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## Youth, Narcotics, and the Law: Towards A Compassionate Legal Framework

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*The use of substances among Indian students is a rapidly growing socio-legal issue, rarely being dealt with by the criminal justice system in a limited and narrow way. The abuse of psychoactive drugs like cannabis, LSD, MDMA, and opioids poses a serious risk to the health and future of the youth. Yet, the dominant legal reaction was mainly through the Narcotic Drugs and Psychotropic Substances Act, 1985<sup>1</sup> values punishment over prevention, without addressing the root social, psychological, and economic causes of drug consumption. This article deconstructs the punitive attitude in existing Indian drug laws and discusses the glamourisation of drug culture, which is frequently spread in media projections in movies, web series, books, and social media. These projections are responsible for creating skewed mindsets among youngsters, and drug use seems to become glamorous or innocuous. In response, the article pleads for a reformist, rights-oriented policy based on constitutional values and public health. It pleads for a move away from criminalisation towards caring, evidence-based approaches that prioritise mental health, rehabilitation, and education. Treating drug use as a matter of public health instead of a moral shortcoming or crime will allow India to serve its youth better and construct a more humane and efficient drug policy regimen.*

**Keywords:** *drug abuse, ndps, students, legal reform, rehabilitation, mental health.*

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<sup>1</sup> Narcotic Drugs and Psychotropic Substances Act 1985

## INTRODUCTION

India has been seeing an emerging epidemic of drug dependence, best known among its active student population. So far limited to fringe communities, the problem is now best rooted in the schools of the nation, varying from premier colleges to local schools. Inner cities of schools and cities have inadvertently become hot spots, and what they observe is a frightening escalation of drug use among youth and young adults<sup>2</sup>. The cause of this detestable trend is poly-factorial in nature and is connected with the stress of contemporary life. Competition stress, unwarranted peer pressure, vulnerability to inherent psychoses like depression and anxiety, social exclusion made easy by electronic media, and otherworldly disinformation about so-called drug effects, all combine to lead the student to the vulnerable situation of drug addiction. There have been various media reports and empirical research that irresistibly put into perspective the fact that even school-going students, and especially those who are studying in higher secondary classes, are not immune to the increasing grip of narcotics. This gloomy picture presents an unyielding challenge to India's future demographic dividend.

While the problem has become more costly, current legal and institutional agendas for responding to student drug addiction are still largely reactive and disproportionately based on a criminalisation paradigm. The system's first reaction is too often punitive in character, rather than redemptive or therapeutic. Instead of effective prevention education programs, such as early intervention programs in a timely fashion, or student-centred counselling services addressing the underlying causes of addiction, the current system disproportionately spends on punitive methods. The ensuing article critically evaluates the effectiveness of this outdated model. It makes a candid case for a paradigm shift in the comprehension, response, and ultimate treatment of student drug use by the Indian legal system. Based on both the specific socio-cultural context of India and global best practices in drug policy reform, the present study advocates for a more humane, health-centred, and constitutionally sound approach. The aim is not to legalise drug consumption but to create a situation in which addicted students are treated as patients requiring treatment and not criminals to be found guilty, which guarantees they are safe for their own future and rehabilitated into society.

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<sup>2</sup> *Crime in India 2021: Statistics* NCRB (2022)

## ROMANTICISATION OF DRUGS

Consumption of drugs has been romanticised over this particular period of time. High school and college students think that it is normal, and it would not affect them at all. The reality behind such kind of thinking is substance abuse being romanticised. By the word 'romanticised', we mean that substance abuse is being glorified. Some of the movies, web series, books, and also several sorts of content on social media portray using psychedelics, etc., as if they are something very normal and nothing that affects our physical and mental health on an individual and socio-economic level<sup>3</sup>. This should be avoided, and action should be taken against it to prevent such serious issues.

Other major reasons are peer pressure and curiosity. They contribute a lot to the high consumption of psychedelic drugs and other illicit drugs among students in the age group 14-24. Students in the age group of 14-18 are mostly curious about drugs. They are at an age where they have their highs and lows, and want to explore new things, even though the things might be harmful for them. The urge to feel something, feel a sense of euphoria, or some kind of elation fuels their curiosity, and they end up in a cycle of addiction. Another such reason is peer pressure. Peer pressure causes them to react in a way that might harm them, but just to satisfy their peers' expectations to fit in, they get under the web of 'substance abuse'. We need to provide educational facilities and other ways to create awareness among the students to avoid such kind of unfortunate circumstances.

## THE CURRENT LEGAL SYSTEM AND ITS FLAWS

The cornerstone of Indian anti-drug law is the Narcotic Drugs and Psychotropic Substances (NDPS) Act, 1985. The all-encompassing but flawed law criminalises nearly everything one does with drugs, from growing and production to possession, sale, and consumption. And although Section 27 is more focused on consumption, and will tend to result in charges being laid against those who have drugs illegally, Section 20 addresses possession more broadly but somewhat vaguely, and this is the most frequently charged offence laid against students found in possession of small quantities of drugs<sup>4</sup>. While Section 64A of the Act gives hope

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<sup>3</sup> James Windle, 'A very gradual suppression: A history of Turkish opium controls, 1933–1974' (2013) 11(2) *European Journal of Criminology* <<https://doi.org/10.1177/1477370813494818>> accessed 24 July 2025

<sup>4</sup> Narcotic Drugs and Psychotropic Substances Act 1985, ss 20, 27

with a peek by giving voluntarily approaching addicts immunity from prosecution, in actuality, its application is remarkably infrequent and irregular against its proactive intent.<sup>5</sup>

The most, if not the most, weakness of the NDPS Act is its general inclination to forget the difference between drug consumers and big traffickers. This blunt equation results in excessive punishment, especially for vulnerable categories of people, such as students and young people. A university student who is convicted of possession of a small personal quantity of cannabis, for example, may be subjected to the same robust procedural inquiry, extended custodial exposure, and social shame as an old and professional drug dealer. This blanket use of the law is causing serious and inhumane psychological harm, threatening students' academic records, future careers, and overall well-being. It also inadvertently helps perpetuate the same stigma that all too often deters students from getting the help they need.

Even in theory, the Juvenile Justice (Care and Protection of Children) Act, 2015, places a protective shawl around the below-18-year-old offenders as persons who require greater rehabilitation than punishment, the above-18-year-old students are treated mechanically like adult offenders under the NDPS Act.<sup>6</sup> Such strict dualistic categorisation is a grave lacuna. It fails to consider the unique development phase of late adolescence (18-21 years), legally adults yet still prone to being dependent in brain and emotional development, susceptibility to peers, and still short of their full adult level of thinking of mature adults. That necessitates a middle-range response that is sensitive to their continuous development and unique needs.<sup>7</sup>

In addition to that, it also grossly understates the sophisticated underlying reasons for drug use by children. They are, but some of these include mental illness, prior history of exploitation or coercion by older drug peddlers, and sheer lack of awareness about legal sanctions and harmful health effects of drug use. The prospect of criminal prosecution and the consequent social stigma actually deters students from reporting, isolating them still further, intensifying their addiction further, and rendering intervention even harder. Added to these is the possibility that the NDPS Act does little to take into account the complex socio-economic context under which certain students are exposed to drug peddling or

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<sup>5</sup> Narcotic Drugs and Psychotropic Substances Act 1985, s 64A

<sup>6</sup> Juvenile Justice (Care and Protection of Children) Act 2015, Preamble

<sup>7</sup> *E Michael Raj v Intelligence Officer, Narcotic Control Bureau* (2008) 5 SCC 161

consumption. Poverty, poor access to school, dysfunctional home lives, or desperation for quick cash might push susceptible students to drug selling, leaving their victim and criminal status uncertain, and a welfare-focused, more adaptive approach is necessary. The system currently, then, not only does not stop drug use but also is counterproductive to the very group it aims to help.

## **ENFORCEMENT PRACTICES AND INSTITUTIONAL APATHY**

Enforcement of the NDPS Act in India is marked by a defective emphasis on quantitative classification, under which drug consumers, especially students, are by default criminalised as if they were large-scale traffickers. The approach disproportionately targets adolescents arrested for possession of even small quantities of contraband drugs. The typical methods of enforcement are usual raids near college campuses and schools, and random mass arrests with little concern for legal representation or even the students' rights. The resulting media trials heighten the sensationalism of the events, soiling students' reputations and stigmatising them even before any culmination of a judicial process. Alarming as it is, most schools, instead of being centres for healing and rehabilitation, become mere suspension or expulsion of drug-offending students. Such a punitive institutional response only places the students further in harm's way, further into isolation, and further into the cycle, instead of recovery.

A gap that is badly required is coordination between welfare agencies and law enforcement agencies. Even if a student is openly showing addiction or is recognised as a first-time abuser, the immediate action of the authorities is predominantly punitive and non-therapeutic in nature. Such a built-in disconnect denies the student early intervention and access to supportive mechanisms. The National Crime Records Bureau (NCRB) statistics, year after year, consistently show that the majority of the cases under the NDPS Act are against youngsters who are below 25 years of age. With that large several arrests, the conviction rate is abnormally low, indicating serious systemic failings not just in recovery of evidence and investigation but even in adherence to elementary procedural safeguards. The low conviction rate, coupled with the high arrest rate, indicates that the existing policy of enforcement is not merely wasteful but also leans towards jailing individuals who might otherwise be treated better.

Further, the progressive provision of Section 64A of the NDPS Act, whereby voluntary addicts are exempted from prosecution for treatment, goes grossly underutilised. This provision, as great as the potential is to divert young people from the criminal justice system and into recovery, is not known by frontline law enforcement officers and, unfortunately, underused by legal professionals. The unawareness, administrative apathy, and intransigent punitive culture of the system are so pervasive that students who might be helped by this path are funnelled into the harsh experience of the criminal justice system. Even the judiciary, otherwise liberal in its approach to other branches of law, has hardly looked back to save the student consumers from the worst excesses of the NDPS Act. Such intervention is a sporadic event and not a systemic application of judicial discretion. This systemic lethargy of the entire system forms a chain of self-destroying arrests, cruel social stigmatisation, and high-profile recidivism, and cannot cut the chain of addiction and marginalisation of Indian youth.

### JUDICIAL RESPONSES: A MISSED OPPORTUNITY?

Indian judiciary, sometimes romanticised to be a defender of constitutional liberty and a facilitator of social change, has, in the case of drug abuse among students, remained largely a missed opportunity for system change. Although some prophetic words float with large-heartedness, a paradigm change in the process of interpretation of the NDPS Act, as such, is an illusory dream. Certain key instances of a more compassionate approach are the Guwahati High Court judgment in *Mohd. Sahabuddin v State of Assam* (2020), wherein the court went on record to favour rehabilitation over punishment for a youth accused of drug possession. In this ruling, the court asserted the policy of treating drug addiction as an illness rather than a criminal offence. Akin to this was the historic Supreme Court ruling in *Tofan Singh v State of Tamil Nadu* (2020)<sup>8</sup>, which greatly improved procedural protection by viewing a confession to Narcotics Control Bureau (NCB) officials as being non-usable as evidence. While such judgments push the cause of due process and offer some safeguards, there is general judicial reluctance in challenging the underlying philosophy of deterrence that underlies the NDPS Act and generally creates a hung-up desire for punishment rather than reform, particularly of drug consumers.<sup>9</sup>

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<sup>8</sup> *Tofan Singh v State of Tamil Nadu* AIR 2020 SC 5592

<sup>9</sup> Gyanvi Khanna, 'Narcotics Control Bureau Officers Must Follow 'Tofan Singh' Judgment That Confession Statements Aren't Admissible Evidence : Supreme Court' *Live Law* (07 March 2024)

Despite its promise, the judiciary has functioned more on the fringes of changing the paradigm in essence by delivering proportionality, special exceptions, and routine mental health screening in drug cases of students consistently. The proportionality principle, a core constitutional doctrine that emanates from Article 14 (equality) and Article 21 (life and liberty) jurisprudence, remains oddly underused in drug cases. The principle is that the sentences must be commensurate with the seriousness of the offence and, most importantly, be mindful of the background, age, mentality, and motive for drug consumption of the offender. To apply this principle stringently would mean more just and reformative sentences for student users, except for hardened offenders.

Although individual judicial decisions sometimes used sympathetic logic with the orders of counselling or bailing out students, such incidents happen occasionally and are not indicative of an overall legal trend. Lack of open, binding legislation or authorised judicial training modules on topics of adolescent psychology, drug addiction issues, and other effective rehabilitation plan enforcement, like Section 64A, leads to a gigantic disparity in judicial discretion on benches. This produces uneven consequences for peer students in similar positions and creates a culture of legal indeterminacy. The ongoing fixation of the courts on a strictly punitive response to low-level drug offences, and particularly against students, is a vast missed opportunity to leverage its constitutional powers to implement a rights-oriented, public health-driven approach in line with international best practice and India's constitutional ethos of rehabilitation and dignity. In order to facilitate effective reform, the judiciary has to be active in directing a more humane and sensitive reading of the NDPS Act, focused towards the special vulnerability of juvenile offenders and their reformation.

## CONSTITUTIONAL AND PUBLIC HEALTH DIMENSIONS

Criminalisation of drug addiction among students stands against key constitutional principles as well as common public health goals. Article 21 of the Indian Constitution, the sacred right of life and liberty, has been taken to an extremely liberal meaning, incorporating the right to live with dignity, by the Supreme Court<sup>10</sup>. So broad a meaning inherently includes within it the right to be given holistic mental care and, particularly, to be protected

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<<https://www.livelaw.in/top-stories/narcotics-control-bureau-officers-must-follow-tofan-singh-judgment-that-confession-statements-arent-admissible-evidence-supreme-court-251584>> accessed 24 July 2025

<sup>10</sup> *Shri Bodhisattwa Gautam v Miss Subhra Chakraborty* (1996) 1 SCC 490

from the arbitrariness of state action that would vitiate one's well-being and future. It is to deny them their dignity and their possibilities for rehabilitation, to criminalise young students for drug abuse, typically without investigating the reasons for their mental and social vulnerability<sup>11</sup>. State law, like the Mental Healthcare Act, 2017, firmly upholds the rights of the mentally ill, such as those with substance use disorders, to be provided with the maximum possible care and assistance without discrimination. The National Youth Policy further stresses rehabilitation, counselling, and outreach in comprehensive education as being at the very centre of youth development, firmly rejecting solely punitive approaches.

Divergent from national law, classifying drug abuse as a public health concern rather than a criminal one puts India in line with evolving international norms and best practice. International mainstream organisations such as the United Nations Office on Drugs and Crime (UNODC)<sup>12</sup> and the World Health Organisation (WHO) are strongly supportive of decriminalizing possession of small amounts of drugs and heavy investment in harm reduction measures.<sup>13</sup> They comment that repressive policies push more use underground and dissuade individuals from accessing necessary medical and psychological attention. The 2019 International Guidelines on Human Rights and Drug Policy affirm this argument by their direct call for proportionate sentencing, adequate safeguarding of vulnerable adolescents, and safeguards to guarantee access to voluntary and non-coercive treatment. They are a powerful model for nations seeking to modernise their drug policies based on human rights standards.

As a party to global conventions, e.g., the Single Convention on Narcotic Drugs (1961), of historical importance, India commits to harmonising its national drug policy with international agreements. While such conventions may promote regulation of abused drugs, they neither demand punitive criminalisation of abusers, particularly youth, nor require a prohibitionist approach. They instead provide for a balanced system permitting room for treatment and rehabilitation. The effectiveness of a public health approach is well evidenced

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<sup>11</sup> *Common Cause (A Regd. Society) v Union of India* (2018) 5 SCC 1

<sup>12</sup> 'International Guidelines on Human Rights and Drug Policy' (*Human Rights and Drug Policy*, March 2019) <[https://www.humanrights-drugpolicy.org/site/assets/files/1640/hrdp\\_guidelines\\_2020\\_english.pdf](https://www.humanrights-drugpolicy.org/site/assets/files/1640/hrdp_guidelines_2020_english.pdf)> 24 July 2025

<sup>13</sup> 'Resources for Substance Use Disorders' (*World Health Organization*) <<https://www.who.int/data/gho/data/themes/resources-for-substance-use-disorders>> accessed 17 July 2025



by some excellent examples taken by some nations<sup>14</sup>. Portugal, to take one example, notoriously decriminalised the possession of any drug for personal use in 2001, diverting resources away from law enforcers and towards health and social workers<sup>15</sup>. This had the effect of dramatically lowering drug use, rates of HIV infection, and drug deaths among youth. In the same vein, Norway and Canada transitioned to humane, health-centred drug policy and proved that decriminalisation, coupled with strong support programs, leads to lower rates of youth drug use, higher recovery rates, and fewer harms in society linked to drug use. India can take valuable lessons from such successful models and replicate them in its own special socio-cultural context and within the parameters of its already established constitutional order to develop a drug policy that is not only effective, but also compassionate and rights-oriented.

## REFORM AGENDA: RETHINKING THE LEGAL RESPONSE

To successfully address the mounting problem of Indian student drug abuse, there is not only a necessary evil but an imperative for an ambitious and comprehensive reform agenda. The model of reform here should be an end to the prevailing punitive model<sup>16</sup> and instead of a rights-based, public health-oriented model. This agenda needs to be based on five pillars:

**Amendment of the NDPS Act to include Diversion Programs:** The first reform step includes a significant amendment in the NDPS Act itself. NDPS Act must be amended such that it provides an effective and proper diversion program for students and first-time drug offenders who are apprehended with small amounts of drugs for private use. This model would borrow from the worldwide success of Drug Treatment Courts (DTCs), where judicial oversight is coupled with court-ordered treatment and rehabilitation services. These courts emphasise the treatment of the root cause of addiction, not as a means of punishment. In the case of the student, this could be through redirecting them into counselling, therapy, and vocational training classes. Instead of subjecting them to the traditional criminal justice

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<sup>14</sup> Sara B Johnson et al., 'Adolescent Maturity and the Brain: The Promise and Pitfalls of Neuroscience Research in Adolescent Health Policy' (2009) 45(3) *Journal of Adolescent Health* 216 <<https://doi.org/10.1016/j.jadohealth.2009.05.016>> accessed 01 August 2025

<sup>15</sup> Brian Vastag, '5 Years After: Portugal's Drug Decriminalization Policy Shows Positive Results' (*Scientific American*, 07 April 2009) <<https://www.scientificamerican.com/article/portugal-drug-decriminalization/>> accessed 01 August 2025

<sup>16</sup> Dhruv Singh, 'Rethinking the NDPS Act: Rehabilitation or Punishment?' (2025) 3(4) *Indian Journal of Legal Studies and Social Sciences* <<https://ijlsss.com/wp-content/uploads/2025/07/21.-Dhruv-Singh-1.pdf>> accessed 01 August 2025

process, it would protect their sanity and studies. This would institutionalise a pipeline of rehabilitation with the pinnacle of the life-long experience of being a criminal.

**Mandatory Comprehensive Drug Awareness Education:** Preventive measure demands universal implementation of mandatory drug awareness courses in schools and colleges as part of the curriculum. These modules should not only be about drugs but also include core topics like legal student rights, full coverage of mental health and wellbeing, and the multifaceted nature of addiction as a disease. The learning should be engaging, based on evidence, and a vehicle to foster critical thinking, resilience, and informed decision-making among students and resilience against peer pressure and help-seeking where needed.

**Legal Aid and Mental Health Counselling:** Wherever narcotics investigation is carried out on students at any point, there has to be a need and access to legal aid and mental health counselling easily offered. This life-saving service has to be instituted and made easily available within schools, most probably through the institution of special centres or mutual agreement schemes with legal aid agencies and mental health professionals. This enables the students to become sensitised to their rights, receive appropriate legal counselling, and utilise psychological counselling at a point of full vulnerability without re-traumatisation and protection of due process.

**Initiation of De-addiction and Rehabilitation Centres for Youths:** There should be an urgent necessity for initiating youth-specific de-addiction and rehabilitation centres well-integrated in schools. These centres must concentrate on the distinctive psychological and developmental needs of the youth. Essential elements must also include strict privacy protections for voluntary engagement, educational assistance to avoid educational disruption, and strong career reenrollment initiatives to enable students to return to their lives and fulfil their aspirations after rehabilitation. These centres would supply a secure, supportive, and non-judgmental setting that is responsive to recovery and self-improvement.

**Sensitisation and Training of Judiciary and Police:** This conceptual shift calls for serious sensitisation and training of magistrates, judges, and police. They need to be trained in these modules on adolescent psychology, the dynamics of addiction as a public health problem, the availability and consumption of the available rehabilitation packages (including Section 64A), and exemplary sentencing. This kind of training would make it possible to ensure that

more humane and enlightened handling of drug cases among children is ensured to prevent over-dependence on an enforcement-oriented approach, and to a welfare- and reform-oriented approach.

It demands strong and collective action by all the organisations concerned, such as the Ministry of Social Justice and Empowerment, the Ministry of Education, the law enforcement agencies, and, most importantly, civil society organisations. By establishing such a symbiotic culture, India can step towards a more humane, effective, and constitutionally compliant solution to student drug abuse.

## CONCLUSION

India's current policy response to drug consumption among students, governed by the retro and repressive temporal matrix of the Narcotic Drugs and Psychotropic Substances Act, 1985, is found to be ineffective and, more typically than not, counterproductive. The explosive growth of substance consumption among young people and the adverse effects of criminalisation necessitate a new re-examination and radical course correction. An educated legal response concerned with rehabilitation, mental health, and education in the fullest sense is not a liberal ideal; it is a constitutional mandate and a social imperative of the first order.<sup>17</sup>

Our present system, by institutionalising vulnerable students as hardened criminal offenders, does irremediable psychological harm, legitimates social stigma, and establishes formidable barriers to reintegration into society. This unyielding approach fails to account for the intricate ballet of causative factors that propel young people to drugs, such as academic performance pressures, mental illness, and socio-economic risk factors. By being committed to retribution as the main response, the justice system unintentionally places young offenders in a culture of recidivism and isolation, rather than challenging and advancing their potential.

Detracting from retribution to restoration is the all-important way ahead. That paradigm shift would transform the legal system into an enabling institution, leading students down the road of rehabilitation and empowering them to become empowered citizens. That way,

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<sup>17</sup> *Francis Coralie Mullin v The Administrator, Union Territory of Delhi* (1981) 1 SCC 608

legislative reforms could strengthen diversion programmes, making full drug awareness and counselling for mental health a school requirement, setting up special juvenile rehabilitation centres, and offering, above all, a sensitised police and judiciary to adopt a more compassionate and reform-oriented approach.

Failure to stem drug abuse among schoolchildren by a humane, evidence-based, and constitutionally prudent strategy is a shameful failure of constitutional duty and public policy prudence. It is time now for all stakeholders in the process, judiciary, legislature, and civil society, to all sit down and accept that criminalisation, though not completely abolished, cannot and should not be the sole, or even significant, element of our response to adolescent drug addiction. These values must be substituted in place by compassion, care, and constitutionalism. Only when the nation abides by these principles can India truly safeguard its children, enhance their well-being, and provide a better, healthier life for its most precious asset.