

Drug Addiction And Criminal Propensity Of Adolescents In Relation To Their Delinquency Proneness

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Abstract

Criminal activity and substance abuse are closely related. The severity of violent crimes and criminal behavior may be correlated with the extent of drug addiction. In the case of the younger population, this relationship is more concerning and serious. Through a case study in an NGO de-addiction center that serves juveniles in Delhi, the current study aims to gain a deeper understanding of the phenomena of drug addiction and juvenile delinquency in the younger population. Interviews with the juveniles, volunteers, mental health specialist, and branch project manager of the center were semi-structured. Three field visits with the research team resulted in thorough field observations being documented. The results of a theme-based data analysis showed that drug addiction and juvenile delinquency have a complicated relationship with a range of policy, sociocultural, and psychological ramifications. At the NGO, the effectiveness of therapeutic interventions was also evaluated. To depict the juvenile's journey from entry to exit, a representative model was built. It was discovered that a variety of factors contribute to the beginning, continuation, and intensification of drug abuse, usage, and criminal activity. These results are thoroughly described in the paper.

Keywords: Drug addiction, therapy interventions, rehabilitation, and juvenile delinquency.

Objectives

1. To check the impact of crime in the society.
2. To check the impact of drugs on human health
3. To check the mental health of adolescents

Introduction

It seems that teenagers have historically been the cause of a variety of issues and the origin of special challenges. Teenage issues have been discussed in the scrolls going all the way back to the early Greek thinkers. Plato wrote that Socrates said,

The children now love luxury; they have bad manners, contempt for authority; they show disrespect for elders and love chatter in place of exercise. Children are now tyrants, not the servants of their households. They no longer rise when elders enter the room. They contradict their parents, chatter before company, gobble up dainties at the table, cross their legs, and tyrannize their teachers. (Platt, 1989, p. 42).

Later, William Shakespeare wrote, "I would there were no age between ten and three-and-twenty, or that youth would sleep out the rest; for there is nothing in the between but getting wenches with child, wronging the ancestry, stealing, fighting" (1623, *The Winter's Tale*, III.iii).

Contrary to Plato and Shakespeare, Rice (1995) suggested that adolescence and adolescent delinquency are relatively new concepts. He implied that the industrial revolution, by changing the dynamics of work and the family, made property crime and other crimes easier. Menel (1982) suggested that juvenile delinquency emerged in the late 19th century, confirmed by the first U.S. juvenile court opening in Illinois in 1899. As evidenced by the formation of this court, adolescent antisocial behavior has captured the imagination of policy makers and academics for over 100 years, regardless of how long "juvenile delinquency" has existed or exactly when it emerged.

A Case Study of Drug Addiction in Juvenile Delinquents

The researchers for this case study were motivated to conduct this investigation after viewing a 2012 Connaught Place, New Delhi, YouTube video titled "Kamlesh Soluchan." In a brief interview, 13-year-old Kamlesh, a junk picker, confessed to being hooked to a variety of narcotics, including alcohol, marijuana, hash, opium, heroin, and inhalants, in addition to nicotine (found in beetles and cigarettes). He only paid rupees 20 for his food, but he spent the most of his earnings on narcotics. Since he slept well and was generally in a blissful condition, he felt that there was no point in trying to quit the drug. He didn't have any big life goals. He flatly refused to answer the interviewer's question about whether he wanted to return to his hometown because his mother would not allow him to use inhalants or do drugs. He did not give a damn whether he passed away quickly because he had a carefree attitude about death. The film may be unsettling to some viewers because, although it appears to be a hilarious satire, it actually draws attention to a serious issue that the entire globe is facing.

Menace of drug abuse

Drug misuse poses a grave threat to human life, impacting not only the addict but also their friends, family, and numerous other individuals in direct, indirect, or incidental ways. Drug misuse and criminality rates among 356 million Indian youth are on the rise. The NCRB reported that from 2018 to 2019, rates of juvenile delinquency rose by 2%, with 75.2% of all juvenile offenders being between the ages of 16 and 18. Delhi is the third-largest contributor to juvenile crime in all of India, accounting for 8.6% of the total, despite the fact that its estimated kid population is far lower than that of most other Indian states (56 lakhs) (National Crime Records Bureau, 2019).

Coupled with this is another worrisome fact; most drug abusing youth involved in crime come from an underprivileged background. Delhi alone has an estimated 1 lakh or more street children

(Naik, Bansode, Shinde, & Nirgude, 2011), with 4 to 8 lakhs being the total estimate for the entire nation given by UNICEF (Chatterjee, 1992) – which rose to 2 million in 2009 according to a study by Save the Children, India (Kanti, 2018) and substance abuse is reported as a major health problem in this segment of the population. According to information given by the Ministry of Social Justice and Empowerment in 2017, more than 90 per cent of street children in Delhi-NCR are addicted to drugs (Shakil, 2018). The psychiatry department of IHBAS (Institute of Human Behaviour and Allied Sciences) in Delhi estimates that over 87 percent of the total examined adolescents had a history of drug abuse, while a report by the DCPCR (Delhi Commission for the Protection of Children's Rights) on substance abuse by children found that 100 percent of children in conflict with the law were drug abusers in 2015 (Sharma, 2016). These statistics reflect an alarming situation about the link between drug abuse and juvenile delinquency in the Indian context. A survey conducted by the Society for the Promotion of Youth and Masses (SPYM) and the National Substance Dependency Treatment Centre (NSDTC), AIIMS, New Delhi, in 2015 in Punjab, where 2,32,856 drug abusers were identified in 10 districts, is a horrifying example of a long ignored drug abuse crisis caused by a combination of such socio-environmental factors—ongoing agrarian crisis in the state coupled with easy availability of narcotic substances, a profit nexus between drug associations, organized crime, politicians and legal set-up, police and a lack of opportunities for profitable jobs (Phukan, 2018).

Etiology

Juvenile delinquency and drug abuse have a multi-faceted and overlapping etiology which includes familial, social, psychological, environmental and economic factors (Jenkins & Zunguze, 1998; Noyori-Corbett & Moon, 2010). Social factors such as the culture, neighbourhood and family play a vital role in initiation, perpetuation, and even escalation of drug use and criminal behaviour in an individual. Family structure and functioning; broken homes, absent or problematic interpersonal relations, lack of balanced parenting, lack of guidance, economic instability, substance abuse or addiction in the family or among peers, access to addictive substances and exposure to physical, sexual, emotional abuse or trauma violence and peer pressure can lead to and perpetuate juvenile delinquency (Bachman, Wadsworth, O'Malley, Johnston, & Schulenberg, 1997)

High stress and personality traits like high impulsivity or sensation seeking, depression and anxiety are some psychological factors that can lead to usage of substances and criminal behaviour. People who develop substance use disorder have excessive dependency which might get reinforced initially because it reduces tensions and raises spirits. Linked to this reduction is the expectancy that drugs will be comforting and helpful due to which their use persists. A positive relationship between hyperactivity, concentration or attention problems, impulsivity and risk taking and later violent behaviour has also been reported (Hawkins, et al., 1998).

Alcohol

A cultural staple in many countries, its excessive intake serves as the introductory step to misuse of many other substances. Of the total 14.6% of Indian population that consumes alcohol, 1.3%

are youth between 10-17 years of age (Ambekar, et al., 2019). Overdrinking has several short and long term impacts on cognitive, psychological and biological functions such as lowered inhibitions leading to poor judgments, trouble in concentrating, coordinating, perception (especially vision), trouble learning, mood changes, slowed reaction times, difficulty remembering, confusion and loss of consciousness, depression, diminished gray and white matter in the brain, memory loss, stroke, high blood pressure, irregular heartbeat, liver fibrosis and throat, mouth, breast and liver esophageal cancer(Monico, 2020).Long-term effects include conditions such as disruption of person's job performance, personal relationships, legal issues etc.

Nicotine

Nicotine is another legally available substance used on a daily basis by 24.9% (232.4 million) of Indians aged 15 and above as reported by the Ministry of Health and Family Welfare through the Global Adult Tobacco Survey or GATS 2(TISS, 2016-17). It is mostly consumed through chewing of khaini, gutka, zarda and smoking of beedi and cigarettes. Non-smokers have to face its illeffects since they are often forced to inhale passive smoke. Many smokers report arousal, relaxation and perceived stress relief due to smoking however it puts people at high risk of developing various health complications such as chronic bronchitis, peptic ulcer disease, stroke, diabetes, heart diseases and loss of sense of taste or smell in the long run. Once dependence sets in, withdrawal from nicotine causes symptoms such as headaches, drowsiness, nausea, sleeping problems, excessive weight gain or loss, concentration difficulties and mood swings.

Cocaine

Cocaine is a status symbol in India, has a high price tag and is famous among rich urban elite Indians. Cocaine addiction develops swiftly and can create psychological dependence greater than any other drug. Other stimulants such as LSD and ecstasy are used increasingly as part of “rave” parties. Short term effects of such stimulants include increased heart rate, constriction of vessels causing cardiac arrests, suppression of appetite and prevention of sleep. It also elicits positive moods, makes person friendly, energetic, and produces brief sense of euphoria. Withdrawal may lead to dizziness, confusion, panic states, irritability and depressed mood. It’s long-term effects however include the disruption of occupational and social roles, heart problems, respiratory effects, digestive problems and long term usage may lead to onset of psychosis, increase in violent behaviour, depression which may cause suicidal tendencies(NIDA, How does cocaine produce its effects?, 2020).

Heroin

Heroin is a type of opioid that can be injected, sniffed, snorted or smoked (also known as Chitta, Brown sugar and Smack). Based on a survey by NDDTC and AIIMS, 77 lakh issue opioid consumers are reported to be in the country as of 2019 (Ambekar, et al., 2019). Heroin binds to opioid receptors in the brain and body that send a surge of dopamine and intense pleasure through the body, much like other opioids.Dry mouth, nausea and vomiting, extreme itching, and clouded thought are among its short-term symptoms. A very strong dose can interfere with breathing and

lead to death. Insomnia, heart infections, liver and kidney failure, collapsed veins, depression, and extreme addiction are among its long-term consequences. Addicts to heroin are much more likely to die from AIDS, aggressive actions, suicide, etc. As reported by Punjab Police in 2018, despite its high price heroin is abused widely regardless of class and income in Punjab since many turn to peddling as a source of income while others steal to sustain their habit. (BBC India, 2018) This also reflects on the severe life conditions faced by farmers in India.

Cannabis

Cannabis in both its legal form (bhang) and illegal forms (charas/hashish, ganja) is the second most commonly consumed substance (after alcohol) alongside opioids in India. About 3.1 crore individuals (2.8% of the population) reported use of cannabis product in 2018 (Ambekar, et al., 2019). Depending on the duration of use and the individual, the impacts of cannabis usage vary. Short-term effects can include feeling a sense of happiness and well-being, relaxation, talkativeness accompanied by need to munch on something. Withdrawal may cause difficulty sleeping, anxiety, depressed mood, irritability and restlessness. It may cause lapses in memory, concentration problems, trouble in retaining and organizing information.(National Health Service UK, 2017).

Consequences of Drug Addiction

In those who inject drugs, the risk of having HIV or hepatitis C infection—two diseases transmitted by blood and other bodily fluids—is also increased as sharing needles or other injection equipment is often used. The practice of indulging in unprotected sex, which heightens the chance of contracting HIV is also more prevalent among drug users. The abuse of different drugs has also been found to prevail with different types of crimes. As per a review conducted at Prayas observation home for boys, Inhalant use was found to be high among juveniles convicted of rape, cannabis was common among those accused of murder, while opioid and heroin use was higher in mugging and snatching-related crime convicts. Crimes of a more serious nature were found to co-exist with abuse of psychoactive substances. (IHBAS, 2016).

Treatment

Drug treatment is of critical importance not only for abusers and their families but also to reduce the crime rate in the society overall. It may include psychotherapy (such as cognitivebehavioral therapy or management of contingency), medications, or their combination. Based on the individual needs of the person and often on the types of drugs they use, the precise type of treatment or mixture of treatments can vary (NIDA, 2020). The initial step of treatment is usually detoxification. This requires the removal of material from the body and constraining withdrawal responses. As per the drugs they used, detoxification is hard for many people. Withdrawal effects may be more physical or mental depending on the substance.

Detoxification also involves medications that replicate the effects of drugs to reduce withdrawal symptoms. Medicines can also treat co-occurring diseases or overall discomfort. While recovering

from a drug-related disorder and its associated complications, a person may take medication on a daily basis. However, during detoxification, people frequently use medication to control symptoms of withdrawal. The treatment may differ depending on the substance to which the individual is addicted. Behavioural therapies also may help motivate addicts to engage in drug treatment, provide strategies to cope with drug cravings, suggest ways to avoid drugs and prevent recurrence, and help people cope with relapse when it happens. Behavioural therapies can also help enhance communication skills, interpersonal skills, parenting skills, and family structure.

As per the person's specific needs, therapy may occur on a one-to-one, group or family basis. At the beginning of therapy, it is usually intensive with the frequency of sessions slowly decreasing over time as symptoms subside (Felman, 2018). Juveniles who continue to abuse substances are also more likely to pursue their crime careers. The drug-crime cycle reflects that substance abuse and crime similar risk factors (Chassin, 2008). A study by Plattner, Giger, Bachmann et al. (2012) too found rates of psychopathology to be high in detained juveniles which suggests that the same cycle of drug abuse and crime was at play among juveniles.

To pay for their habit of drug use, addicts turn to violence. Drugs reduce restraint and weaken judgment that can lead to violence. It is a vicious cycle. In addition to impacting financial stability, addiction raises tensions and causes any member of the family untold emotional pain. The loss in terms of human potential is incalculable, with most drug users being in the active age group of 18-35 years. The damage to the physical, psychological, moral and intellectual growth of the youth is very high (Nadeem, Rubeena, Agarwal, & Piyush, 2009)

Chassin (2008) focused on the high prevalence in the criminal justice system of drug use disorders among young offenders and on attempts by the justice system to provide care for these disorders. A lack of aftercare services and a lack of coordination of services in the juvenile justice system indicate the need to establish models of treatment that incorporate and organize multiple services for adolescent offenders, particularly community-based approaches, both during and after their justice system involvement. Malhotra, Sharma, Ingle, and Saxena (2006) in a study carried out in Delhi, showed that peer groups and media were chief etiology for initiation of drug use and criminal activities and it progressed gradually from tobacco and alcohol use to other drugs.

Conclusion

Previous research has indicated a connection between childhood trauma and juvenile criminal conduct. It is true that exposure to familial violence and neglect as children have been found to be significant indicators of a later propensity to engage in criminogenic behaviors throughout one's lifetime. The accumulation of adverse childhood experiences (ACEs) has also been connected to criminal conduct, depression, PTSD, and abusive and conflict-ridden adult interpersonal relationships. The optimal environment for a person's personality development is their family. It provides the foundation for a well-ordered society where everyone can live in safety and security and acts as the cornerstone of the community. The family and society create an unbreakable and interdependent tie, and it is important to maintain this bond by generally supporting human.

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