE Students		
	No.	Percent	No	Percent	
Mass media	9	18	17	34	
School	32	64	10	20	
Friends	5	10	18	36	
Family	4	8	5	10	
Total	50	100	50	100	

Table No. 11: Source of Information about Drug abuse for the Respondents

Table No. 11 shows that, the highest (64%) HPE students got knowledge about the drug abuse from school. Similarly, 18 percent had known from mass media. The lowest number (8%) had known from family. On the other hand in Non-HPE side, the

highest number (36%) knows about drug abuse from friends. Similarly, the lowest number (10%) knows about drug abuse from family.

Comparatively, HPE students had more information about drug abuse than Non-HPE students which might be the reason of studying HPE as a major subject.

4.2.5 Knowledge of the Respondents about the effects of Drug Abuse

Drugs abuse behavior has negative effect on health. Even though, some young people are abusing drug. Students were asked whether they have knowledge about of drug or not, and response reported by them is presented in table no. 12.

Variables	HPE	HPE StudentsNo.Percent		PE Students
	No.			Percent
Yes	40	80	32	64
No	10	20	18	36
Total	50	100	50	100

Table No. 12: Knowledge of the Respondents about the Effects of Drug Abuse

Table No. 12 shows that, 80 percent HPE students had knowledge about the effects of drug abuse. Whereas; 64 percent Non-HPE students had knowledge about the effects of drug abuse.

Comparatively, HPE students were highly conscious than Non-HPE students about the effects of drug abuse.

4.2.5.1 Effects of Drug Abuse

To identify the effects of drugs on health of people, it is necessary to find out the knowledge, about the effects of drug abuse. Question about effects of drug abuse was asked to them and the response is shown in the table No. 13.

Table No. 13: Effects of Drug abuse Reported by the Respondents

Variables	HPE S	Students	Non-HPE Students		
	No. Percent		No	Percent	
Psychopathic personality	10	20	18	36	
Poor physical well-being	18	36	17	34	
Involve in criminal Activity	5	10	4	8	
Loss of money	28	56	22	44	
Due to the multiple response, percent exceeds more than 100					

According to table No. 13, more than half (56%) of HPE respondents believed that the effect of drug abuse is loss of money, 3 percent believed poor physical well being and 10 percent believed involve in criminal activities respectively. On the other hand, 44 percent non-HPE students believed loss of money, 34 percent believed poor physical well-being, lowest number (8%) believed involve in criminal activities.

The above data shows that both HPE and non-HPE students believed with the option loss of money highly but comparatively HPE students were more than non HPE students.

4.2.6 Respondents' Knowledge about preventive Measures of Drug Abuse

It has been extending its possible co-operation to the national and international communities to eradicate the drug abuse. There is a proverb ' prevention is better than cure. Prevention helps to reduce the problem. For prevention, both the NGOS and INGOS can play vital roles. Students were asked whether they had knowledge about the preventive measure to get rid from drug abuse or not, and response reported by them is presented in table No. 14

 Table No. 14: Respondents Knowledge about Preventive Measures of Drug

 Abuse

Variables	HPE	Students	Non-HPE Students		
	No.	Percent	No	Percent	
Keeping oneself engaged	4	8	9	18	
Health education	18	36	18	36	
Keeping far from bad company	6	12	6	12	
awareness program	22	44	17	34	
Total	50	100	50	100	

Table No. 14 shows that in the option awareness program, the highest number (44%)of respondents had agreed to get rid from abuse. Likewise, 36 percent had agreed with health education and the lowest number (8%) had agreed with the option keeping.

One-self engaged. On the other hand, the highest number (36%) Non-HPE students agreed with health education. Likewise, 34 percent had agreed with awareness program and the lowest number (12%) had agreed with keeping far from bad company.

The above fact shows that, both HPE and non-HPE students had less knowledge about preventive measure to get rid from abuse, but comparatively, HPE students had more knowledge than non-HPE students which might be the reason of studying HPE in higher secondary level.

4.2 The Best Approach to Minimize the Drug Abuse Problem

Preventive education in schools is seen as the primary means by which students can acquire the knowledge and skills to make informed choices about substances use. Peer led, life skills and social influence approaches for prevention have produced replicable, positive behavioral results. Since many internal and external factors influence young people's decisions about substance use, class room efforts need reinforcement and support from the whole school, parents and the local community. They should create a surrounding in which healthy choices are normative choices. Healthy public policy in this area can include controls on the price and availability of alcohol and tobacco, restrictions on advertising and promotion. Students were asked whether they have knowledge about the best approach to minimize drug abuse problem or not, and response reported by them is presented in table No. 15

Variables	HPE Students		Non-HPE Student		
	No.	Percent	No	Percent	
Peer approach	4	8	5	10	
School Approach	15	3	10	20	
Parents approach	6	12	7	14	
Health care provider approach	10	20	7	14	
Mass media approach	13	26	13	26	
Inter personal Approach	2	4	8	16	
Total	50	100	50	100	

Table No. 15: The best Approach to Minimize to Drug Abuse Problem

The table No. 15 shows that, in the school approach, the highest number (30%) HPE respondents agreed to minimize the drug abuse. Likewise, 20 percent agreed with health care provider approach and the lowest number (4%) agreed with interpersonal approach. On the other hand, the highest number (26%) Non-HPE students agreed with the option mass media approach to minimize drug abuse. Likewise, 20 percent

agreed with option school approach and the lowest number (10%) agreed with option peer approach.

Comparatively, HPE students were more knowledgeable than Non-HPE students. It seems that Non-HPE students are deprived of from school education.

4.2.8 Suggestions to Drug Abuser

Students were asked whether they want to suggest the drug abuser or not, and response reported by them is presented in table No. 16

Variables	HPE	Students	Non-HPE Students		
	No.	Percent	No	Percent	
Yes	38	76	30	60	
No	12	24	20	40	
Total	50	100	50	100	

Table No. 16: Respondents Intended to Suggest Drug Abuser

The table shows that, 76 percent HPE respondents wanted to suggest drug abusers. Whereas; 60 percent non-HPE respondents wanted to suggest the drug abusers.

The above fact shows that, HPE respondents are actively awarding the drug abusers than non-HPE students.

4.2.8.1 Suggestions Given by the Respondents for Drug Abuser

Those Respondents who wanted to suggest drug abuser were again asked question that what would they suggest and the response is shown in the table No. 17.

 Table No. 17: Suggestions Given by the Respondents for Drug Abuser

Variables	HPE	Students	Non-HPE Students			
-	No.	Percent	No	Percent		
Prescribed Drug should be used	9	18	8	16		
Drug should not use for entertainment	7	1	13	26		
Harmful for health so given up it	8	16	7	14		
Disturbance in Study	5	10	8	16		
Destroy the personality	13	26	10	20		
Due to the multiple response, percent exceeds more than 100						

In the context of table No. 17, the highest number, (26%) of HPE students reported the option destroys the personality. Likewise, 18% reported the option prescribed drug should be used 14 percent reported the option drugs should but use for entertainment, 16 percent reported the option disturbance in study. On the other hand the highest number (26%) Non-HPE students agreed with the option that drug should not be used for entertainment. Likewise, 20 percent agreed with the option that drug destroys the personality 16 percent reported the option prescribed dug should be used and the option disturbance in study and the 14 percent agreed with the option that it is harmful for health so, give up it respectively.

Above data shows the fact that, HPE students were more knowledgeable that non-HPE students.

4.3 Attitude towards Drugs

This section presents and describes the adolescents' responses on drug abuse related issues. This study examined ten sets of adolescents' perceptions, including drug use, misuse and abuse. Respondents responded according to the 10 point scale to indicate the extent of their perception. And it was later converted into a 3 point scale with disagreement, undesirability and agreement where disagree indicate that student have negative attitude towards the statement, undecided indicates that student have no idea towards the statement and agree indicates student have positive attitude towards the statement.

4.3.1 Attitude of the Respondents towards Drugs

Some questions had been asked to the respondents to know their attitude and their responses has been presented in the table No. 18

		HPE Students					s Non-HPE Students					
Variable	Ι)	U	D	A	A	Ι)	U	D	A	ł
	No	%	No	%	No	%	No	%	No	%	No	%
Drug enhance Personality	35	70	10	20	5	10	20	40	20	40	10	20
Drug Abuse release the mental tension	30	60	5	10	15	30	25	50	16	32	9	18
Prescribed Drug cure the disease	13	26	7	14	30	60	12	24	13	26	25	18
Drug use behavior should be strictly prohibited in public Place	13	26	7	14	30	60	14	28	17	34	19	38
Drug should be used only for medical purpose	5	10	5	10	40	80	12	24	12	24	26	52
Drug should be sold according to the doctor's prescription	4	8	13	26	33	66	14	28	13	26	23	46
Drug should be allowed for personal interest	23	46	12	24	15	30	21	42	17	34	12	24
Drug should be used only in cultural and ritual purpose	15	30	25	50	10	20	10	20	19	38	21	42
Substance use in religious and cultural purpose such as; ganja in Shvaratri and Holi, alcohol in Dashai, Tihar, Birthday Party, new year, picnic etc. is good practice and it should be continued	24	48	20	40	6	12	15	30	25	50	10	20
Over dose drugs is dangerous for health	15	30	5	10	30	60	9	18	16	32	25	50

Table No. 18: Attitude of the Respondents towards Drugs

Note: D= disagree, UD=undecided, A=agree

As it can be seen in table No. 18 that, 70 percent of HPE student disagreed with drug enhance personality, 20 percent remain undecided with the option and 10 percent agree. On the other hand, 40 percent non-HPE disagreed with above option, 40 percent remain undecided and 20 percent agreed with the option and drug enhances personality.

Furthermore, the respondents were asked to show their attitude about the drug abuse releases the mental tension. And according to their response, 60 percent HPE student disagreed, 10 percent remain undecided, 30 percent agreed. On the other hand, 50 percent of Non-HPE students disagreed, 32 percent remain undecided and 18 percent agreed.

Moreover, the respondents were asked to show their response about the prescribed drug cures the disease. According to them 26 percent HPE student disagreed with the option, 14 percent remain undecided, 60 percent agreed with the option. On the same option the response of Non-HPE students were as follow. 24 percent disagreed, 26 percent remain undecided and 50 percent agreed.

Furthermore, the respondents were further asked whether drug use behavior should be strictly prohibited in public places. And the response presented in table No. 18 that, 26 percent of HPE students' disagreed, 14 percent remain undecided and 60 percent agreed. In the context of non-HPE students, 28 percent disagreed, 34 percent remain undecided and 38 percent agreed with the same option.

Similarly, the respondents were further asked whether drug should be used for medical purpose or not and the responses revealed that 10 percent of HPE students disagreed, 10 percent remain undecided and 80 percent agreed. On the other hand, 24 percent of non-HPE students disagreed, 24 percent remain undecided and 52 percent agreed with the option that drug should be used only for medical purpose.

Further, the respondents were again asked whether drug should be sold after doctor's prescription or not. According to the responses presented in the table, 8 percent of HPE students disagreed, 26 percent remain undecided and 66 percent agreed. On the other hand, 28 percent of non-HPE students disagreed, 26 percent remain undecided and 46 percent agreed with the same option.

Moreover, the respondent were further asked whether drug should be allowed for personal interest or not and 46 percent of HPE students disagreed with this option, 24 percent remain undecided and 30 percent agreed. On the other hand, 42 percent of non- HPE students disagreed, 34 percent remain undecided and 24 percent agreed with the same option.

Similarly, the respondents were further asked whether drug should be used only for cultural and ritual purpose or not and according to their response, 30 percent of HPE students disagreed with this statement, 50 percent remain undecided and 20 percent agreed. On the other hand, 20 percent of non-HPE students disagreed, 38 percent undecided and 42 percent agreed with the option that drug should be used only in cultural and ritual purpose.

Furthermore, the respondents were asked whether substance use in religious and cultural purpose is good practice or not and should it be continued or not. In response of this statement, 48 percent of HPE students disagreed, 40 percent remain undecided and 12 percent agreed. On the other hand, 30 percent of non-HPE students disagreed, 50 percent remain undecided and 20 percent agreed.

At last, the respondents were asked that if over dose drug is dangerous for health. In the response to this statement, 30 percent of HPE students disagreed, 10 percent remain undecided and 60 percent agreed with this option. On the other hand, 18 percent of non-HPE students disagreed, 32 percent remain undecided and 50 percent agreed with this option. Over dose drugs is dangerous for health.

The above fact shows that HPE students have positive attitude towards drug use but it is not good result. Similarly, non-HPE students have negative attitude towards drug use. Both HPE and non HPE respondents has reported on undecided option. It seems that they did not have proper knowledge about drug use. Comparatively, Non-HPE respondents had less positive attitude that HPE Students towards drugs.

4.4 Behavior/Practice of Substance Use

In this section, current use of substance, types of substance, reasons for taking substance, age to start taking substance, managing money for substance, further plan about substance use are discussed separately.

4.4.1 Behavior/ Practice of the Respondents towards Substances Use

Questions had been asked to the respondent to know the practice of substance. And their responses have been presented in the table No. 19

Variable	HPE	Students	Non-HPE S	tudents
	No.	Percent	No.	Percent
Yes	28	56	31	62
No	22	44	19	38
Total	50	100	50	100

 Table No. 19 Behavior/Practice of the Respondents towards Substances Use

Table No. 19 shows that, 56 percent of HPE students had used substances while 62 percent of Non-HPE respondents had used substances. Comparatively, the high number of non –HPE students used substances than the HPE students.

4.4.1.1 Substance Used by the Respondents

Various types of substances are easily available in Nepalese market. There are many types of tobacco and alcohol available in the market. Some substance has advantage and some have disadvantages. There are also many narcotics and drugs which are easily available in the medical shops without doctor's perception. The respondents were asked that, which substances they take often and responses reported by them have been presented in the table No. 20

Variable	HPE	Students	Non-HPE Stude			
	No.	Percent	No.	Percent		
Tobacco	9	32.14	15	48.39		
Alcohol	12	42.46	17	54.84		
Drug	9	32.14	11	35.48		
Due to the multiple responses, percent exceeds more than 100.						

Table No. 20 reveals that out of 28 HPE respondents, 32.14 percent used tobacco product, 42.46 percent used alcoholic product and 32.14 percent used drugs. On the other hand out of 31 Non-HPE respondents, 48.39 percent used tobacco product, 54.84 percent used alcoholic product and 35.48 percent used drugs. In comparison, HPE students used less substance than Non-HPE students.

4.4.1.1.1 Types of Substance Used by the Respondents

Those respondents who often used substances were again asked to know whether they use substance for intoxication or to cure the disease that what types of substances they used and the responses has been shown in table No. 21.

Variable	HPE	Students	Non-HPE Students				
	No.	Percent	No.	Percent			
1.Tobacco	i						
Chewing	2	7.14	4	12.90			
Smoking	3	10.71	6	19.35			
Gutkha	4	14.28	5	16.12			
2. Alcohol							
Beer/Wine	5	17.86	6	19.35			
Whisky	1	3.57	2	6.45			
Rum/Vodka	1	3.57	2	6.45			
Homemade Liquor	5	17.86	7	22.58			
3.Drugs							
Ganja	4	14.28	6	19.35			
Charesh							
Brown Sugar							
Narcotics							
Heroin							
Nitrazepam (Tab Goti)	1	3.57	2	6.45			
Prescribed Drugs	4	14.28	3	9.68			
Due to the multiple responses, percent exceeds more than 100.							

Table No. 21: Types of Substance Used by the Respondents

Table No. 21 describes that out of 28 HPE respondents, 32.14 percent used tobacco product. Whereas, 7.14 percent chewed, 10.71 percent smoked and 14.28 percent took Gutkha. Similarly 38.39 percent of Non-HPE respondents used tobacco product.

Whereas, chewing respondents were 12.90 percent, 19.35 percent smoked and 16.12 percent took Gutkha respectively.

Likewise, 42.46 percent of HPE respondents used alcoholic product. Like beer/wine by 17.86 percent whisky by 3.57 percent and rum/vodka by 3.57 percent and homemade liquor by 17.86 percent. On the other hand, 54.84 percent of non-HPE respondents used alcohol. Where, beer/wine was used by 19.35 percent, whisky was used by 6.45 percent, rum/vodka was used by 6.45 percent and homemade liquor was used by 22.58 percent.

Likewise, in the context of drugs, 32.14 percent of HPE respondents used drugs where, 14.28 percent used ganja, 3.57 percent took tab goti and 14.28 percent used prescribed drugs. On the other hand, 35.48 percent of non-HPE respondents used drugs. Whereas, 19.35 percent used ganja, 6.45 percent took tab goti and 9.68 percent used prescribed drugs. This fact shows that, maximum percent of both HPE and non – HPE respondents don't take drugs as a medicine to cure disease rather they take it as intoxicated things.

4.4.2 Respondents' Reasons for Taking Substances

People learn nothing by birth, there are some causes which enforce or influence them to do thing like taking substances. Researcher had tried to find out the causes of substances use behavior which will be helpful to reduce the problem and the responses reported by them have been presented in table No. 22

Variable	HPE	Students	Non-HPE Students		
	No.	Percent	No.	Percent	
To Test	5	17.8	3	9.6	
Cure the disease	3	10.7	3	9.6	
Due to curiosity	5	17.8	2	7.14	
By peer pressure	3	10.7	4	12.4	
Religious purpose	7	25	9	32.1	
Imitation from guardians	3	10.7	4	14.2	
Pleasure	2	7.14	6	21.4	
Total	28	100	31	100	

According to table No. 22 the reasons of taking substances as reported by the HPE respondents are as follows; 17.8 percent used substances to test, 10.7 percent used to

cures the disease, 17.8 percent used substances due to curiosity, 10.7 percent used it due to peer pressure, 25 percent used for religious purpose, 10.7 percent imitated from guardian and 7.14 percent used for pleasure. On the other hand according to non-HPE students, 9.6 percent used substances to test, 9.6 percent used substances to cure the disease, 7.14 percent used substances due to the curiosity, 14.2 percent used substances due to peer pressure, 32.1 percent used substances for religious purpose, 14.2 percent imitated from their guardians and 21.4 percent used for pleasure.

Based on above data, it is found that some number of both HPE and Non-HPE respondents' practice/use drugs to cure disease. So, it seems that both of them are having negative impact of substances.

4.4.3 Age to Start Taking Substances

Easy availability of substances is one of the most important causes of start taking substances. In order to find the existing situation of substances use, and to know whether they were habitual or occasional substances users and do they have just started or from how long they have been taking substances and also the duration of taking substances is presented in table No. 23

Variable	HPE Students		Non-HPE Students	
	No.	Percent	No.	Percent
Below 15 year	7	25	10	32.2
15-20 year	19	67.8	18	58.06
above 20 year	2	7.2	3	9.67
Total	28	10	31	100

Table No. 23: Age to Start Taking Substances.

Table No. 23 shows that out of 28 respondents, 67.8 percent of HPE respondents had started taking substances at the age of 15.20 year, 25 percent started at the age below 15 year and 7.2 percent started at the age above 20 year. On the other hand, 58.06 percent of non-HPE respondents had started taking substances at the age 15-20 years 32.2 percent started at the age below 15 year and 9.67 percent started at the age above 20 year.

It can be said that the highest number of both HPE and Non- HPE respondents had started to take substances at the age of 15-20 year.

4.4.4 Respondents felt after the use of substances

Question had been asked to the respondents to know what do you feel after the use of substances and the respondents reported by them have been presented in table No. 24.

Variable	HPE Students		Non-HPE Students	
	No.	Percent	No.	Percent
Pleasure	14	50	16	51.6
To be superior	3	10.7	4	12.9
Mental relief	8	25.8	7	22.5
All of the above	3	10.7	4	12.9
Total	28	100	31	100

Table No. 24: Respondents felt after the use of substances

Table No. 24 Shows that out of 28 respondents, 50 percent of HPE respondents had felt pleasure, 28.5 percent felt mental relief, 10.7 percent felt to be superior and 10.7 percent felt above mentioned all of them. On the other hand out of 31 respondents 51.6 percent of No-HPE respondents had felt pleasure, 22.5 percent felt metal relief, 12.9 percent felt to be superior and 1.9 percent felt above mentioned all of them.

On the basis of data presented above, it can be said that the highest number of HPE and Non-HPE respondents had felt pleasure after using the substances

4.4.5 Managing Money for Substances

Questions had been asked to the respondents to know how do they manage money for substances and the responses reported by them have been presented in table No 25.

Variable	HPE Students		Non-HPE Students	
	No.	Percent	No.	Percent
Parents	5	17.8	7	22.5
Borrowing from friends	15	53.5	15	48.3
Self	8	28.5	9	29.03
Total	28	100	31	100

 Table No. 25: Managing Money for Substances

Table No. 25 shows that, 17.8 percent of HPE respondents managed money for substances from parents 53.5 percent managed by borrowing from friends and 28.5 percent managed by themselves. On the other hand, 48.3 percent of Non- HPE students managed money for substances by borrowing from friends 22.5 percent managed from parents and 29.03 percent managed by themselves.

On the basis of data presented above, it can be said that the highest number of HPE and Non-HPE respondents managed money from their friends to take substances.

4.4.5 Respondents' Further Plan about Substances Use

After knowing the knowledge of the respondents about drug use, abuse, addiction reasons and its effects. Questions had been asked to know whether they wanted to quit the substances or keep on enjoying in the future too and the responses given by them are in the table No. 26

Variable	HPE Students		Non-HPE Students	
	No.	Percent	No.	Percent
Enjoying	10	35.7	18	58.06
Give up	18	64.2	13	41.9
Total	28	100	31	100

Table No. 26: Respondents' Further Plan about Substances Use

Table No. 26 reveals that, 35.7 percent of HPE students enjoy substances while 64.2 percent plans to give up. However, 58.06 percent of Non-HPE students think of enjoying substances while 41.9 percent are planning to quit the substances. This fact shows that HPE students are comparatively more aware about the substances use than Non-HPE students.

4.5 Summary/Discussion of Findings

In this chapter researcher had tried to draw the findings from the analysis of collected information. A brief summary and Discussion of findings of the research work done so far is given here.

The present study, entitled "Knowledge, attitude and Behavior about the misuse of Drugs between the HPE and Non-HPE Students of Triyuga Higher Secondary School". As it was find out that little research has been conducted in this area and any effective program has not lunched form the government in this area in the present context.

Major literatures were reviewed form the report of different organization related to research topic and also retrieved from internet surfing and some were reviewed from the thesis submitted in health, physical and population education department. By adopting lottery method, 50 students from HPE and 50 students from Non-HPE were selected purposively to study. Data were collected for identifying the knowledge, attitude and behavior on drug misuse abuse and addiction. Only, closed ended questionnaire was used for collecting data.

Analysis and interpretation of data started within the research by the description of personal information of the respondents which con not disclose their personal identity. To meet the objectives of the research, objective wise set questionnaire were used. From data analysis and interpretation it was found that knowledge, attitude and behavior of the respondents towards drugs was not satisfaction but comparatively, HPE respondents were good than Non-HPE and it's all because of lack of education.

It was recommended that Health education in all faculties should be as a major subject.

4.6 Findings

The major findings of the research are given as follows:

4.6.1 Personal Information of the Respondents

- a. In terms of age, the mean age of HPE students was 17.7 year whereas, Non-HPE students was 17.6 year.
- b. In terms of study grade, 48 percent of HPE and 52 percent of Non-HPE respondents were studying at grade 11.
- c. In terms of sex, more than half (56%) of HPE students and 40 percent of Non-HPE students were male.
- d. In terms of parental occupation, 38 percent of HPE and 22 percent of Non-HPE respondents were from farmer background. Similarly, 22 percent HPE and 40 percent Non-HPE respondents were from service holder.

4.6.2 Knowledge about Drug Misuse, Abuse and Addiction

- a) A total of 72 percent HPE and 24 percent Non-HPE respondents had knowledge about drug use.
- b) About 32 percent of HPE and 22 percent of Non-HPE respondents reported that the meaning of drug means tobacco product whereas; 26 percent HPE and 32 percent of Non-HPE agreed with alcoholic drinks.
- c) About 70 percent HPE and 46 percent Non-HPE students had knowledge about drug abuse.
- d) About 30 percent of HPE and 28 percent of Non HPE thought medicine use for entertainment.
- e) More than two third (82% HPE and 76% Non-HPE students) had knowledge about drug addiction.
- f) A total of 46.34 percent of HPE and 26.31 percent of Non- HPE respondents thought that the meaning of drug addiction means drug use for intoxication whereas, 24.39 percent of HPE and 47.37 percent of Non – HPE students thought fully dependence on drug.
- g) A total of 64 percent HPE and 20 percent of Non-HPE students got knowledge about drug abuse from school. Whereas; 18 percent of HPE and 13 percent of Non- HPE students were got from mass media.
- h) More than two third (80% of HPE and 64% of Non- HPE) had knowledge about the effects of drug abuse.
- i) About 20 percent of HPE and 36 percent of Non-HPE students believed that the effects of drug abuse are psychopathic personality whereas; 36 percent of HPE and 34 percent of Non HPE believed that poor physical well-being.
- j) It was found that, 36 percent of HPE and Non-HPE respondent thought health education similarly, 44 percent of HPE and 34 percent of Non-HPE thought awareness program should be conduct to get rid from drug abuse problem.
- k) A total of 26 percent HPE and 26 percent of Non-HPE respondents thought mass media approach is the best approach to minimize the drug abuse problem.
- More than half, (76%) of HPE respondents wanted to suggest drug abuser to give up drug abuse. Whereas, 60 percent of non-HPE respondents had intended to suggest drug abuser.

m) About, 18 percent of HPE and 16 percent of Non-HPE respondents suggested prescribed drug should be used. Likewise, 26 percent of HPE and 20 percent of Non-HPE suggested that substances used destroy the personality.

4.6.3 Attitude towards Drugs Misuse Abuse and Addiction

- a. About 70 percent of HPE and 40 percent of Non-HPE respondents believed that drug does not enhance personality.
- b. More than half, (60% HPE and 50% Non-HPE) respondents believed drug abuse does not release the mental tension.
- c. A total of 60 percent HPE and 50 percent Non-HPE respondents believed prescribed drug cure the disease.
- d. About 60 percent of HPE and 38 percent of Non-HPE respondents expressed their view that drug use behavior should be strictly prohibited in public place.
- e. Nearly two third (80% HPE and 52% Non-HPE) respondents agreed that drug should be used only for medical purpose.
- f. A total of percent HPE respondents were agreed with the option drug should be sold according to doctor's prescription. Whereas, 46 percent of Non-HPE respondents were agreed with the same option.
- g. Nearly half, (46%) HPE respondents expressed their view that, drug should be allowed for personal interest whereas, 24 percent of Non-HPE respondents expressed their view with the option.
- h. About 50 percent of HPE and 38 percent of Non-HPE respondents were confused with the option drug should be used in cultural and ritual purpose.
- i. Nearly half, (50% HPE and 50% Non-HPE) respondents were confused with option substance use in religious and cultural purpose such as; ganja in Sivratri and holi, alcohol in Dashain, Tihar, birthday party, marriage party, new year celebration, picnic etc is good practice and it should be continued.
- j. A total 0f 60 percent HPE and 50 percent Non-HPE respondents agreed with the option over dose drug is dangerous for health.

4.6.4 Behavior/Practice of the Substances Misuse

- a. More than half, (56% HPE and 62% Non-HPE) respondents had misused substances.
- b. About, 32.14 percent of HPE and 48.39 Percent of Non-HPE respondents used tobacco product like; chewing, smoking, gutkha etc. Similarly, 42.46 percent of HPE and 54.84 percent of Non-HPE respondents used alcoholic drinks like; beer/wine, whisky, rum and homemade liquor etc. and 32.14 percent of HPE and 35.48 percent of Non-HPE respondents used drugs like; ganja, Nitrazepam, prescribed medicine etc.
- c. A total of 17.8 percent HPE and 9.6 percent Non-HPE respondents started taking substances to experiment. Likewise, 7.14 percent of HPE and 21.4 percent of Non-HPE respondents started for pleasure.
- d. Nearly two third, (67.8% of HPE and 58.06% of Non-HPE respondents had started taking substances at the age of 15-20 years.
- e. Out of 28 HPE respondents 53.5 percent and total of 31 Non-HPE respondents
 48.3 percent managed money of substances by borrowing from friends.
- f. Out of 28 HPE respondents, 64.2 percent were planning to give up substances use. Whereas, out of 31 Non-HPE respondents 41.9 percent were planning to give up substances use.

CHAPTER-V

CONCLUSION AND RECOMMENDATIONS

5.1 Conclusion

On the basis of above findings, conclusion is drowning here. This study gives the clear information to find out the knowledge, attitude and practice about drug amount the students of HPE and Non-HPE of higher secondary level. In this study, it was found out that, most of the HPE students were farmer background and only few Non-HPE respondents were service holder background. In the context of HPE respondents, the numbers of male students were more than female but in the context of Non-HPE respondents, most of them were female. Most of the HPE students had good knowledge about drug use, abuse, addiction and its effects than Non-HPE respondents but not satisfactory. More HPE respondents were intended to suggest who abuse drug use, abuse, addiction and its effects than Non-HPE respondents but not satisfactory. More HPE respondents were intended to suggest who abuse drug than Non-HPE respondents. And it was also found that, HPE respondents had positive attitude towards drug use and abuse than Non-HPE respondents. Both HPE and Non-HPE respondents were practice substances. Some for religious purposes, some for experiment, some for intoxication, but only few, used for cure the disease. Almost HPE and Non-HPE respondents were planning to give-up. But comparatively, more HPE respondents practice drug to cure disease than the Non-HPE respondents. So, it can be said that, HPE students had proper knowledge, positive attitude and good practice about drug than Non-HPE. Hence, it is necessary to give health education for all faculties students. For this, the government should make HPE as a compulsory subject in all faculties of higher secondary level.

5.2 Recommendations

On the basis of the finding and conclusion of the study on knowledge, attitude and behavior on drug use, abuse and addiction, the following recommendation are forwarded:

5.2.1 Policy Related

- Awareness program should be conducted for needy group through school and concern bodies. Curriculum should be implemented from school and college level about drugs.
- b. Drug abuse is not only a national problem but also local community problem.
 So, to solve this problem, the local government and community members should be encourage to conduct and follow-up anti drug abuse movement for reducing the uncontrolled abuse of drugs.
- c. Students, especially of the age group between 16 to 20 years are found interested in experimenting drugs therefore, it invites school and collage curriculum to include some topics on drug abuse and their harmful effects to transmit knowledge of negative impact of drug abuse on public health and society.
- d. Tobacco, alcohol, ganja, medicine etc. are easily available in market. Therefore, the government should completely ban the distribution, sell and consumption of substances and non-prescribed medicine.

5.2.2 Practice Related

On the basis of the finding and conclusion of the study on knowledge, attitude and behavior on drug misuse abuse and addiction the following practice level recommendation are forwarded.

- 1. To avoid the misuse of drugs.
- 2. Not to use drugs this affects out social norm and values.
- 3. To motivate your colleges not to use it who are the victims of drug abuse /addiction:
- 4. To Avoid the friendship with drug abuser and to use your time on study of magazines, sports and other social activities:
- 5. To give priority on study being determined to do important task in your life.

5.2.3 Further Research Related

Based in the findings and conclusion, the following possibilities of further researches are seen:

- a. It is recommended that further research should be carried out to examine the co-relation between education and drug abuse and its effects. The findings of this study also suggest studying various other variables like cost and work efficiency of the abusers in relation drug abuse.
- b. National survey on drug abuse should be conducted to show real picture of drug abuser.
- c. This study examined only few variables related to drug abuse behavior. This, further study might include various other variables to assess the drug abuse behavior more effectively.
- d. District wise and college wise i.e. private and community comparative study should be carried out for more information.

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APPENDIX-I

Questionnaire

KNOWLEDGE, ATTITUDE AND BEHAVIOUR ABOUT THE USE OF DRUG BETWEEN THE HPE AND NON-HPE STUDENTS OF TRIYUGA HIGHER SECONDARY SCHOOL, 2014

Namaste! You are kindly requested to provide the correct information in each question. It is assured that the information will not be disclosed to anybody specifying your identity. The questionnaire is anonymous and thus you need not have to write your name and any other identification in this questionnaire.

b) Female ()

A. Individual/Personal information

- Age : year
 Sex : a) Male ()
- 3. Level M grade.
- 4. Subject:
- 5. Parents occupation:
 - i. Father
 - ii. Mother

B. Knowledge on drug use

1. Dou you know about the drug?

a) Yes b) No

If yes, what do you mean by drug?

- a) Prescribed medicine () d) Tobacco product ()
- b) Alcoholic drinks () e) Prohibited medicine ()
- c) Drug Stored in pharmacy ()

2. Do you know about drug abuse?

a) Yes () b) No ()

If yes, what do you mean by drug abuse?

- a) Using drugs without doctors' prescription
- b) Using medicine without medical purpose
- c) Medicine use for entertainment

3. Do you know about drug addiction?

a) Yes () b) No ()

If, yes, what do you mean by drug addiction?

- a) regular use of drug () c) Fully dependent on drug ()
- b) Occasional use of drugs () d) Drugs use for intoxication ()

4. From where did you first knew about drug abuse?

- a) Mass media () c) School ()
- b) Friend () d) Family ()

5. Do you know about the effects of drug abuse?

a) Yes () b) No ()

If yes, then what are its effects?

- a) Psychopathic personality () b) Poor physical well-being ()
- c) Involve in criminal activities () d) Loss of money ()

6. What are the preventive measures to get ride from drug abuse?

- a) Keeping oneself engaged () c) Health education ()
- b) Keeping far from bad company () d) Awareness Program ()

7. Which approach do you think will be best to minimize the drug abuse problems?

- a) Peer approach () d) School approach ()
- b) Parents approach () e) Health care provide approach()
- c) Mass media approach () f) Interpersonal approach ()

8. Do you suggest those who are drug abuser?

a) Yes () b) No ()

If yes, what do you suggest?

- a) Prescribed drug should be use ()
- b) Drug should not use for entertainment ()
- c) Harmful for health ()
- d) Disturb in study ()
- e) Destroy the personality ()

C. attitude towards drug

Please indicate the extent to which you agree or disagree with each statement using the following keys.

S.N.	Statement	D	UD	Α
1.	Drug use enhance personality			
2.	Drug abuse release the mental tension			
3.	Prescribed drug cure the diseases			
4.	Drug use behavior should be strictly prohibited in public place			
5.	Drugs should be used only for medical purpose			
6.	Drug should be sold only after doctor's prescription			
7.	Drug should be allowed for personal interest			
8.	Drugs should be used in cultural and ritual functions			
9	Substance uses in religious / cultural purpose such as ganja in Shivaratri and Holi, alcohol in ritual functions and party while celebrating birthday, marriage, Dashin, Tihar, New-year, picnic etc. is good practice and it should be continued			
10.	Over dose drug is dangerous for health			

Note: D= Disagree UD= Undecided A= Agree

D. Behavior/ Practice of Substances

- 1. Have you ever use Substances?
 - a) Yes b) No

If yes, what kind of substances you use?

a)	Tobacco:
	Chewing () Smoking () Gutkha ()
b)	Alcohol :
	Beer/Wine () Whisky () Rum () Homemade Liquor ()
c)	Drugs:
	Ganja () Chares () Brown sugar () Narcotics ()
	Heroin () Nitrazepam (tab. goti) () Prescribed drugs ()

2. What is the reason for taking Substances?

- a) To test () d) Cure the disease ()
- b) By Peer Pressure () e) Religious purpose ()
- c) Imitation from guardians () f) Pleasure ()
- g) Due to Curiosity ()

3. At what age did you start taking substances?

a) Below 15 years () b) 15-20 years () c) above 20 years ()

4. What do you feel after the use of substances?

- a) Pleasure () c) mental relief ()
- b) To be superior () d) all of the above ()

5. How do you manage money for substances?

- a) Parents () b) Borrowing from friends ()
- c) Self () d) other ()

6. Are you enjoying it or you want to give up?

a) Enjoying b) Give up

The End