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A Study on Drug Abuse among Teenagers in Chennai

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ABSTRACT

"Substance over sanity" - This sobering reality underscores our study on teenage drug abuse and its correlation with criminal behavior in India. The research titled "High Risk, High Crime: Exploring the Nexus Between Teenage Drug Abuse and Criminal Behavior in Chennai" aims to investigate the causes behind teenagers' drug abuse and examine its correlation with criminal behavior, focusing on Chennai. Employing a descriptive research approach, data were collected from 200 Chennai residents through convenience sampling methods. The findings reveal a significant correlation between drug-addicted teenagers and criminal behavior, with 34% and 42.5% showing this relationship. Drug abuse transcends socioeconomic boundaries, affecting upper-class segments across urban, semi-urban, and rural areas, with urban areas emerging as pivotal environments where drug usage distinctly influences individuals. Psychological ramifications, societal stigmatization, and inadequate social support are prominent factors contributing to teenage drug abuse. Future perspectives include developing targeted intervention strategies for urban areas where drug abuse is more prevalent, implementing comprehensive support systems addressing psychological, social, and economic factors contributing to drug abuse, enhancing awareness programs focusing on the link between drug abuse and criminal behavior among teenagers, conducting further research on effective rehabilitation methods for drug-addicted teenagers involved in criminal activities, and advocating for policy reforms that prioritize treatment and rehabilitation over punitive measures for drug-addicted youth. This study highlights the urgent need for a multifaceted approach to address teenage drug abuse in Chennai and its connection to criminal behavior. By understanding and addressing the complex factors involved, we can work towards creating more effective prevention and intervention strategies, ultimately aiming to break the cycle of substance abuse and crime among youth.

Keywords: *crime, addiction, teenager, Chennai, drugs.*

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I. INTRODUCTION

(A) Evolution of Drug Abuse and Its Socio-Economic Impact in India

India has undergone significant transformation over the years, influenced by a complex interplay of socio-economic, cultural, and global factors. The nation's historical relationship with substances like cannabis and opium, which hold cultural and religious significance in certain regions, has evolved markedly. This essay delves into the evolution of drug abuse in India, its socio-economic impacts, and the multifaceted strategies implemented to combat this pressing issue.

(B) Historical Context and Early Regulation

Historically, the use of substances like cannabis and opium in India was intertwined with cultural and religious practices. These substances were often used in traditional medicine and rituals. However, the mid-20th century marked a shift in perception and regulation. Between the 1950s and 1970s, India, aligning with international conventions, began focusing on controlling drug use due to growing concerns about substance abuse. The establishment of the Narcotics Control Bureau (NCB) in 1986 was a pivotal moment in coordinating actions for drug law enforcement and drug abuse prevention. The NCB's role was crucial in the formulation and enforcement of policies aimed at curbing the spread of narcotics.

(C) The Rise of Drug Abuse in Urban India

The 1980s and 1990s witnessed a significant rise in drug abuse, particularly among urban youth. This increase can be partly attributed to exposure to Western culture and influences. During this period, substances like cannabis, heroin, and pharmaceutical drugs became more accessible, leading to higher usage rates. Urban areas, with their dynamic social structures and greater access to these substances, became hotspots for drug abuse. The liberalization of the economy in the early 1990s also contributed to this trend, as increased disposable income and changing lifestyles among the youth facilitated higher drug consumption.

(D) Emergence of New Drugs and Changing Patterns in the 21st Century

In the 21st century, the emergence of synthetic drugs, party drugs, and newer substances has mirrored global trends. The internet and social media have played a significant role in this shift, providing access to information and illicit drugs, thereby impacting drug consumption patterns among the public. This era has also seen a rise in the abuse of prescription medications, particularly opioids and other pharmaceutical drugs. The availability and misuse of these medications pose a significant challenge, as they are often perceived as safer compared to illicit

drugs, leading to their widespread abuse.

(E) Factors Influencing Drug Abuse

1. **Biological Predispositions:** Genetic factors and biological vulnerabilities can predispose individuals to substance abuse, impacting their likelihood of developing addiction.
2. **Environmental Influences:** Socioeconomic status, peer pressure, and the availability of substances significantly influence drug abuse patterns. Adolescents and young adults, in particular, are vulnerable to peer pressure and the desire to conform to social norms, leading to experimentation with drugs.
3. **Family Dynamics:** Family environment and dynamics play a crucial role in either protecting against or contributing to substance abuse. Dysfunctional family relationships, lack of supervision, and exposure to substance abuse within the family can increase the risk.
4. **Cultural Norms:** Cultural attitudes towards substances vary across regions and communities. In some areas, traditional use of substances like cannabis may be more socially accepted, influencing patterns of abuse.
5. **Mental Health Conditions:** Co-occurring mental health disorders, such as depression and anxiety, are strongly linked to substance abuse. Individuals with untreated mental health issues often resort to drugs as a form of self-medication.
6. **Substance Availability:** The ease of access to drugs, including through online platforms, significantly impacts consumption patterns. The proliferation of dark web markets has made it easier for individuals to procure illicit substances discreetly.
7. **Media Portrayal:** The portrayal of drug use in media and entertainment can glamorize substance abuse, particularly among impressionable youth. The normalization of drug use in movies, music, and social media can influence attitudes and behaviors towards drugs.

(F) Government and Community Interventions

1. **Awareness Campaigns:** Nationwide awareness campaigns aim to educate the public about the dangers of drug abuse, dispel myths, and promote healthy lifestyles. These campaigns leverage various media platforms to reach a broad audience, including vulnerable groups such as adolescents and young adults.

2. **Community Outreach:** Engaging communities in the fight against drug abuse is crucial. Community outreach programs involve local leaders, educators, and healthcare professionals in creating supportive environments that discourage substance abuse.
3. **Law Enforcement:** The Narcotics Control Bureau and other law enforcement agencies play a pivotal role in curbing drug trafficking and distribution. Stringent measures and coordinated efforts at national and international levels aim to dismantle drug networks and prevent the inflow of illicit substances.
4. **Rehabilitation Centers:** Establishing and maintaining rehabilitation centers is vital for the treatment and recovery of individuals suffering from substance abuse disorders. These centers provide comprehensive services, including medical treatment, counseling, and social reintegration support.
5. **Collaboration with NGOs:** Non-governmental organizations (NGOs) play a significant role in supplementing government efforts through grassroots initiatives. NGOs often focus on harm reduction, providing education, support services, and advocacy for affected individuals and their families.
6. **Policy Reforms:** Recent policy reforms emphasize a balanced approach, prioritizing treatment and rehabilitation over punitive measures for drug-addicted individuals. This shift recognizes addiction as a health issue that requires medical and psychological intervention rather than solely a criminal problem.

(G) Future Directions

1. **Targeted Interventions:** Develop targeted intervention strategies for urban areas where drug abuse is more prevalent, considering the unique socio-economic and cultural contexts.
2. **Comprehensive Support Systems:** Implement comprehensive support systems that address psychological, social, and economic factors contributing to drug abuse. This includes enhancing mental health services and providing social support networks.
3. **Awareness Programs:** Enhance awareness programs focusing on the link between drug abuse and criminal behavior among teenagers. Schools and community centers can serve as key venues for educational initiatives.
4. **Research on Rehabilitation:** Conduct further research on effective rehabilitation methods for drug-addicted teenagers involved in criminal activities. Evidence-based practices should inform the design and implementation of rehabilitation programs.

5. **Advocacy for Policy Reforms:** Advocate for policy reforms that prioritize treatment and rehabilitation over punitive measures for drug-addicted youth. Policies should be designed to support the holistic recovery of individuals and their reintegration into society.

The evolution of drug abuse in India reflects broader socio-economic, cultural, and global influences. Addressing this complex issue requires a multifaceted approach that encompasses prevention, treatment, law enforcement, and community engagement. By understanding the underlying factors and implementing comprehensive strategies, India can work towards mitigating the impact of substance abuse and supporting affected individuals. The ultimate goal is to create a society where youth are protected from the dangers of drug abuse and are empowered to lead healthy, productive lives.

(H) Objectives:

1. To find the reasons for usage of drugs among teenagers
2. To investigate the relation between drug addicted teenagers and crime

(I) Literature Review

Sathyamurthi K (2008) attempted to determine the use of substances during adolescence. The researcher followed is descriptive research. The major findings is more than four-fifth percent of respondents using substances for fun.

Gunjan Kumar(2021) attempted to determine the oral health status and treatment needs of drug abusers. The cross sectional study was conducted in drug rehabilitation. Oral health status of drug abuser's is poor and needs immediate attention. Oral health education needs to be imparted among them.

Sai Sandhya(2018) investigates to study awareness of drug abuse among teenagers. The data were collected through a survey consisting of 100 participants . Multifactorial prevention programmes include social norms,gender role,image incorporating drugs,religion,school would be more influential that would lead to better results.

Nivetha Aravind(2023) attempted to determine the substance abuse is an emerging disorder of global concern. The researcher used a qualitative approach. It is necessary to bring positive behavioural changes through adoption of comprehensive interventions and health education.

Keerthana Ganapathy(2016) investigated the involvement of youngsters in drug abuse. The researcher adopted descriptive research consisting of 1640 sample sizes. The youngster needs to educate about it and counsel young children and adolescents and to create awareness among

the public regarding drug abuse.

Dr. Shikha Murmu , Dr. Mahendra Singh(2017) attempted to identify the socio-demographic characteristics of substance abusers. The research was conducted through a semi structured questionnaire. 70.2% of the patients were addicted to alcohol and India showed that in the age group 15-24 years the prevalence of alcohol consumption was 1% females 19% of males.

Rajesh Bhawariya(2020) investigated to assess the knowledge related to substance abuse adolescents. The researcher adopted descriptive research. Students had inadequate knowledge of drug abuse and boys possessed more knowledge than girls.

Sandhya K, Poornima(2021) examined to determine the level of knowledge and regarded substance abuse. The researchers conducted a baseline survey. The knowledge on de addiction and its services was poor and post intervention. It increased by 22%.

Pritam Prakash, Anushka(2021) examined to know the level of knowledge and perception of drug abuse among school students. Cross sectional study was adopted and data were collected through a questionnaire. The peer pressure, easy availability of drugs in the community are chief contributory factors that lead to substance abuse.

Sunil S Solomon(2011) investigates the intersection between sex and drugs. The convenience sampling was adopted. 22% and 25% reported ever using non injection drugs and alcohol respectively

Farhan Khalid(2020) examined the impact of stigma on patients receiving substance abuse. The cross sectional study was taken by the researcher. The sample size is 100. Heroin, opium and brown sugar are among the most commonly abused substances that are 55% of our study population.

T Gupta, N Shah(2012) determined to assess the oral health and related practices of a group of illicit drug users. The cross sectional study was adopted using a structured questionnaire. The findings of study suggest that illicit drug use is independently associated with poor periodontal health.

Chris Beyrer(2011) examined human rights abuses occurring among IUDs. The convenience sampling was adopted. There is a high prevalence of human rights abuses among IDUs, alarming rate of suicidal ideation its close relationship with human rights abuses.

R Ponnudurai(2001) investigated to assess the suicidal attempts of wives of substance abusers. The descriptive study was adopted by the researcher. The disharmony created by substance abusers in the social sphere by way of fighting with others has been a driving force for some

women.

Singh M, Bala N(2017) has observed that 446 adolescents got affected by drugs during the study period. Substance use is becoming common for children nowadays. It is necessary to counsel and create awareness among children.

Magaji(2013) have studied for many years ,various governments and communities have found a new form that has evil society, and is eating deep into the productivity sector of the economy as it directly affects the youth.

Angur Dhital(2013) conducted a study to determine the knowledge and attitude of school going adolescents regarding reproductive health, sexual behaviour, AIDS, STD and drug abuse before and after structured teaching programmes in selected schools of Nepal. The size was 200 selected schools going adolescent.

Pushpa Bhagwanji Patil(2009) conducted a study of the drug addicts with reference to social, psychological and economical problems. The result revealed among 160 drug addicts majorities were in the age group of 20-30 years,unemployed, lower income group, and belong to joint family.

Elnager et al.(2010) reported a prevalence rate of 13 per 1000 in West Bengal, while Nandi et al gave a figure of 0.94 per 1000 of the total population for the same state. Similarly in Uttar Pradesh, Dube and Handa reported that 22.8 per 1000 were dependent on alcohol and drugs while Thacore from Lucknow gave a figure of 18.55 per 1000. Important finding of these studies is that alcohol was the commonest substance used (60-98%) followed by cannabis use (4-20%).

Stockwell(2001) reported that there was once a time when college students represented some of America's most lively, ambitious and energetic population. However, the teenage drug abuse and alcohol abuse of today has severely tarnished that image. "...Attitudes toward society among college students today have changed beyond recognition".

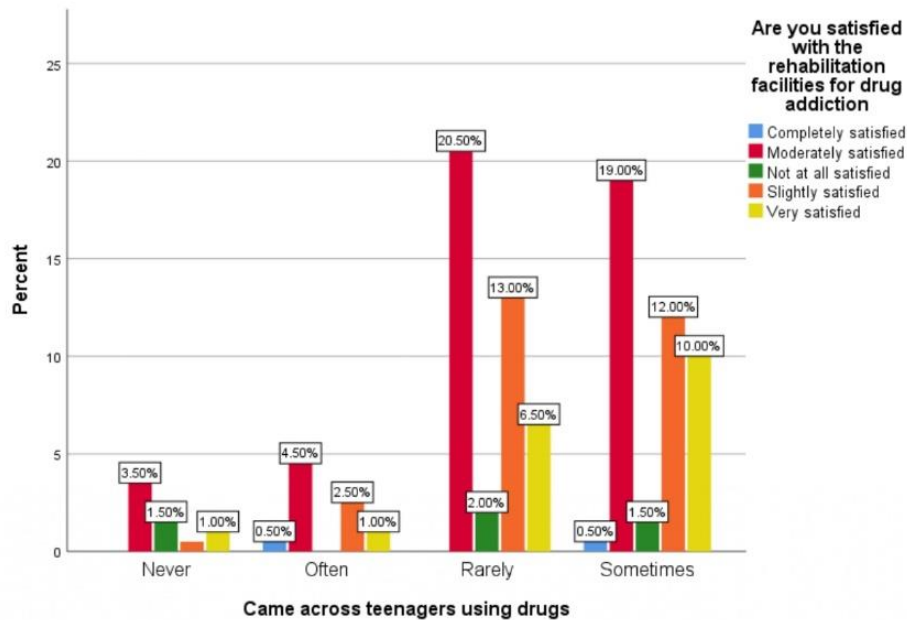
(J) Methodology

The study relies on descriptive research using primary data gathered through convenient sampling in Chennai. It employs structured questionnaires to gather information on independent variables such as age, gender, place of residence, educational qualification and occupation. The study examined dependent variables, including reason for drug usage, respondents' view on the correlation between drug use and crime. The types of organised crime involving drug addicted teenagers, respondents encounters with addicted teenagers, their geographical distribution and ratings on government initiatives and rehabilitation centres for drug addicted teenagers.

Statistical analysis involves tool like bar graph and utilisation of chi square test via SPSS.

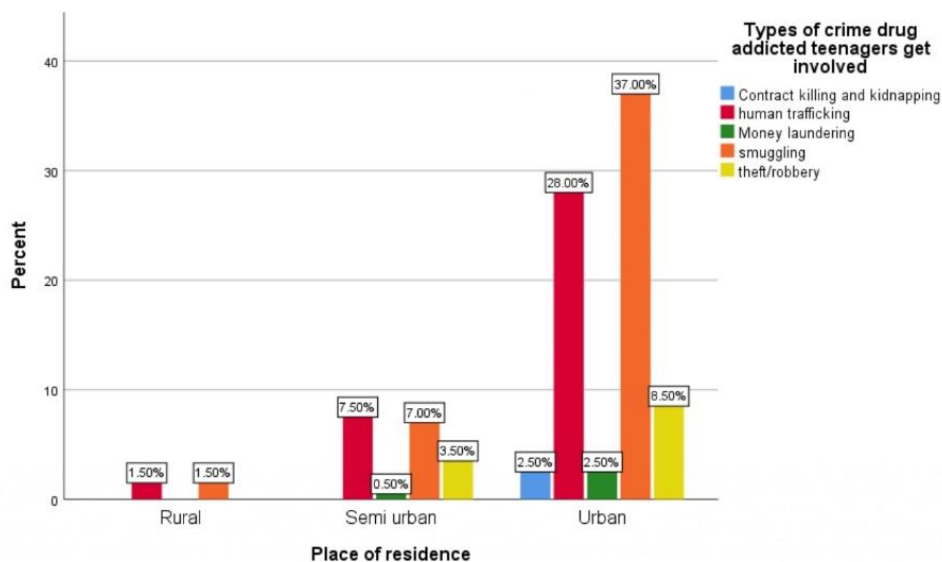
II. ANALYSIS

FIGURE 1



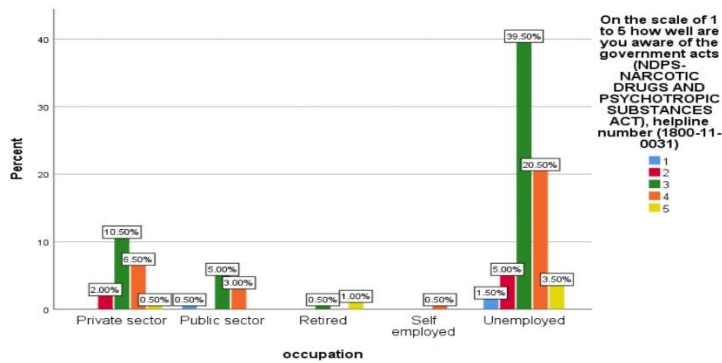
LEGEND: Fig 1 represents that repondents's encounter with drug addicted teenagers and its satisfaction of rehabilitation facilities for those teens

FIGURE 2



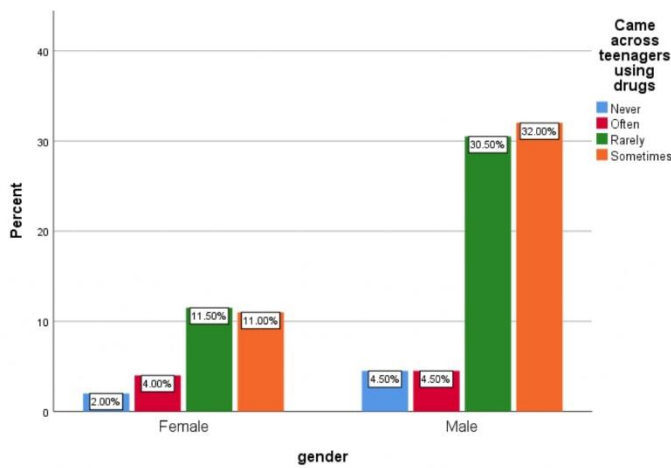
LEGEND: Fig 2 shows place of residence of sample respondents and their opinion on the type of crime drug addicted teenagers dwells upon

FIGURE 3



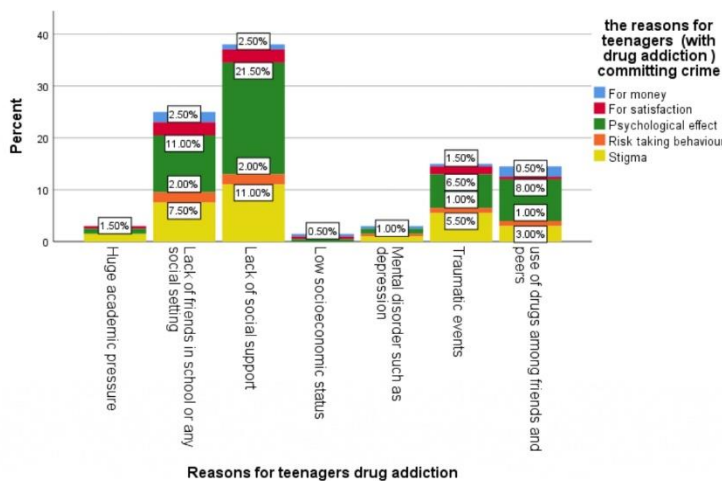
LEGEND: Fig 3 represent the respondents occupation and the rating of government acts and centers for drug addicted teens

FIGURE 4



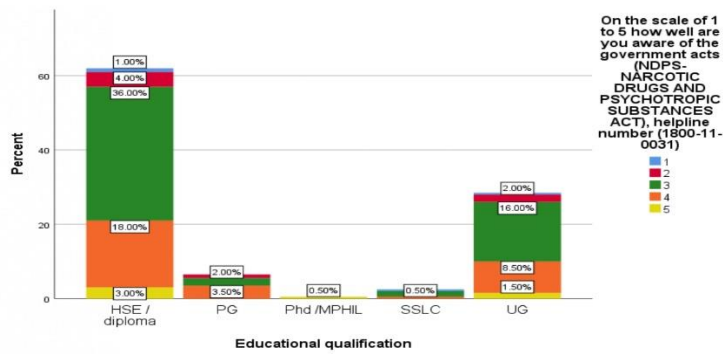
LEGEND: Fig 4 represent the gender of the respondents and their encounter of drug addicted teenagers

FIGURE 5



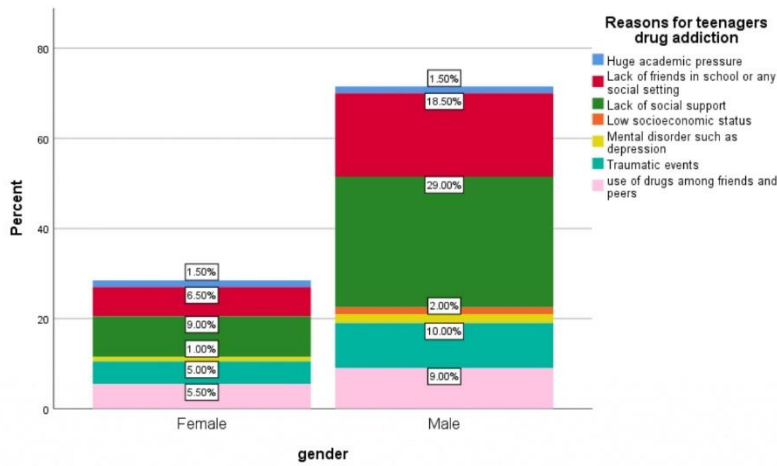
LEGEND: Fig 5 shows the general reason of drug addiction and those reason where teenagers dwell in crime

FIGURE 6



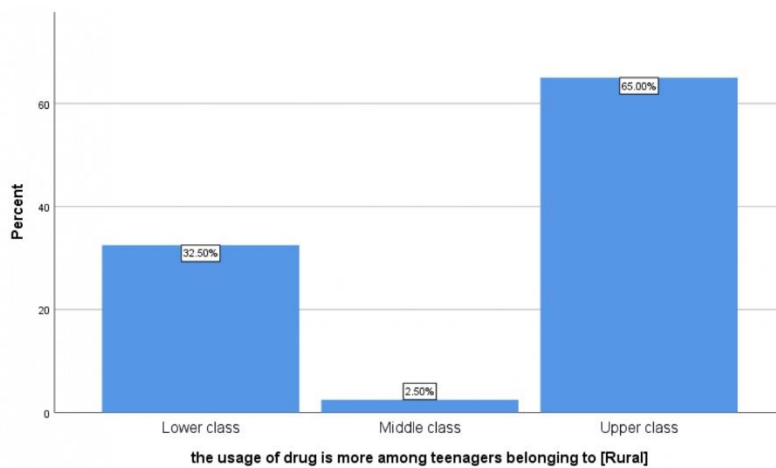
LEGEND: Fig 6 represent the have respondents educational qualification and the rating of Government acts and initiatives for drug addicted teenagers

FIGURE 7



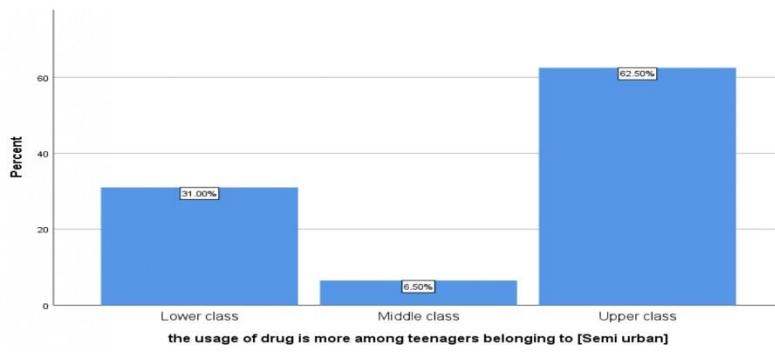
LEGEND: Fig 7 represent the gender of respondents and the reason for teenagers consuming drugs

FIGURE 8



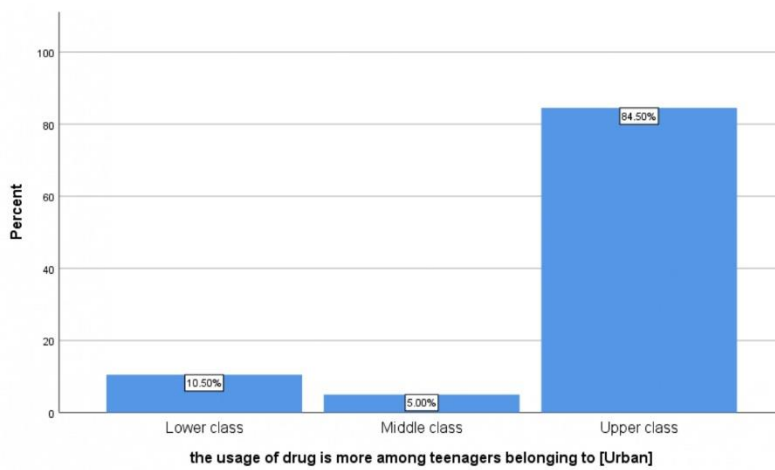
LEGEND: Fig 8 represent the usage of drugs among teenagers belonging to rural areas

FIGURE 9



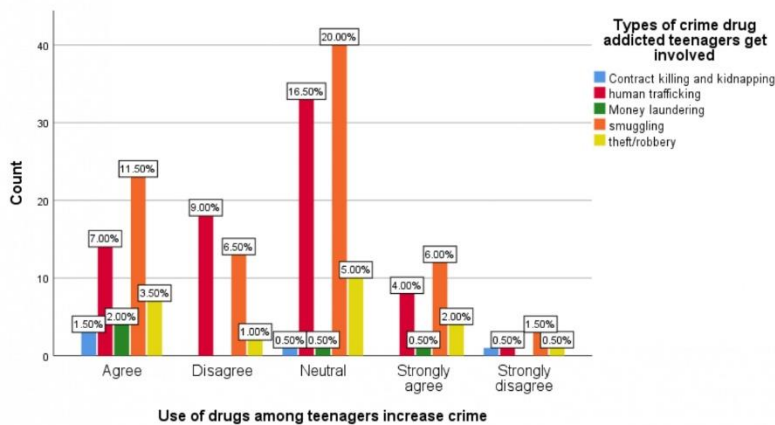
LEGEND: Fig 9 represent the usage of drugs among teenagers belonging to semi urban area

FIGURE 10



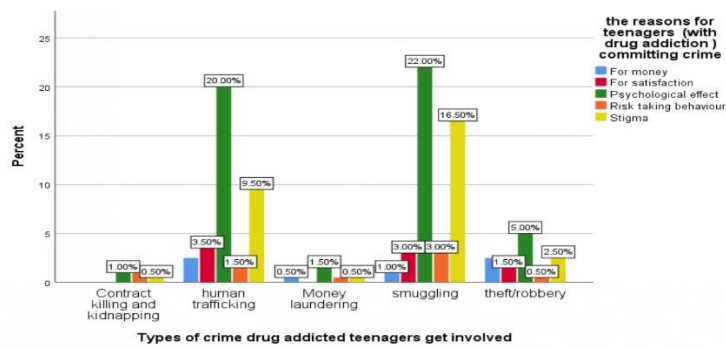
LEGEND: Fig 10 represent the usage of drugs among teenagers belonging to urban areas

FIGURE 11



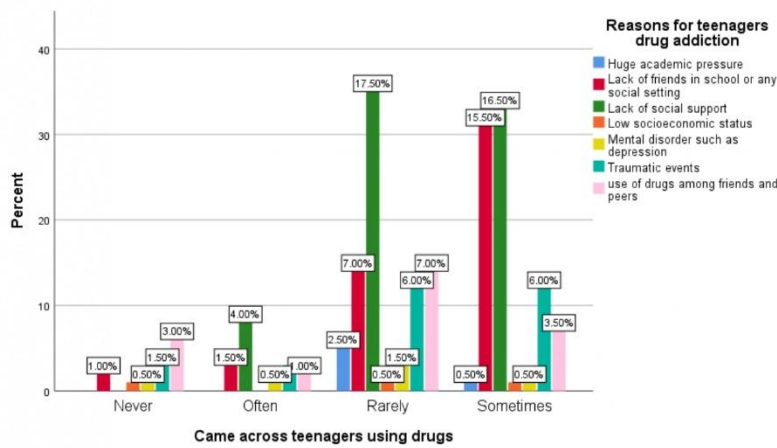
LEGEND: Fig 11 represent the chart of usage of drug increase crime and types of crime drug addicted teenagers do

FIGURE 12



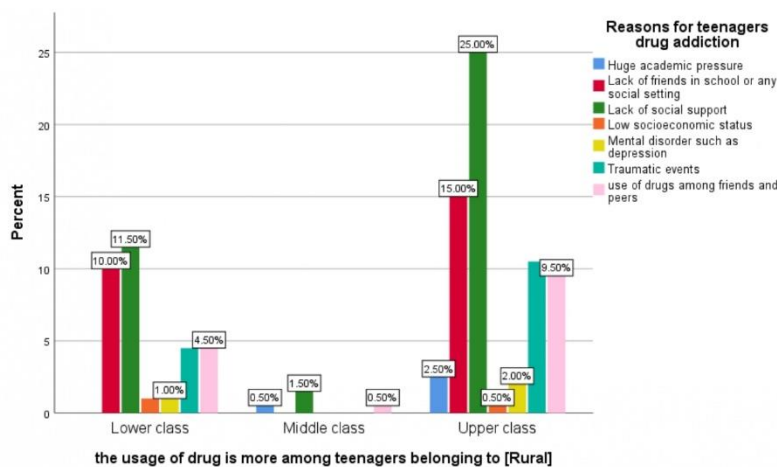
LEGEND: Fig 12 represent the type of crime drug addicted teenagers involved and the reason for the teenagers committing the crime

FIGURE 13



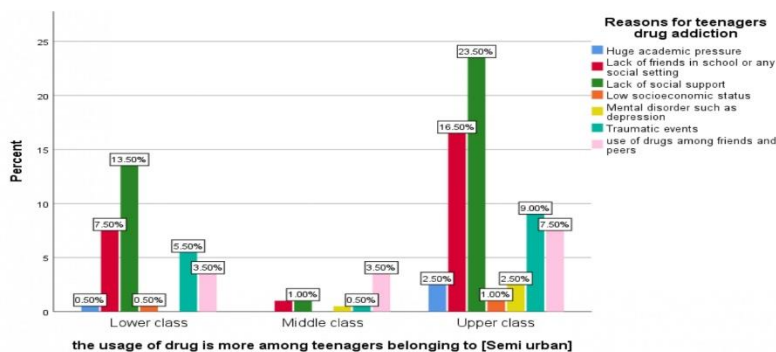
LEGEND: Fig 13 represent the frequency of teenagers using drug and respondents witnessing it with reason for consumption of drug

FIGURE 14



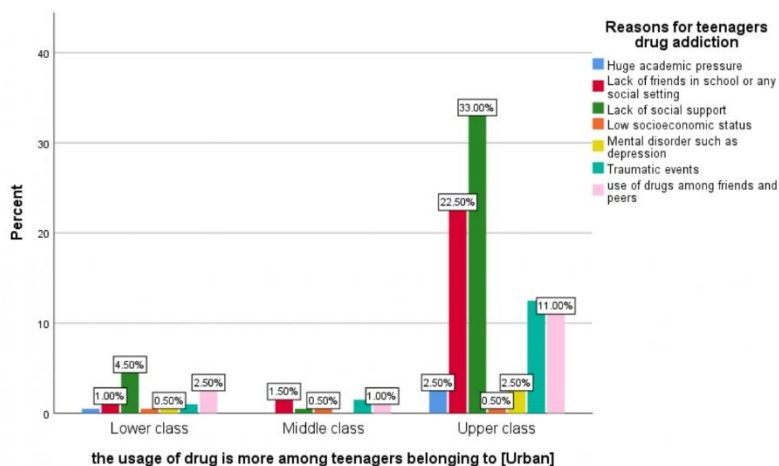
LEGEND: Fig 14 represent the chart of teenagers belonging to rural area use drugs and reasons for teenagers consuming drugs

FIGURE 15



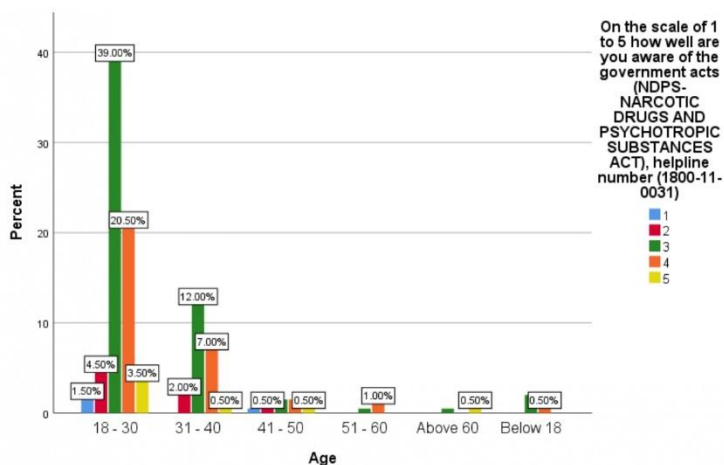
the usage of drug is more among teenagers belonging to [Semi urban]
 LEGEND: Fig 15 represent the chart of teenagers belonging to semi urban area use drugs and reasons for teenagers consuming drugs

FIGURE 16



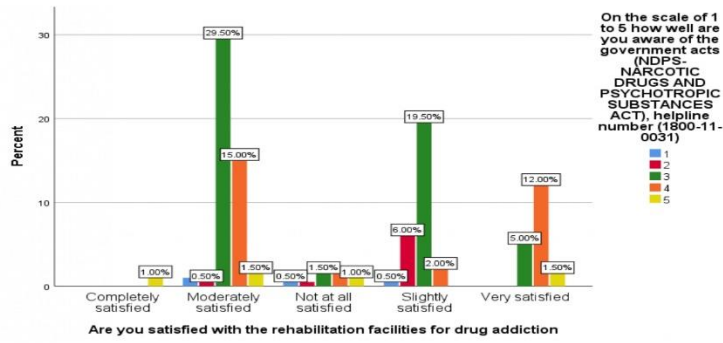
the usage of drug is more among teenagers belonging to [Urban]
 LEGEND: Fig 16 represent the chart of teenagers belonging to urban area use drugs and reasons for teenagers consuming drugs

FIGURE 17



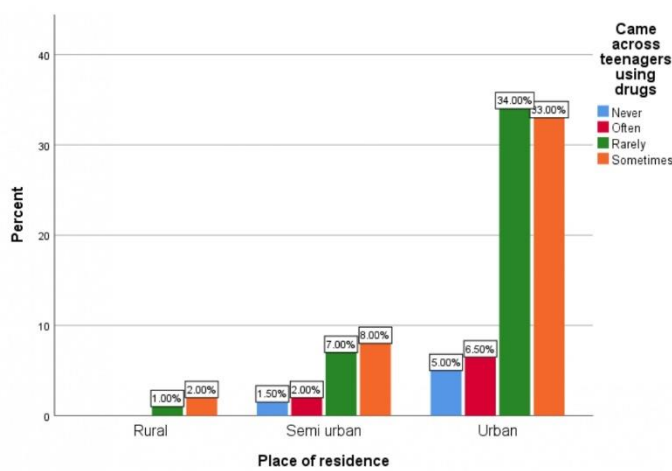
LEGEND: Fig 17 represent the age of respondents and rating on the government acts and helpline

FIGURE 18



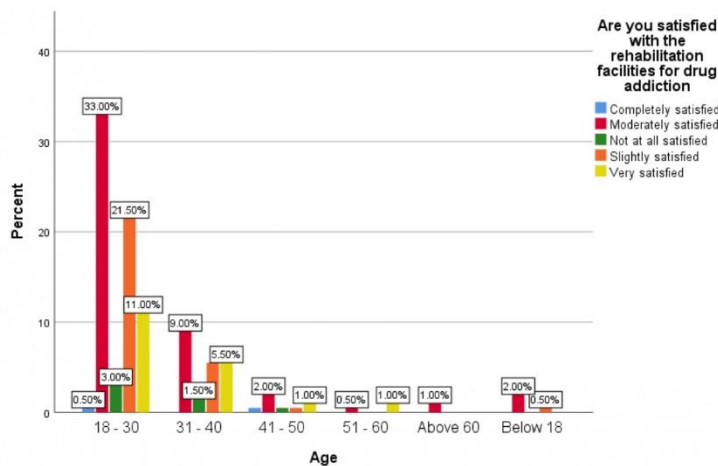
LEGEND: Fig 18 represent the satisfaction of rehabilitation facilities of drug addiction center and rating scale of government acts and helpline

FIGURE 19



LEGEND: Fig 19 represent the respondent place of residence and they coming across drug addicted teenagers

FIGURE 20



LEGEND: Fig 20 represent the age of respondent and satisfaction of respondents on rehabilitation center for drug addiction

III. RESULT

Figure 1 represents that respondents encounter with drug addicted teenager and its satisfaction of rehabilitation facilities for those teenagers who are addicted to drugs, when in 20.50% of the respondents have said that they have rarely come across Who are moderately satisfied of the rehabilitation And 13% of the same category say slightly satisfied And 19%, 12% and 10% of respondents of the category Who selected sometimes they have been encountering teenagers using drugs say they are moderately satisfied, slightly satisfied and very satisfied with the rehabilitation facilities of drug addiction, respectively

Figure 2 represents the place of residence of sample respondents and their opinion on the type of crime drug addicted. Teenagers develop upon wearing an urban respondent say that 37% and 28% they are dwelling into human trafficking and smuggling semiurban respondents of seven. 50% and 7% and 3.50% say that they develop upon human trafficking, smuggling and tiff and robbery and rural respondents of one.50% say that they dwell into human trafficking and smuggling.

Figure 3 represents the respondent occupation in the rating of government act, centres for drug addict, addict, addict, addict, addict, unemployed respondent of 39.50% say that they have been better in their facilities and act given for drug addicted teenagers and 20. 50% say they are good in their acts and re application facilities where is 3.50% and 5% say that they are very good and very bad in their facilities, respectively. Respondents belonging to private sector say that 1050% They are better at 10 facilities of NDPS and their aware on their particular particular act and 6.50% say they are very well aware of the act respectively

Figure 4 represent the general of the respondent and their encounter of drug addicted teenagers wherein 32% and 30.50% and 4.50% of male respondents have encountered something, rarely and often the drug addicted teenagers, 11%, 11.50% and 4% of female respondent have sometimes rarely often encounter Drug addicted teenagers respectively.

Figure 5 shows the general reason for drug addiction and those reasons were teenagers dwelling in crime. Due to drugs they consume where in 21.50 % of the teenagers who say lack of support in the social society is the reason and also they commit crime due to the stigma level providing the society 11 % of the same category say that psychological effect is also a reason And 11% of them say that lack of friends in school or any social setting is a reason for drug addiction and their reason for committing their crime is due to the psychological effect and 0.5% and 1.50% say that traumatic events use of drugs among friends and peers is a reason for they dwell into drug addiction and they commit crime mostly due to their psychological effects stigma and For

money, respectively

Figure 6 represent the respondents, educational qualification and the rating of government act and initiatives of drug addicted teenagers 36% have studied HSE/Diploma have better awareness of acts and rehabilitation centre 18 % of the respondents of same category have said that they are very well aware and the respondents who have studied undergraduate say that 18% 8.50% 1.50% are aware very well aware and fully aware of the programs available respectively.

Figure 7 represents the gender of respondents and their reasons for the teenage is consuming drugs 29% 18.50% 10% 9% and 2% and 1.50% of male respondent say that reasons for drug abuse is lack of social support, due to lack of friends in social or any social setting, traumatic events, use of drugs among friends and peers, socioeconomic status, mental disorders and academic pressure.

Figure 8 represents the usage of drugs among teenagers belonging to rural areas, where in 65% upper class 32.50% are lower class in 2.50% are middle class

Figure 9 shows the usage of drugs among teenage is belonging to the semi urban area that where 62.50% upper class in class 31% are lower and remaining 6.50% middle class

Figure 10 shows the usage of drugs among teenagers belonging to the urban 84.50% belonging to upper class 10. 50% or lower class 5% middle class.

Figure 11 represents the People's opinion on the usage of drug addict teenagers and their committing crime on the types of crying those teenagers dwell 20% and 16.50% of respondents neutral agree on the fact that they dwell into human trafficking and smuggling. Those respondents who say they strongly agree are 6%, and 4% also have the same opinion And 11.50% in 7% of respondents who say they agree. In fact, respondents have the same opinion that dwelling into the crime of human trafficking and smuggling. respondents of 9% and 6.50% who disagree on the fact say human trafficking and smuggling is the factor they dwell into respectively.

Figure 12 represents types of crime drug addict teenagers are involved in and the reason for the teenagers is committing the crime 20 % of the respondents say that 12% are into human trafficking and it's due to the psychological effect and 9.50 % of the respondents. It is due to the stigma provided in society. 22% of respondents say that 12% are into smuggling and 16.50% it is due to stigma.

Figure 13 represent the frequency of teenage is using drugs and respondent witnessing it with the reason for consumption of drug 17.50% of respondents say lack of support in the society is

the reason for teenage drug addiction and they have witnessed them rarely in their locality and 7% say lack of friends in social or any social setting, and 6% of them said due to their traumatic events they had in their past 15.50% of respondent and 16.50% of respondent say lack of friends and so school or any social setting and their lack of social support is there recent for consumption of drug and they have witnessed Drug addicted teenagers sometimes in their locality.

Figure 14 represent the chart of teenagers belonging to rural area and their reason for consumption of drug, 25% of respondents say upper class teenage is use drugs due to their lack of social support and 15% of respondents say they use it due to their lack of friends in school or any social setting and 9.50% and 10% say there use due for traumatic events and use of drug among friends and peers. 11.50% and 10% respondent say Lower class teenagers, use it for the same reason respectively

Figure 15 shows the teenage is belonging to semi urban areas use of drugs and their reason for it 23.5% and 16.5% of respondent say upper class teenagers use drugs due to their lack of social support and their mingling with peer and friends and 9%,7.5% say the reasons is traumatic events and use of their friends and peers wherein 13.5% and 7.5% have the same opinion but they say teenagers belonging to lower class are addicted to drugs respectively.

Figure 16 shows that teenagers belonging to urban area use of drugs and their reason for consumption 33%,22.5%,11% and 11.5% respondents say teenagers belonging to upper class use drugs due to lack of social support, peers and social setting lackness, traumatic events and usage among teens and 2.5% say its reason is mental disorder.

Figure 17 represents the age of respondents and the rating on the government acts and helplines, 39% and 20.5% of respondents belonging to age category 18 - 30 beeper and good facilities and acts had been initiated by NDPS dept 3.5%,4.5 and 1.5% say on the scale its decreasing form the highest. 12%,7% and 2% of respondents belonging to the age category of 31 - 40 say the same respectively.

Figure 18 represent the facilities of rehabilitation drug addicted centres and the respondents rating scale on government acts and helpline wherein 29.5% and 15% say they are moderately satisfied and rating is better and good Slightly satisfied respondents of 19.5%,6%,2% have better good moderate in their ratings of NDPS act and helplines and very satisfied respondents of 5%,12%,1.5% of respondents say better good and very good in their acts and helplines respectively.

Figure 19 shows the respondents place of residence and their encounter of drug addicted

teenagers in their locals wherein 34% and 33% of urban respondents say they have rarely and sometimes encountered drug addicted teenagers where in 7% and 8 % of semi urban area respondents say the same and 1% and 2% of rural respondent encountered the same respectively.

Figure 20 represent the age and acts and helpline facilities of NDPS ACT here 33% and 21.50%,11% of respondents under the age category of 18-30 say they satisfaction level increase on (slightly to completely) in the rating scale respectively wherein 9% and 5.5% of respondents in the age 31 - 40 say (moderately to complete) satisfied in the rating order of NDPS ACT and helpline respectively.

IV. DISCUSSION

Figure 1: Respondents' encounters with drug-addicted teenagers and their satisfaction with rehabilitation facilities show that varying percentages of respondents, categorised by frequency of encountering drug-addicted teenagers, express different levels of satisfaction with rehabilitation centers. For instance, those who encounter drug-addicted teenagers rarely or sometimes generally express moderate to slight satisfaction with the available rehabilitation facilities.

Figure 2: This figure depicts the respondents' residential locations and their perceptions of the type of crime drug-addicted teenagers are involved in. It shows a tendency for urban respondents to believe that drug-addicted teenagers are more involved in crimes related to human trafficking and smuggling compared to semi-urban and rural respondents.

Figure 3: Occupational categories of respondents and their opinions on government acts and facilities for drug-addicted teenagers display varying degrees of satisfaction. Notably, unemployed respondents seem less satisfied compared to those in the private sector.

Figure 4: This figure highlights the gender-based differences in encountering drug-addicted teenagers. Both male and female respondents encounter drug-addicted teenagers, with varying percentages across different levels of encounter frequency.

Figure 5: It explores the reasons behind drug addiction among teenagers, attributing factors like lack of social support, psychological effects, stigma, and peer influence as major contributors. These factors seem to differ in their impact on drug addiction and subsequent criminal behaviour among teenagers.

Figure 6: It correlates educational qualifications with awareness levels about government acts and initiatives for drug-addicted teenagers. Higher educational qualifications seem to align with

increased awareness about rehabilitation programs and acts.

Figure 7: This figure sheds light on the gender-based perspectives on reasons for teenage drug abuse, encompassing social support, friendships, traumatic events, peer influence, socioeconomic status, mental disorders, and academic pressure.

Figure 8, 9, and 10: These figures illustrate the usage of drugs among teenagers in rural, semi-urban, and urban areas, categorizing them by class. Urban areas, especially the upper class, seem to have a higher percentage of drug usage among teenagers.

Figure 11 and 12: These figures present the opinions and perceptions of respondents regarding the types of crimes drug-addicted teenagers are involved in and the reasons behind their criminal behavior. Psychological effects and societal stigma appear as prominent reasons behind certain crimes.

Figure 13, 14, 15, and 16: These figures delve into the frequency and reasons for drug consumption among teenagers based on their residential areas and class distinctions. Lack of social support, traumatic events, peer influence, and social settings emerge as common factors contributing to drug addiction across different areas and classes.

Figure 17 and 18: They discuss the respondents' age groups and their ratings of government acts and rehabilitation facilities for drug-addicted individuals. Younger respondents generally seem to express higher satisfaction levels with the provided facilities and initiatives.

Figure 19 and 20: They highlight the encounters of drug-addicted teenagers in respondents' localities and the correlation between age groups and satisfaction levels with government acts and helpline facilities related to drug addiction.

These figures collectively present a comprehensive overview of respondents' perceptions, encounters, and opinions regarding drug addiction among teenagers, the reasons behind it, and their satisfaction levels with available rehabilitation facilities and government initiatives.

CHI SQUARE TABLE 1

NULL HYPOTHESIS :

There is a significant relationship between the place of residence and teenagers usage of drugs in urban areas

ALTERNATIVE HYPOTHESIS

There is a no significant relationship between the place of residence and teenagers usage of drugs in urban areas

TABLE 1

Count

		Came across teenagers using drugs				Total
		Never	Often	Rarely	Sometimes	
the usage of drug is more among teenagers belonging to [Urban]	Lower class	2	3	9	7	21
	Middle class	1	0	5	4	10
	Upper class	10	14	70	75	169
Total		13	17	84	86	200

Chi-Square Tests

	Value	df	Asymptotic Significance (2-sided)
Pearson Chi-Square	2.980 ^a	6	.811
Likelihood Ratio	3.656	6	.723
N of Valid Cases	200		

a. 6 cells (50.0%) have expected count less than 5. The minimum expected count is .65.

LEGEND : table 1 represent the chi square test of respondent encounter teenagers particular in urban area and their place of residence

As the p value is greater than 0.05% at 0.811, the null hypothesis is accepted, So there is a significant relationship between the place of residence and teenagers usage of drugs in urban areas

In urban areas, teenagers might face unique pressures and influences that can contribute to drug usage. Factors like peer pressure, easier access to substances due to a higher population density, socioeconomic disparities, and stressors associated with city life can all play a role. Additionally, cultural norms and the availability of different types of substances might vary based on the area, impacting drug use among teenagers in urban settings.

CHI SQUARE TABLE 2

NULL HYPOTHESIS :

There is a significant relationship between the place of residence and teenagers usage of drugs in semi urban areas

ALTERNATIVE HYPOTHESIS

There is a no significant relationship between the place of residence and teenagers usage of drugs in semi urban areas

TABLE 2

Count		Came across teenagers using drugs				Total
		Never	Often	Rarely	Sometimes	
the usage of drug is more among teenagers belonging to [Rural]	Lower class	4	3	30	28	65
	Middle class	1	0	2	2	5
	Upper class	8	14	52	56	130
Total		13	17	84	86	200

Chi-Square Tests

	Value	df	Asymptotic Significance (2-sided)
Pearson Chi-Square	4.211 ^a	6	.648
Likelihood Ratio	4.296	6	.637
N of Valid Cases	200		

a. 5 cells (41.7%) have expected count less than 5. The minimum expected count is .33.

LEGEND : table 2 represent the chi square test of respondent encounter teenagers particular in rural area and their place of residence

As the p value is greater than 0.05% at 0.648, the null hypothesis is accepted, So there is a significant relationship between the place of residence and teenagers' usage of drugs in semi urban areas.

The relationship between a teenager's place of residence and drug usage in semi-urban areas often revolves around factors like accessibility, community influence, and social dynamics. Semi-urban areas might have less stringent oversight compared to urban settings, making drugs potentially more accessible. Additionally, the social environment in semi-urban areas might differ, with factors like peer pressure or limited recreational opportunities potentially influencing drug experimentation. This mix of accessibility, social dynamics, and community influence can contribute to varying rates of drug usage among teenagers in semi-urban areas compared to other locales.

CHI SQUARE TABLE 3**NULL HYPOTHESIS :**

There is a significant relationship between the place of residence and teenagers usage of drugs in rural areas

ALTERNATIVE HYPOTHESIS

There is a no significant relationship between the place of residence and teenagers usage of drugs in rural areas

TABLE 3

Count

		Came across teenagers using drugs				Total
		Never	Often	Rarely	Sometimes	
the usage of drug is more among teenagers belonging to [Semi urban]	Lower class	2	3	28	29	62
	Middle class	3	1	5	4	13
	Upper class	8	13	51	53	125
Total		13	17	84	86	200

Chi-Square Tests

	Value	df	Asymptotic Significance (2-sided)
Pearson Chi-Square	8.936 ^a	6	.177
Likelihood Ratio	7.156	6	.307
N of Valid Cases	200		

a. 3 cells (25.0%) have expected count less than 5. The minimum expected count is .85.

LEGEND : table 3 represent the chi square test of respondent encounter teenagers particular in semi urban area and their place of residence

As the p value is greater than 0.05% at 0.177, the null hypothesis is accepted, So there is a significant relationship between the place of residence and teenagers' usage of drugs in rural areas. So, there is a significant relationship between the place of residence and teenagers usage of drugs in rural areas

Teenagers' drug usage in rural areas can be influenced by several interconnected factors. Limited access to extracurricular activities, entertainment, and community resources might lead some teens to seek alternative forms of stimulation, including drugs. Moreover, a lack of close supervision or engagement due to sparse populations can result in fewer opportunities for positive social interactions, potentially increasing the likelihood of experimenting with substances. Additionally, the absence of comprehensive educational programs and support services in rural settings may contribute to a lack of awareness and understanding about the risks associated with drug use, making some teens more susceptible to its allure. Economic hardships or limited job prospects might also lead to feelings of despair or frustration among rural teens, prompting them to turn to substances as a coping mechanism. Overall, the combination of limited opportunities, reduced oversight, and a lack of resources in rural areas can create an environment where teenagers might be more inclined to engage in drug use.

V. LIMITATION

1. convenient sampling introduces a potential overlooking essential factors influencing the drug related behaviour and perceptions, but limiting the studies accuracy and representing the entire population

2. Geographical constraints confined the study to specific region within Chennai, restricting the broader applicability of findings to the entire city
3. Despite exploring the association between drug use and crime, the research lacks explicit access to comprehensive crime related data specifically tied to drug related incidents, potentially limiting the depth of analysis in establishing a direct correlation between these factors.

VI. CONCLUSION

A comprehensive study conducted on the prevalence of drug abuse among adolescents in Chennai has revealed a critical correlation between substance misuse and the rise in delinquent behavior among teenagers. This connection underscores the urgent need for multifaceted prevention strategies that not only address the immediate risks but also provide long-term solutions to deter substance abuse. Educational initiatives in schools play a crucial role in this strategy by equipping students with knowledge about the dangers of drug use and fostering an environment of awareness and resilience. Additionally, community-based support systems are essential for providing ongoing guidance and support to teenagers, helping them navigate social pressures and personal challenges without resorting to drugs. Equally important is the provision of accessible rehabilitation programs and counseling services that are specifically tailored to the unique needs of teenagers. These services must be readily available and designed to address the psychological and emotional factors that contribute to substance abuse. Creating a supportive environment that fosters open dialogue, understanding, and guidance can significantly mitigate the allure of drugs. When teenagers feel heard and supported, they are less likely to turn to substances as a coping mechanism. Such an environment not only helps in prevention but also plays a pivotal role in the rehabilitation of those who are already affected. By integrating educational, community-based, and rehabilitative efforts, we can create a holistic approach that not only addresses the root causes of substance abuse but also provides the necessary support for teenagers to lead healthy and productive lives. This comprehensive strategy can significantly reduce the appeal of drugs and deter teenagers from engaging in criminal activities driven by substance abuse, thereby fostering a safer and healthier community.

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