AIMS, RELEVANCE AND OBJECTIVES
OF THE PRESENT STUDY

Earlier approaches and theories of adolescence depicted it as a period of life characterized by turmoil, stress and turbulent transition (Freud, 1958). Recent perspective emphasizes that it is not just a period of stress and strain, rather a period of human development where biological (including genetics), social and physical changes and challenges occur. Since these changes and challenges are multidimensional and multidirectional they function in a dynamic interaction between the individual and his environment. This developmental contextual view provides a basis for understanding both resiliency and problem behaviours in adolescence (Schulenberg et al., 2001; Mohan, 2006).

One may infer from earlier work on adolescence that given a set of biological and psychological predispositions in a particular social environment, some adolescents may engage in risk taking behaviours and others may not. On the other hand, some adolescents may experiment risk taking in a limited way while others may adapt to health endangering life styles in a bigger way even jeopardizing their future. This means that there are protective as well as predisposing risk factors associated with adolescent health risk and problematic behaviours, viz., smoking and drug usage. Research is needed to focus on both protective and risk factors to understand the complete picture.

Adolescence reflects the most risky and vulnerable life period in consumption of alcohol, cigarette smoking and other drug usage. Although the majority of adolescents who use drugs do not progress to diagnosable abuse or dependence (Wills et al., 1996; Weinberg et al., 1998), the normative use of drugs is a problem too, warranting investigation of this problem behaviour even in a non-clinical (undiagnosed) population. Research also indicates that drug use can
entail the consumption of various drugs at different times, although the types of drugs used typically follow a sequence. For example, adolescents are unlikely to experiment with marijuana without prior use of at least one drug that is illicit, viz., alcohol or cigarettes. Alcohol and cigarettes used normatively are, therefore, called gateway substances predicting adult onset and addiction. The recent statistics in India has indicated that there is an increasing trend in use of alcohol and cigarette smoking among high school students and young college-going students which is alarming. Early consumption of substances like alcohol and nicotine leads to heavy consumption patterns in later adult life and result in serious risks in psychosocial domains like criminal behaviour/ antisocial acts, unstable careers and serious health problems. Thus, there is a dire need to study this problem and identify what conditions lead to adolescent substance use.

Examination of how stress, anxiety, and depression interact in this age group is important. Adolescence is often characterized as an emotionally stormy period. Though most children navigate this transitional period without serious problems, about one-third to one-half of adolescents report significant depressed mood or affective disturbances that could be described as “inner turmoil” or “feeling miserable”. Adolescents tend to show greater extremes in mood than adults. In addition to this emotional volatility, anxiety and self-consciousness also appear to peak at this time.

Pubertal maturation in girls is associated with emotional difficulties, depression, and problems with self-image, as well as an increase in risk-taking behaviours. During early adolescence, girls may also be especially vulnerable to stress, perceiving events to be more stressful at that time than at any other. Anxiety and stress may, thus, play an important part in adolescents’ initiation of alcohol or other drug use. Stress and depression have been found to be the most powerful predictors of adolescent drinking and smoking, next only to influence of peer substance abuse.
The findings of the present study may, therefore, yield useful information to frame preventive and intervention strategies. Needless to mention that preventive attempts to reduce substance abuse in adolescents need to focus not only on the reduction of risk factors, but also on the promotion of protective influences. WHO, (2002) guidelines recommend that enabling the children and adolescents to cope effectively with life’s challenges and stresses and develop inter- and intra-personal skills to say no to drugs is related to lower substance use in adolescence. Utilizing a combination of preventive strategies, i.e., focusing on the protective and risk factors may prove more useful. Earlier the trend was to focus on risk factors only whereas now promoting self confidence, family ties, teaching how to cope with stress, managing emotions etc. are expected to be more beneficial. The analysis and development, prevention and intervention strategies fall into the realm of education, family counselling and social work.

Therefore, the aim of the present investigation was to study the role of protective factors viz., self efficacy, spiritual well-being, parental bonding, adaptive coping and healthy life style and risk factors viz., stress, sensation seeking, depression, aggression/hostility and avoidant coping in drinking and smoking among adolescents of both the genders.

**OBJECTIVES**

The main objectives were to:

1. identify the role of protective factors in smoking and drinking among adolescents.
2. identify the role of risk factors in smoking and drinking patterns.
3. explore whether the protective and risk factors chosen play similar or differential role in smoking and drinking.
4. study gender differences in smoking and drinking.
5. work out educational, counselling and social work implications for prevention of drug abuse.