

CHAPTER VII

SUMMARY AND CONCLUSION

The present study is an outcome of a research undertaken as a part of the doctoral research. The study envisioned to look into the situation of women who were substance abusers or victims of substance abuse.

For this study two sites one in the village and another location in the town area of Churachandpur district was selected. Site 1 is the Tuidum Village at about 7.5 Kms from the town area with 260 Vaiphei households and a total population of 1553, while Site 2 is in the Churachandpur town area, more specifically three localities - Hilltown, New Bazar and New Lamka. From both the sites 46 women belonging to the Vaiphei community were identified who were studied for the purpose of the present study.

7.1: DEFINING SUBSTANCES IN VAIPHEI SOCIETY

The Vaiphei community, one of the Old Kuki groups (Shakespeare 1912), residing majorly in the Churachandpur district, are at the crossroad between tradition and modernity. The Vaiphei live mainly in the state of Manipur, on the Indo-Myanmar border. Like other Kuki tribes, they are not concentrated in one area but live in a number of places, distant from each other and separated by elements of other tribes and by the Meitei of the Manipur Valley (Needham 1959). Traditionally, substances (*khamthei*: trans. ‘to feel high’) comprised of rice beer (*zu*), tobacco (*dum*) and opium (*kani*); while in modern times these appear to have been replaced by market-bought

alcohol, *ganja* and derivatives of opium such as heroin, pills etc. The Vaipheis have three main ceremonies connected with birth, marriage and death where *zu* is excessively consumed – which they believe they had since their origin (i.e., they came out of *khul* with *zu*) (Vaiphei 1975). Additionally, these groups of people are in the contact zone and proximity of the ‘golden triangle’. The use of *cannabis* or *ganja* and home-made brew or alcohol was known since times immemorial for religious purposes — such as the use of *ganja* during Shivaratri during pre-and-post Hindu kingdom of Kangleipak (Manipur). Similarly the use of raw opium, locally called *kanni*, for medicinal proposes on different occasions such as child birth to lessen delivery pains, and for recreational purposes and pleasure was known. The people were likely ignorant of the harms of psychoactive substances and its related health problems as this has no reference in ancient literature. Additionally, drug related crimes were not known nor its impact on the overall society noticeable, though few reports of degradation of families (and individuals) were reported (Go Manipur 2012). Thus, in the past this was not considered a social issue.

The type of substances that were found in a traditional Vaiphei society were – rice beer or traditional alcohol namely *zupi*, *zukha* and *zuning*; tobacco in the form of *dumzial*, *dummuam* and *tuibuk*; *ganja*, *kani* etc. Traditionally, the Vaiphei society did not consider the use of alcohol, tobacco or any other forms of substances as a harmful agent nor there were cases of health issues that resulted out of the use of these substances. Rather, it was a part and parcel of their society and traditional life with many usages and symbolic functions. The use of particularly tobacco water by women and the smoking by the men was never questioned. In modern times, various new forms of drugs started appearing in the market such as heroin, pills etc. Also, with the coming of Christianity, the use of alcohol, tobacco and various other forms began to

face criticism in the society who once revered and savoured them so much. It can be said that the traditional Vaiphei society did not consider the drunkenness of alcohol and other substances as a form of substance abuse but only as a form of merrymaking and festivities. This was also discussed in detail by Mandelbaum (1965) where he mentioned that addiction or compulsive intake of alcohol is not the same as drunkenness, which can be quite normal culturally, and should not be confused with the standard drinking practices of any society. What is more interesting in the present study area is that the women who are identified in the village (Site 1) and by the parameters and methods used in this study are identified as alcohol dependent do not consider themselves as alcoholics or addicts. They disagreed who people in the village branded them as addicts or alcoholics. These women are of the idea that they could perform their duties as a wife at home to their husband and children and that it does not pose any threat or danger to their health and that they are in control of their behaviour. However, in contrast to these findings, the women who are identified as injecting drug users in site 2 are ready to confess that they are an addict and that they cannot live without it. The level of stigma attached to the use of alcohol and drug also seems to differ. Therefore, it is understood that women who drinks alcohol does not consider themselves as substance abusers in the present study while women who are drug users readily accept the tag.

7.2: THEORIZING GENDERED SUBSTANCES

Gender remains as central a determining factor of women's and men's substance use as of other criminal and deviant behaviour, because gender is central to an understanding of our experiences of leisure and work in the 21st century, to our earning potential, to relationships with friends, family and peers, to our construction

of image and identity, to the management of our bodies and our sexualities. At the core of drug use we can see the relationship between the individual, society and the state at the historical, socio-economic and cultural levels (Measham 2003).

The Vaiphei society, like many others, is still strongly a male dominated society and like every Indian society, the status and position of women is lower than that of men, who (the men) are seen as the pride and honour of the family – the ‘prestige system’ (Ortner 1981). Widowhood and divorce usually place women in situations of personal, social and financial hardships (Kermode et al. 2013), even in the studied population. In compliance with the term used by Ortner (1981) from Dumont’s classical formulation, it can be said that the people under study is strongly ‘hierarchical’ but not caste based. The tag ‘hierarchical’ signifies the caste based division in India where a status is largely innate and inherited and not by the wealth and riches one possess. This particular study is free from caste system however the society is not free from segregation in terms of religious, class, social positions etc. The use of drugs by both men and women in the study area can be incorporated to what Ortner believes as the ‘prestige system’¹².

Those who do not fit into this ‘prestige system’ usually faces the challenges of being blamed and cursed for going beyond the prestige system and in this case drug addiction, sex work etc. Drug taking is a hierarchical arena in which men dominate in specific ways (Dorn & South 1990, Denton & O’Malley 1999). Measham (2003) and Sznitman (2007) had done an extensive study on the gendering of drug consumption

¹² The prestige system of any society is the system that defines the ultimate goals and purposes of life for actors in that society. It defines what men and women are, as well as what they are trying to accomplish or to become, and it defines how they can or cannot go about that project (Ortner 1981).

where, Sznitman tried to look into the subjective meaning and the normative boundaries behind the visible trends, while Measham discussed on the socio-cultural context of drug related attitudes and behaviour among both drug users and non-drug users. Sznitman (2007) in her studies on 44 drug users , from Stockholm, both male and female talks about how one cannot begin to understand the differences in drug taking between man and woman without understanding the related subjective meaning among male and female drug users. She uses the analysis of Berger and Luckman (1966) that most important means of subjective reality is constructed through dialogues between individuals, which are used to communicate with others creating symbols that make sense and meaning. This can be interpreted as one's point of views, how a person's view and arguments emerge in dialogue in which one is confronted with the task of explaining and motivating and justifying one's opinion and actions. This idea of justification and views regarding towards one's action is the work of cultural construction visible as the norms that shape the society and giving them the right to point out what is appropriate for the society.

From this perspective, in the present study, it is seen that some informants blamed her immediate family, such as ex-husbands, boyfriends etc. for what they are today. Though we have not come across many drug users to the point of generalizing them, but 'justification' seems to be one of the dialogue they chose to communicate with us.

Sznitman (2007) further argued that women are still considered physically weaker than men, and that how her informant makes body matters, that most of the women still are dependent upon their male counterpart in acquiring their needs for drugs. In a study done among women in Manipur and Nagaland, a group of researchers conclude that women took to drugs mainly due to family conflict, divorce,

widowhood, depression, to overcome shyness and shame associated with sex work etc (Kermode et al. 2013). This projects them as the weaker body in the gender hierarchy in which women drug users call themselves as a burden to their family. In the present study, no doubt the reasons for getting into drugs is the same (as above), female addicts were not as conspicuous as their male counterparts due to the fact that most women got engaged in sex work or drug peddling, which in turn made them independent from the male drug users.

Measham (2002) presented an extensive longitudinal study on women drug users using three theoretical approaches, viz., oppression/victimization perspective, liberation/emancipation, and Messerschmidt's (1997) theory of structured action. The first approach is drawn from Maher's work (2000) on crack cocaine users and sex workers in New York city, which says that women's substance is directly proportional to their structural position and their experiences of marginalization, oppression and exclusion within the wider society. In her second approach, she talks about the increased experimentation of illicit drugs by women, mostly working and single mothers, for pleasure, leisure, recreational and further up to the extent of gendering the body as a site of gendering and medicalization. The third approach, following Messerschmidt (1997), social action is creative, inventive, novel, but it never occurs separately from, or external to, social structures.

These three approaches were used as our theoretical stand in the quest to look into the gendering of drugs in our study. The second approach which is the emancipation and liberation of the body to drugs for leisure and recreational purpose might seem irrelevant where most of the women drug addicts are unemployed and living at the poverty line.

7.3: BORDER TOWN: BOON OR BANE?

Manipur is a small state with different ethnic communities located at the far Northeast India sharing an international border with Myanmar. Manipur is connected to Myanmar through two major routes Moreh-Imphal and Behiang-Teddim, Churachandpur. Since there is no strict vigilance between the two countries illegal trading flourished in this part of the world. The unchecked and unmanned border and check post has made it even easier for the traffickers to carry out their business efficiently. Among the illegal goods that has been smuggled into Manipur are the highest sought after heroin which is supplied by one of the largest producer of opium in the world, Myanmar, of which heroin being the by-product.

Since the beginning of this cross border trade between Manipur and Myanmar, small business started to flourish in Manipur. Business men/women would buy the Chinese made goods at a much cheaper price from Moreh and sell it to other parts of the state and even outside the state. These goods range from eatable items (fruits, rice, garlic, potato, etc.), clothes, shoes, household item, electronic items and the illegal goods such as heroin and pills.

Therefore, the emergence of cheaper Chinese items (locally known as '*Moreh van*') started attracting people to carry out business in their own capacity. It is interesting to know that in Churachandpur, it was done mainly by the women. The travelling duration from Churachandpur to Moreh is approximately 5-6 hours depending on the road condition. While carrying out the legal businesses many of the women fall prey to the illegal business (heroin and other drugs) which have higher tag of money as well. In the process, some of these women started taking these drugs and become addicted to it because of the easy availability and curiosity from the women. While the idea of good business opportunity in the border had given many of the

people in the State the opportunity to live a better life, there are also people who are affected by the kind of goods that travelled through this business and be affected at a greater extent.

7.4: TRIGGERS OF SUBSTANCE ABUSE

From the present study, there are various factors that trigger the Vaiphei women to start using various substances. Some of the major factors that attributed the use and eventual abuse of substances among these women are as follows:

1. Separation of parents
2. Death of a near one
3. Marriage problems
4. Early family responsibilities
5. Rebellion
6. Curiosity
7. Peer Pressure
8. Escape from reality

The indulgence of women in the drug arena could also be attributed to the fact that many of the families in the study area are in the lower economic status or social status and by taking substances they found solace in being high, be in their own world and not think about anything else. However, there are also some who started taking drugs because of curiosity, peer pressure and some who use it for recreational purpose and later on becoming addicted to it.

These are some of the varying reasons behind why women indulge themselves in substance abuse. The idea of an ideal women who are already in a pre-constructed

frame of what a women must wear, do speak and act in the society act as the standard for judging these women and their character. When those ideas and criteria did not fit in into these women they are furthermore pushed aside from the society. This kind of notion that a woman who is indulging herself in drugs is of less morale and should be ostracized from the society needs a serious look back and discussing about what can be done to prevent this kind of further victim to drug users should be focussed. These women are discriminated and stigmatised in the society. They are looked down and frowned upon, for this reason coming home and living with the family was just not possible for them. For some of the women, they are disconnected from their family while for some of them just out of sheer choice they prefer to stay aloof from their family and society. It can also be said that their journey into the world of drugs and sex work was not easy for them either but due to certain circumstances and short coming they had to resort to these sorts when they are left with no other options.

7.5: CURRENT SCENARIO: VILLAGE VERSUS TOWN

In this study, the village under study and the town area possessed a different kind of environment for the women. The village has a more rigid and conservative set up in terms of measuring the character and behaviour of a woman. This could be mainly because the village lived as a close knit family and everyone knew each other well. In the village, the Chief under his chairmanship looked after the administration of the village. They did not allow any ‘illegal’ activities to take place in the village – selling of alcohol and drugs, and thus we can see very few women who are taking alcohol, but no drugs. However, it is interesting to see that tobacco products are not banned in the village and are seen hanging in every shops in the village. The two women drug users who happened to be from the village had ‘migrated’ from the village and settled

in the town area mainly due to social pressure. The conservative nature of the people in the village can be seen as one of the reason behind the women leaving the village and moving to the town area where they were less recognised. The Church in the village has also done a lot of work in fighting against the menace of alcohol and drug addiction by engaging the youths of the village in various Church activities and through counselling during gospel camps etc.

The town area, on the other hand, was a different scene altogether. As discussed in Chapter 2, it comprised of many other tribes with people coming from various other places for economic and educational opportunities. The town area also comes under the administration of the town authority chairman and its members which however is not as the same that is seen in the village. The town area is the place where any form of business and activities take place. People lead their own life and do not deal much with what is going on in someone else's life. The kind of closeness, connection and relationship that were seen in between families in the village were not so visible in the town area. Additionally, the strict societal vigilance and customary practices seen in Vaiphei society is majorly missing here. Thus, this has given women who later became substance abusers a kind of freedom to do whatever they want and live their own kind of lifestyle. When people started living this kind of life, in Vaiphei society it is called as '*khawsung ah kidawlllo*' which translates as someone who does not 'fit in' in the village. We can also form an understanding that the people in the village (Site 1) still have doubts about people moving to the town area unless for genuine reasons such as work posting, education, etc.

7.6: SUGGESTIONS AND FUTURE PROSPECTS

In conclusion, the following suggestions can be put forward:

1. Women substance abusers are still very much neglected in the society as well as in the field of research. There has been very less studies that concentrate on the women substance abusers which could possibly be because they are lesser in number compared to the male substance abusers. The triggering influences and consequences that led them to lead this kind of lifestyle needs to be uprooted from the core and more detail studies and analysis has to be done among these marginalised population. In comparison with the male substance abusers, women abusers are seen to be have faced more harsh family attitude, domestic violence and lack of social support which in turn increase the vulnerability of these women.
2. Most of the existing works concentrate on health and rehabilitation of women. However, detailed narrative analysis and in-depth study into the life of women substance abusers with a larger number of subjects in a cross-cultural setting could prove to bear better results in understanding the reasons behind women's entry and indulgence into psychotropic substances.
3. There is a need for a better facility with a day and night DIC for emergency services in the area. Since DICs are primary care givers, they theoretically function as the core agency. In such a situation, if the DICs do not function upto its optimum or have a specific 'open' hours – it can no longer discharge the duties it is supposed to.
4. There is a strong need for women rehabilitation centre in the study area, there is not a single women only rehabilitation centre and this puts women who want to enter into rehabilitation in a difficult situation. Women only

Rehabilitation Centres should be made available to women who want to avail these facilities. Although the number of women substance abusers are few in numbers, they cannot be neglected and marginalised in terms of seeking rehabilitation.

5. In order that the women (also men) receive healthy and safe injection, a drug injection room should be made available with trained nurses so that there will be lesser chances of blockages and abscess in the body. This kind of safety rooms has been followed in many European countries and it has proved successful in guiding the injecting drug users from overdose and abscess management.