

## Research Article

# Legal Labyrinths: Examining the Complexity of Drug Abuse Cases Pendency in Punjab, India

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### Abstract

This research paper explores the long-standing issue of drug abuse cases in Punjab, northern India, and the impact on people and communities. The study aims to investigate the underlying causes of this backlog, analyze its impact on the criminal justice system and society, and propose effective solutions to mitigate it. The research methodology combines doctrinal and qualitative approaches, focusing on drug pendency cases. The main author's doctoral research focuses on pendency of cases, with other researchers providing suggestions and studies to find solutions on drug abuse cases in this research work. The NCRB data from 2017-2022 was analyzed, and the gap in 2023 was filled using news sources, Punjab Economic Survey reports, and literature, along with legal databases, court records, and case archives.

The paper presents evidence-based policy recommendations aimed at reforming legal processes, enhancing judicial efficiency, and mitigating the social fallout of the case backlog. It calls for a holistic approach that combines legal reforms with community-based interventions to address the multifaceted challenges posed by drug abuse cases in Punjab.

The study urges collaboration between legal authorities, policymakers, and civil society to address drug abuse cases, emphasizing the importance of timely access to justice, as delays can be a social cost unaffordable for any society.

**Keywords:** Pendency of cases; Drug abuse; Speedy trial; Punjab; Rehabilitation; NCRB

### Introduction

Punjab, known as the "Land of Five Rivers," is facing a severe drug abuse crisis due to its proximity to drug-producing regions and international borders. The increasing number of cases has led to a significant backlog

in the judicial system, hindering justice delivery [1]. The issue of pending cases in India is a nationwide problem, exacerbated by overburdened courts, delays in the legal process, and inadequate case management, including those related to drug abuse [2].

The study highlights the challenges faced by the criminal justice system in dealing with drug-related offenses, providing insights into the social and economic consequences of delayed justice. It provides a basis for developing effective strategies to combat drug abuse and expedite legal proceedings. Punjab, often referred to as the "Gateway to India," is vulnerable to the influx of illicit drugs due to its socio-economic and cultural significance [3]. This study highlights the need for a comprehensive approach to addressing drug abuse in Punjab, recognizing that it is not solely the responsibility of the state but also requires societal efforts. It emphasizes the importance of community initiatives, rehabilitation programs, and public awareness campaigns in addressing the persistent impact of drug abuse. The author argues that criminalizing drug possession often stems from emotional reasons, treating people as second-class citizens without the right to decide their fate. The concept of public health as a legal good, protected by Article 47 of the Indian constitution, represents a compromise [4].

The Indian Penal Code, 1860, despite its provisions for

drug adulteration and sale, has not effectively addressed the persistent issue of drug abuse, highlighting the need for a more comprehensive and effective approach. Section 274 of the Indian Penal Code (IPC) states that anyone who adulterates a drug or medical preparation to reduce its efficacy, alter its operation, or make it noxious, intending to sell or use it for medicinal purposes, or knowing it is likely to be sold or used for such purposes, may face imprisonment for up to 6 months, a fine of Rs.1000, or both.

Section 275 of the Indian Penal Code, 1860, stipulates that anyone who knows a drug or medical preparation has been adulterated to reduce its efficacy, alter its operation, or make it noxious, sells it, offers it for sale, or causes it to be used for medicinal purposes without knowledge of the adulteration, may face imprisonment for up to 6 months, a fine of Rs.1000, or both.

Section 276, IPC, 1860, stipulates that anyone selling or offering a drug or medical preparation as a different one for medicinal purposes, or issuing it from a dispensary, may face imprisonment for up to 6 months, a fine of Rs.1000, or both.

### Objective

- To assess the extent of the pendency of drug abuse cases in Punjab, India.
- To identify the factors contributing to the backlog of drug abuse cases.
- To study the impact of sports, and journalism on delayed justice in society.

### Methodology

The study adopts research methodology, combining doctrinal and qualitative approaches. It commenced with an extensive analysis of legal databases, court records, and case archives to quantify the scope of the problem. The study is primarily involving a systematic analysis of existing legal literature, statutes, and case law to provide a comprehensive understanding of the legal framework surrounding drug abuse cases in Punjab.

### Review of literature

Serious problems with drug abuse began to surface at the beginning of the present century when drug consumption started rising alarmingly among the youth. A study conducted by sociologist R.S. Sandhu showed that 70% of drug users were young people. It was an alarming revelation in the sense that in the coming years, more and more young people were likely to become drug addicts. The number of drug addicts was still low, but Punjab earned a bad name in the 2<sup>nd</sup> decade of the century, largely because it became a political issue. Most people know that synthetic drugs, particularly heroin, are smuggled into India through the Indo-Pak border and originate in Afghanistan. Cross-border smuggling has gone on for the last 7 decades. It involved various prohibited items, such as gold, liquor, opium, etc. [5].

A study in Guru-ki-Wadali, Punjab, India, evaluated the

prevalence of drug abuse and socio-demographic factors affecting its prevalence in rural areas. The study conducted among 597 persons and found that every alternate male was drug ever users. Around 436 (73.03%) were non user of drug with 125 (20.9%) being current users and only 36 (6.03%) were ex-user. The maximum drug users were between 20 years-49 years old. Laborers and cultivators were taking drugs in large numbers than other occupations. Illiterate persons were more involved in drug abuse than educated and literate persons. Family size was a significant variable affecting drug abuse. The study concluded that there is a need to educate the young generation about the harmful effects of drug abuse and health education may be imparted in the school curriculum. Drug addiction is a growing concern worldwide, with about 190 million people worldwide consuming one or another drug. The study also highlighted the importance of addressing the age of drug abuse commencement and the relationship between schools and parental care as important protective factors for adolescents' health. Lifestyle-related interventions should be implemented to reduce stress, deviant behavior, and substance abuse among high-risk groups [6]. A study conducted at the Rural Health Training Center in Punjab, India, found that increasing trend in prevalence of opiate abuse was seen from 15 years to 44 years of age and 65 years and above there was decreasing trend. Out of 132 samples the maximum number of cases (99.24%) was Punjabi by nativity. It was observed that 71.99% cases were married and 67.42% cases were having primary education, followed by cases having no education (25.76%). Majority (47.73%) of cases were labourers. The study also highlighted the increasing trend of drug abuse and dependence in developing countries like India. Males were predominantly abusing opiate, with 90.15% of cases from the Sikh community. The study found that alcohol was the most commonly consumed substance in all age groups, followed by tobacco, and cannabis. The study suggests increased awareness and education about the harmful effects of drugs, and targeted efforts to reduce drug availability and consumption [7]. A study conducted among 400 people between the age group of 11 and 35 in Punjab, India, found that 65.5% of adolescents and young adults were involved in substance abuse, with alcohol being the most common substance abused (41.8%). The study also found a high prevalence of heroin abusers (20.8%). The prevalence of drug abuse in Punjab is a serious concern, as every third person is hooked on drugs other than alcohol and tobacco. Factors contributing to the drug epidemic include rampaging unemployment, easy availability of heroin, and its location near India. Adolescent drug abuse is a major concern, with studies showing that regular alcohol use in late childhood and early adolescence is associated with higher rates of consumption in adult life. The study suggests that the government should plan to increase de-addiction and rehabilitation centers, involve non-government organizations in vocational training and employment programs, establish linkages between health workers, community leaders, religious leaders, and teachers, and conduct periodic outreach awareness camps

for antidrug abuse activities [8]. The study conducted at Dayanand Medical College and Hospital in Ludhiana, India, aimed to determine the prevalence and pattern of cannabis abuse in a rural area. The research involved 1,072 participants aged 15 and above, with 12.39% of the total population having consumed cannabis during the past 12 months. The majority of subjects who consumed cannabis for the first time were aged 15 years-24 years, while 11.67% consumed cannabis before or at the age of 15. The study also found that alcohol was the most commonly consumed substance in all age groups, followed by tobacco, and cannabis. The prevalence of substance abuse in urban and rural areas increased with the age of the study group, with 87.5% of users in urban areas and 82.9% in rural areas consuming alcohol daily. The younger generation, who may be future drug abusers, should be specially targeted. The study highlights the need for community-level efforts to protect the productive age group from cannabis abuse. It also recommends planning information, education, and communication programs with folk media, collaborating with NGO's, community leaders, religious leaders, community and medical personnel, and targeting the younger generation [9]. Author explores the issue of alcohol and drug abuse in Punjab, India. A total of 497 persons interviewed, the study found that alcohol use was prevalent among 50% of adult males, while opium use was prevalent among 35%. The pattern of drug use was different, with 89% of alcohol users being occasional drinkers and 11% regular or dependent users. In Punjab, 60% of alcohol users obtain liquor from other than official outlets, with an estimated 20% to 90% consumption. The study estimates that 49.6% of the male population aged 15 years and above are drinkers. The study suggests that imposing legal sanctions on opium use will not be fully effective unless the underlying reasons for its use are removed. Control measures should focus on primary prevention, reducing the incidence of new cases and indirectly influencing the prevalence rate of current users. Strict external controls may be morally objectionable and not fully effective due to the existing illicit channels of supply. In summary, any intervention strategy must utilize a combination of measures aimed at limiting the availability of alcohol, both licit and illicit, and well-planned persuasive educational programs to reduce the demand for alcohol, taking into account socio-cultural and personal factors [10]. Drug abuse is a global issue affecting many countries, with Punjab, India, experiencing a high prevalence of heroin and intravenous drug abuse. 70% of drug abusers are rural and use alcohol. The study found that alcohol is the most common substance abused, followed by tobacco. Factors contributing to the epidemic include unemployment, easy availability of heroin, and Punjab's location. Factors such as male gender, illiteracy, and age above 30 also contribute to drug abuse. Governments should increase de-addiction centers, establish linkages, and conduct awareness campaigns [8]. Author examines the drug abuse problem among Punjabi youth, focusing on its unique characteristics and contextual factors. The rural

background of Punjabi youth is influenced by historical rural economic developments and the Punjabi culture of masculinity, while their affluent class background is driven by unemployment, consumption cultures, and modernity associated with injectable drugs. The state's poverty rate and slowing agricultural economy contribute to the spiralling levels of drug addiction among educated rural youth. The growing prevalence of drug abuse is attributed to conflicting emotions, youth unemployment, consumption practices, and traditional Punjabi masculinity. The patriarchal culture and family migration practices contribute to the state's prosperity [11].

The study on drug abuse in the border district of Kathua emphasizes the need for targeted research and interventions. It suggests protecting borders, fighting corruption, and cooperating with neighboring countries. Enforcement agencies should be vigilant and jails should not be used for drug abuse. Preventive measures like yoga and meditation are also recommended. These measures can help eradicate the drug menace and achieve the 3<sup>rd</sup> Sustainable Development Goal's 5<sup>th</sup> target [12].

Drug abuse is a growing concern in Rajasthan, a state with a rich history of pride and valor. It is crucial for the state and civil society to address this issue before it worsens. It is the responsibility of individuals to be aware of the issues arising from drug abuse and the social practices promoting it. The educated and leading class should lead the way in re-evaluating and revising these practices [13].

Legal aid clinics in India are vital for addressing social issues and promoting social integration. They empower vulnerable groups, provide skilled professionals, and maximize employment opportunities. They focus on practical and social issues, preparing students to apply theoretical knowledge effectively. Teachers should ensure students are aware of social issues, participate in clinics, and supervise effectively. Collaboration between the bar council of India and state bar councils is essential for enhancing clinical legal education [14].

### **Factors contributing to pendency**

At least one-third of the rural population in Punjab consumes opium, similar to the urban concept of 2 drinks after a hard day. The daily dose of opium used to cost Rs. 30-Rs. 40 on the pocket. The Punjab Opioid Dependency Survey (PODS) by the National Drug Dependence Treatment Centre, AIIMS, reveals that the largest concentration of consumers comes from economically weaker sections with limited education and employment. The typical drug addict is male, young, Punjabi-speaking, and from a lower middle class background, with 83% being employed, 89% having some level of addiction, and 99% living with families [15]. Violence in the region led to people turning to drugs as a safer alternative to alcohol. Drug dealers smuggled drugs from the borders, making a lot of money. This increased drug use in Punjab, as farming became less profitable and young people struggled to find good jobs, making them more frustrated and turning to drugs for comfort.

## Drug trafficking

The growing drug problem in Punjab has various causes like militancy, poverty, a lack of job opportunities, agrarian crisis and easy availability of narcotic substances etc. When terrorism gained ground in the state, militants attacked liquor shops and drinkers, so injecting drugs bought illegally became a safer method. The smugglers turned their attention towards borders in Punjab, Rajasthan and Jammu and Kashmir. Trafficking drugs from Indo-Pak border became a profitable profession. Smugglers earned handsome amount of money for just 1 consignment or per kg of heroin. In the meanwhile, local people too started consuming it. Poor quality of education fails to incentivize youth to enroll themselves in higher education and even the educated youth fails to get decent paying job, which results in frustration and thus the support of drugs comes into play [16]. There is also the fact that pharmaceuticals such as pain relieving opioids and sedatives are easily available from chemists. Punjabi culture of heavy drinking and partying as well as the habit of landowners supplying raw opium to farm laborers to encourage them to work harder, has further contributed to the problem. The pop culture of bhangra music has always promoted drugs as a 'cool' thing to do. This has always influenced the youth into trying out drugs. Apart from this peer pressure, depression, loneliness, etc. also play a huge role. Moreover, ignorance of issues by government and the wider society fuelled the problem [17]. According to one available source, heroin is bought from Afghanistan at 1 lakh per kilogram. Passing through Pakistan and west Punjab, it is smuggled into Indian Punjab and sold for 30 lakh per kilogram. Further, it is sold in other parts of India at 1 crore per kg, and for the international market the rate goes up to 5 crores. Thus, the comparatively low price in Punjab makes the state a hotspot for the local youth to fall prey to in this vicious cycle. According to police sources, heroin (popularly known as Chitta in Punjab) costs an addict not less than Rs. 2000 per day. After begging, borrowing and stealing, when an addict can no longer buy his fix, the dealer has a deal for him-sell 10 and get one. Akin to multi-level marketing, the strategy helps dealers not only retain existing customers but also add new ones rapidly [18]. One of India's most prosperous states and nation's bread basket has to struggle with a serious problem that is now reaching wide-ranging proportions. The alarming thing is that it is growing among youth between the age of 15 years to 25 years. According to a survey, 66% of the school-going students in the state consume gutka or tobacco; every 3<sup>rd</sup> male and every 10<sup>th</sup> female student have taken to drugs on one pretext or another and 7 out of 10 college-going students are into drug abuse. After Nagaland, Punjab ranks second in the country for drug abuse. Drug and substance abuse are the problems that are threatening the future of the next generation in Punjab. The number of deaths due to drug abuse is increasing day by day. One of the main reasons of increased deaths is use of injections already used by Human Immunodeficiency Virus (HIV) or Hepatitis C Virus (HCV) infected person and in this way HIV and

HCV is also spreading in the society [13].

## Unemployment

It is a significant driver of drug abuse in Punjab. With a lack of job opportunities, especially for the youth, individuals may find themselves without a purpose or means to support themselves and their families. This frustration lead to a sense of hopelessness, which some attempt to relieve through drug use. Unemployment can also disrupt social networks and relationships that encourage drug experimentation [19]. The easy availability of drugs is a major factor contributing to drug abuse in Punjab. The state's proximity to the Golden Triangle, a region known for illicit drug production, makes it a hotspot for drug trafficking. The presence of numerous drug peddlers and dealers in both urban and rural areas further increases the problem, as drugs are readily accessible to users [20]. Lack of awareness about the risks associated with drug abuse is another significant cause. Many individuals, especially in rural areas, may not fully comprehend the health and social consequences of drug addiction. This lack of awareness can prevent them from seeking help or deter them from making informed decisions regarding drug use [21-23]. Inadequate law enforcement plays a pivotal role in the drug abuse problem in Punjab. A weak law enforcement system can embolden drug traffickers and dealers, as they operate with a reduced fear of getting caught or facing legal consequences. Insufficient resources, corruption, and a lack of training can hinder the efforts of law enforcement agencies in curbing drug-related activities. The overburdened judicial system in Punjab can result in delayed justice, which has implications for drug abuse cases. Prolonged legal proceedings can discourage individuals from reporting drug-related crimes or seeking help for addiction. Furthermore, drug traffickers may exploit these delays to continue their operations, knowing that the legal process may take years to reach a resolution. Socioeconomic factors, such as poverty, lack of education, and income disparities, can contribute to drug abuse in Punjab. Individuals facing economic hardships may turn to drugs as a form of escape or as a way to cope with the stress and challenges of their daily lives [24].

## Rehabilitation programs

Over 80,000 people have joined de-addiction, rehabilitation, and Outpatient Opioid Assisted Treatment centres through over 6000 programs, seminars, and educational campaigns. Under the Drugs Abuse Prevention Officer (DAPO) Programme, over 11 lakh people have participated in these programs, making the anti-drug abuse campaign a mass movement and a people's campaign. The efforts are aimed at raising awareness against drug abuse in urban centers [25].

The STF has introduced 2 programs, Drug Abuse Prevention Officer (DAPO) and Buddy Programme, to combat drug addiction. The DAPO program has voluntarily registered over 5 lakh people as DAPOs, who are trained by the STF and District administration. These DAPOs will

act as counsellors for addicts in their localities and serve as torchbearers of the government's fight against drugs at the grassroots level.

The Buddy programme, launched in Taran district, aims to teach students from Class 6 about drug addiction and encourage them to say "no to drugs." The Punjab State is transitioning from traditional De-addiction and Rehabilitation centers to Outpatient Opioid Assisted Treatment (OOAT) centers, providing medication and allowing addicts to return to work or home, a significant shift in drug addiction treatment. The programme is expected to be rolled out across the state.

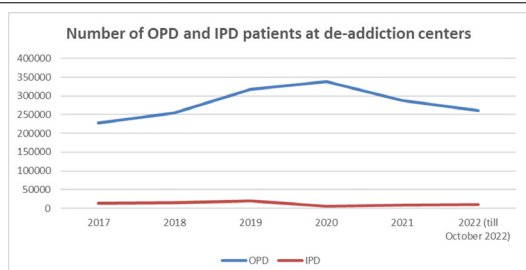
### Drug control: Punjab State Board for de-addiction and rehabilitation

The Punjab State Board for de-addiction and rehabilitation has been constituted under the chairmanship of the Honourable Chief Minister, Punjab. The Board includes eminent medical professionals and prominent civil society representatives. Similarly, in each district, a drug de-addiction and rehabilitation society has been constituted under the Chairmanship of Deputy Commissioner of the respective Districts. Civil Surgeon, Psychiatrist, District Social Security Officer and SSP as other members to supervise these efforts. The status of OPD and IPD patients of de-addiction is presented in Table 1 and Figure 1 [26].

**Table 1:** Number of OPD and IPD patients at de-addiction centers

Year	OPD	IPD
2017	227928	12985
2018	255015	14853
2019	318066	19328
2020	338333	5689
2021	287304	8200
2022 (till October 2022)	261655	10061

Source-Punjab Economic Survey Report (2022-23)



**Figure 1:** Number of OPD and IPD patients at de-addiction centers

**Table 2:** Pendency of drug cases in India: Trends

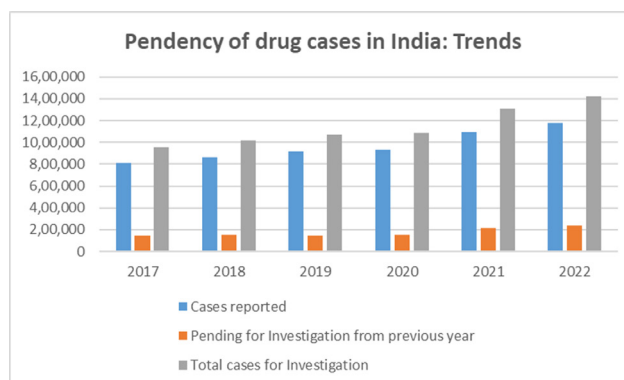
Year	2017	2018	2019	2020	2021	2022
Cases reported	8,09,448	8,63,696	9,19,555	9,31,268	10,93,028	11,77,350
Pending for Investigation from previous year	1,47,109	1,52,329	1,47,383	1,52,059	2,14,669	2,35,773
Total cases for Investigation	9,56,559	10,16,032	10,66,953	10,83,416	13,07,714	14,18,738

Source-NCRB Reports (2017-22)

### Data related to drug abuses

The Punjab Police and Border Security Force have launched a special campaign against drug suppliers and smugglers in the state, registering 17306 cases under the NDPS Act and arresting 18837 smugglers. They have recovered 220.84 Kgs of Heroin, 488.19 Kgs of Opium, and 60493.49 Kgs of Poppy Husk in 1 year, from 16/03/2017 to 25/07/2018. STF has also been working effectively, registering 1335 cases under the NDPS Act, arresting 2065 smugglers, and recovering 216.88 Kgs of Heroin, 123.04 Kgs of Opium, and 2996.35 Kgs of Poppy Husk in the same period. The NCRB reports that drug cases in India have increased in the last 6 years, but no report has been published for 2023. To fill this gap of news reports and online database have been referred. In the recent year of 2022 as per the NCRB reports drug cases all over India is increasing as showed in Table 2 and Figure 2 as under:

India's drug cases have seen a consistent increase from 8,09,448 in 2017 to 11,77,350 in 2022, indicating a concerning trend. The number of pending cases has also risen, reaching 2,35,773 in 2022, indicating a persistent backlog and potential investigative challenges. The total cases for investigation has also increased, from 9,56,559 in 2017 to 14,18,738 in 2022, indicating a growing workload for law enforcement agencies. This data highlights the need for a comprehensive approach to address the rising incidence of drug-related offenses, emphasizing resource allocation, streamlined procedures, and proactive measures to curb the issue and also visualized.



**Figure 2:** Pendency of drug cases in India: Trends

As per Table 3 and Figure 3, Drug cases in Punjab have slightly decreased over the past 6 years, but the issue remains significant due to the high prevalence of drug

trafficking and smuggling. In 5 years, only about 5000 cases decreased from 25,788 to 20,717, with many cases not reported. In 2021, there were 20,717 pending cases for drug and liquor, with 9972 being drug cases and 10745 being liquor cases. Enforcement agencies arrested 19,093 drug smugglers and peddlers from July 2022, with an average of 45 accused daily. From July 5, 2022, to September 2023, total 14,179 FIRs were registered under the Narcotic Drugs and Psychotropic Substances (NDPS) Act. The National Crime Records Bureau reports a fluctuating trend in drug cases from 2017 to 2022, with a significant reduction in 2021 and a slight increase in 2022.

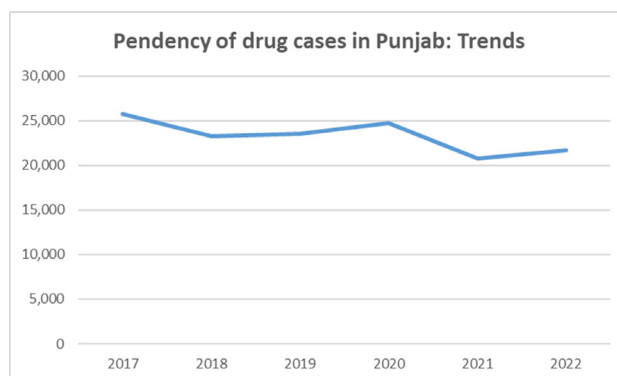


Figure 3: Pendency of drug cases in Punjab: Trends

Table 3: Pendency of drug cases in Punjab: Trends

Year	2017	2018	2019	2020	2021	2022
Case pending	25,788	23,246	23,490	24,751	20,717	21,670

Table 4 and Figure 4 present information on the disposal rate of cases by the police and court in India for the years

2017 to 2022 as under:

Table 4: Disposal rate of cases by police and court in India

Year	2017	2018	2019	2020	2021	2022
Total cases for trial	2,08,941	2,34,897	2,59,492	2,72,135	3,25,841	4,04,461
Cases for investigation	84,908	90,637	1,01,745	92,042	1,15,417	1,58,267
Cases convicted	23,929	28,333	32,061	14,340	20,747	35,879

- Total Cases for Trial:
  - The number of cases for trial has been steadily increasing over the years.
  - From 2017 to 2022, there is a notable rise from 208,941 to 404,461 cases for trial.
  - The data suggests a substantial increase in the workload of the judicial system, indicating a potential rise in reported crimes or an enhanced focus on addressing legal matters.
- Cases for Investigation:
  - The number of cases under investigation has also increased over the years.
  - The highest number of cases for investigation is recorded in 2022, with 158,267 cases.
  - The fluctuation in investigation numbers might be influenced by changes in crime rates, law enforcement priorities, or variations in reporting mechanisms.
- Cases Convicted:
  - The number of cases resulting in convictions shows some fluctuations.
  - There's a significant increase in convictions from 2017 (23,929) to 2019 (32,061).
  - However, there is a sharp drop in convictions in 2020

(14,340) followed by a notable increase in 2021 (20,747) and 2022 (35,879).

- The variations in conviction rates could be attributed to factors such as changes in legal processes, evidence collection, or court efficiency.

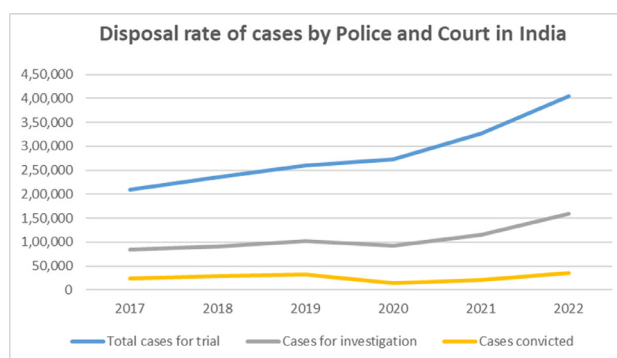


Figure 4: Disposal rate of cases by Police and Court in India

The trend shows a growing caseload for trial, indicating a higher demand on the legal system. This could indicate a shift in law enforcement priorities or a focus on addressing reported crimes. Fluctuations in conviction rates suggest varying factors affecting case outcomes over time.

The Table 5 and Figure 5, presents data on the disposal rate and the number of pending cases for the years 2017 to 2022 as under:



Table 5: Disposal rate and pending cases comparison

Year	2017	2018	2019	2020	2021	2022
Total trial completed	5,12,574	5,71,843	6,00,620	3,17,133	5,43,103	7,89,054
Disposed by courts	5,26,209	5,75,064	6,06,063	3,18,717	5,45,966	8,12,621
Cases Pending at the end of the year	30,41,543	33,16,392	35,96,787	41,36,987	46,51,702	50,01,539

Source-NCRB Reports (2017-22)

1. Total Trial Completed:

- The number of trials completed each year shows an increasing trend, with a notable jump from 2017 to 2019.
- There is a significant decrease in total trials completed in 2020, followed by a substantial increase in 2021 and 2022.

2. Disposed by Courts:

- This column indicates the number of cases that have been resolved or disposed of by the courts.
- The disposal rate closely mirrors the total trials completed, indicating that the courts are able to resolve cases at a similar pace.

3. Cases Pending at the End of the Year:

- The number of pending cases at the end of each year has consistently increased from 2017 to 2022.
- The largest increase in pending cases occurred from 2020 to 2021, and there is a continued rise in 2022.

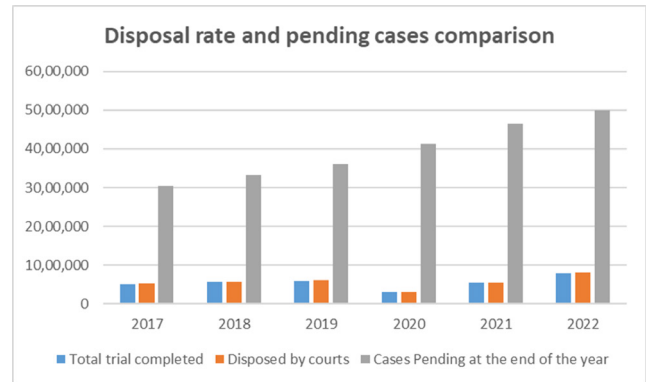


Figure 5: Disposal rate and pending cases by comparison

The judicial system experienced a surge in trials from 2017 to 2019, indicating a higher workload. However, trials decreased in 2020 due to external events like the COVID-19 pandemic. In 2021 and 2022, trials increased to catch up on the 2020 backlog. Despite the increase in disposal rates, the number of pending cases continues to rise, indicating the judicial system may struggle to handle the incoming caseload. Further analysis is needed to understand the factors contributing to the backlog and explore potential solutions for improving the judicial system’s efficiency (Figure 6).

Table 6: Conviction and pendency rate

Year	2017	2018	2019	2020	2021	2022
Conviction rate	69.90%	72.40%	72.60%	83.80%	73.40%	74.10%
Pendency percentage	85.30%	85.20%	85.60%	92.80%	89.50%	86%

Source-NCRB Reports (2017-22)

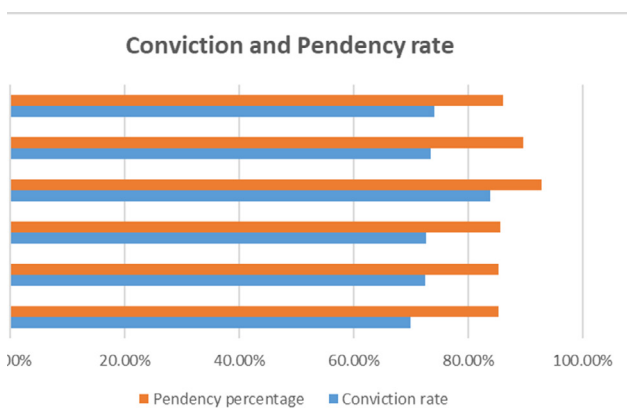


Figure 6: Conviction and pendency rate

Table 6 provides information on Conviction and Pendency rates over the years from 2017 to 2022 as under:

1. Conviction Rate:

- The conviction rate indicates the percentage of cases

that resulted in a conviction out of the total cases that went to trial.

- The conviction rate has shown some variation over the years:
  - In 2017, it was 69.9%, which increased to 72.4% in 2018.
  - There was a slight increase to 72.6% in 2019.
  - A significant jump occurred in 2020, reaching 83.8%.
  - In 2021, there was a decrease to 73.4%, and in 2022, it increased again to 74.1%.
- The fluctuations in conviction rates may suggest changes in the efficiency or effectiveness of the criminal justice system during these years.

2. Pendency Percentage:

- Pendency percentage refers to the percentage of cases that are pending or unresolved out of the total cases.

- The pendency percentage has also experienced variations:
- In 2017 and 2018, it remained relatively stable at 85.3% and 85.2%, respectively.
- There was a slight increase in 2019 to 85.6%.
- A significant rise occurred in 2020, reaching 92.8%, indicating a higher proportion of cases pending.
- In 2021, there was a decrease to 89.5%, and in 2022, it further decreased to 86%.
- The decrease in pendency percentage in 2021 and 2022 suggests an improvement in the timely resolution of cases or a reduction in the backlog.

In summary, the table indicates fluctuations in both conviction and pendency rates over the specified years. Analysing these trends may help identify factors influencing the criminal justice system's efficiency, case resolution timelines, and overall effectiveness in securing convictions.

#### Recent data of 2022 and 2023

A study titled 'Inside Punjab Prisons' on the conditions of prisons by the Punjab State Legal Services Authority (PULSA) in collaboration with Commonwealth Human Rights Initiatives (CHRI) January 2022 revealed that 42.1% of the state's prison population, including 27% under trials and 14.7% convicts, are linked to the NDPS Act, 1985. Experts believe this figure is concerning and highlights the magnitude of the drug menace in Punjab [27].

A government report in the Punjab and Haryana high court reveals 266 deaths in Chandigarh, Punjab, due to narcotic and psychotropic substance overdoses from 01 April 2020 to 31 March 2023. The data was obtained from police stations and commissioners, and the state is divided into 29 field units. Bathinda reported the highest number of deaths (38), followed by Tarn Taran (30), Ferozepur (19), and Amritsar rural (17), where 12 deaths were reported in one year alone [28].

After the Punjab government waged a 'Decisive War Against Drugs' from July 2022, enforcement agencies have arrested a total of 19,093 drug smugglers and peddlers, which comes to an average of 45 accused daily, show records. In all, 14,179 FIRs, or 33 FIRs per day, have been registered under the Narcotic Drugs and Psychotropic Substances (NDPS) Act from July 5, 2022, to September, 2023. Government data shows some visible results on the enforcement part. The state police had, on an average, arrested 39 accused per day and registered 31 FIRs daily by the end of the initial 3 years of the formation of the anti-drug STF till 2020. The conviction rate of accused in cases under the NDPS Act has improved to 80.7%. The state police had been able to achieve a 68% conviction rate in these cases till June 2020. The state police, in coordination with Border Security Force (BSF), have been able to recover 65 drones used to carry consignments of narcotics, arms and ammunition, and currency from hostile neighbour Pakistan into Punjab since March 16, 2022. Enforcement

agencies have also attached a total of 116 properties of drug smugglers worth over Rs. 45 crore across 22 districts of the state since April 2022 [29].

Over 190 drug overdose deaths have been reported in various parts of the state since March 15, with Bathinda leading the list with 31 deaths. Tarn Taran and Ferozepur followed with 24 and 21 deaths respectively. Jalandhar and Muktsar reported 14 and 13 deaths, while Ludhiana and Amritsar districts each reported 11 deaths. Patiala, Fazilka, Faridkot, and Kapurthala reported 5 to 7 deaths [30].

On record, Punjab Police claims, in the last 2 months since July 5, it has seized Rs. 2.73 crore cash, 322 kg heroin, 167 kg opium, 145 kg ganja, 222 quintals choora-post (sawdust poppy) and Rs. 16.9 lakh worth drug tablets, capsules and injections. The state police claims, it arrested 4,223 drug peddlers and 3,236 FIRs were registered. After going through these statistics meticulously, it found only 328 cases relate to drug traffickers, and all the remaining cases relate to drug addicts. Clearly, in order to inflate figures, police took action against drug addicts. The figures may look big, but the cases that will go to courts will make it easier for drug peddlers to come out on bail, and restart their trade [31]. The NCRB report shows a consistent increase in drug abuse cases since 2017, including reported cases, total cases for investigation, and pending cases. Punjab is among the top 3 states with the most drug case FIRs, with Uttar Pradesh leading the list with 31,482 cases between 2019 and 2021, followed by Maharashtra with 28,959, and Punjab with 28417 cases [32].

#### Comprehensive Action against Drug Abuse (CADA)

Punjab State taken following Strategy to combat the menace of drug abuse:

- Effective enforcement of relevant laws against trafficking/smuggling of drugs apprehending and taking effective legal action against the drug smugglers/suppliers/dealers/peddlers. The main emphasis of this strategy is to ensure complete disruption of entire supply chain of drugs in Punjab which includes both interstate and international network of smuggling/trafficking of drugs;
- Design and implementation of the effective and affordable drug De-Addiction programmes for total recovery and rehabilitation of the victims of drug abuse; and
- To reverse any future damage by preventing the vulnerable sections of society from falling prey to drug abuse. The CADA Programme envisages synergizing the efforts of all government departments and enlisting the active participation of all sections of the society to combat the menace of drug abuse. The 3 key components of the above noted EDP's (Enforcement, De-addiction and Prevention) strategy are elaborated as follows:
  - Enforcement: District police have been directed to develop an area-specific strategy for enforcing laws,



taking decisive action against officials found in collusion with drug smugglers or suppliers, tracking the entire drug supply chain through proper investigation, and seizure attachment or forfeiture of illegally acquired properties by drug smugglers or traffickers under the provisions of the NDPS Act, 1985. This will help break the nexus between the police and drug smugglers, ensuring the safety and security of the community.

b. **De-Addiction and Rehabilitation:** The de-addiction and rehabilitation strategy aims to provide affordable, effective services at the grass-root level to patients and the government. It focuses on an outpatient treatment model, allowing patients to continue their normal lives and earn their livelihoods during the process. Long-term support is provided through family and peer support groups.

c. **Prevention:** Punjab's prevention strategy aims to raise public awareness about the negative effects of drugs and launch campaigns against their use through Community Partnership. This inclusive approach encourages maximum community participation and focuses on providing de-addiction facilities at citizens' doorsteps. Strategies include the Drug Abuse Prevention Officers (DAPOS) program, which mobilizes willing members of the public to work towards drug abuse prevention, and the Buddy Programme, which trains student volunteers in a buddy group of up to 5 persons trained by STF to protect themselves and the group from drug abuse. These initiatives aim to directly observe positive results in combating drug abuse. The strategy aims to improve outcomes by providing skills for vulnerable sections to secure employment opportunities and implementing effective public education and awareness programs, as well as media campaigns, against drug abuse, its harmful effects, and details of addiction and prevention programs.

### **Role of media in drug prevention**

Mass communication plays a crucial role in public health campaigns for healthier lifestyles and drug prevention, involving audience segmentation, formative research, professional-quality messages, and appropriate channels like television [33]. Drug prevention programs' effectiveness is challenging to assess due to differences in goals, target population, theoretical framework, content, and research methods. A systematic literature review identified 7 quality criteria for universal school-based drug prevention, with most programs targeting children and adolescents aged 10-20. However, questions remain about reducing major drug problems, preventing chronic ones, and effective dissemination [34]. However, most interventions on substance abuse prevention are incomplete and fail to target important dimensions. School-based approaches have been effective in reducing substance use behavior, but more research is needed to understand their effectiveness with other populations and high-risk students. To be effective, preventive interventions must be comprehensive, considering multivariate causation, environmental influences, susceptibility, and intrapsychic motivations

[35]. The study highlights the relevance of electronic media as an information distribution channel in the Drug Abuse Campaign, suggesting that while communication technology is evolving, traditional media can still be useful in delivering information to the public [36]. The research contributes to public relations and health by highlighting the need for improvements in media usage patterns and innovation. The study explores the use of social media big to understand the communication and behavioral patterns of problematic prescription drug use, focusing on adolescents, Twitter, and Instagram users. It examines the psychological and behavioral consequences of exposure to such messages and concludes that social media can be a valuable resource for drug abuse intervention [37]. The special issue of *Drugs and the Media* explores the media's portrayal of drugs, specifically alcohol, tobacco, and prescription drugs. It discusses the narrative structures of television programs, addiction films, newspapers, and internet drug marketing. The authors emphasize the importance of media literacy education in preventing substance use and addressing its complexities [38]. Mass media has proven effective in preventing substance abuse, particularly among youth, and public health advocates should learn from commercial sector successes to design future campaigns [39]. Effective interpersonal communication is crucial for mass media programs, as demonstrated in successful campaigns like TV-based smoking cessation programs [40]. The literature on marketing and media strongly supports the influence of tobacco, alcohol, e-cigarette, and marijuana use on adolescents and young adults, potentially affecting substance use and misuse rates. Targeting modifiable cognitions and behaviors in a developmentally appropriate manner is promising [41]. A community-based prevention program effectively reduced cigarette and marijuana use among 9th and 10th-grade students 3 years after delivery, highlighting lower use as a risk factor for heavier use and addressing abusive smoking [42].

### **Role of sport in drug abuse case**

Ergogenic drugs, including illicit substances and nutritional supplements, are used to enhance athletic performance in both professional and elite athletes. However, younger athletes are increasingly experimenting with these drugs to improve appearance and athletic abilities. Common ergogenic drugs used by youths include anabolic-androgenic steroids, steroid precursors (androstenedione and dehydroepiandrosterone), and growth hormone, creatine, and ephedra alkaloids. These substances are being used at younger ages, with use starting as early as middle school. While anabolic steroids and creatine offer potential gains in body mass and strength, they also pose risks to multiple organ systems. Steroid precursors, growth hormone, and ephedra alkaloids have not been proven to enhance athletic measures, but they do pose risks to users. To combat drug abuse, recent changes in legal status, youth athletics rules, and educational initiatives have been implemented [43].

The war on drugs is often associated with criminal policies

aimed at curbing drug use, but the issue of enhancement drugs in sport has become more prominent. As drug use in sport becomes more prevalent, anti-doping policies have become more restrictive and harsh. This article compares the war on drugs with recent developments in sports anti-doping, highlighting a growing trend towards criminalizing traffickers and users, and the testing of amateur athletes. The article reviews the current anti-doping system, including recent amateur policies, and considers the implications of criminal doping laws and debates about medical exemptions for therapeutic use of banned substances. The article suggests that drug use in sport is a new front in the war on drugs, with extreme measures and negative unintended consequences [44].

This paper defines positive deviance and analyzes behavior among athletes. It argues that deviance often involves overconformity to sport's norms and values. Athletes who use the "sport ethic"-sacrifice, distinction, risk-taking, and challenging limits-become vulnerable to corruption. The ethic transforms positive behaviors into deviant ones, which are prohibited and sanctioned within society and sport organizations. Living in conformity to the sport ethic sets athletes apart but creates vulnerability to various forms of deviant behavior. This presents unique social control issues within sport, with performance-enhancing drugs being a case in point. The paper discusses an approach to controlling this form of positive deviance [45].

Drug abuse in athletes is a significant issue with various underlying causes, dating back to ancient times. The pursuit of excellence in sports and the use of performance-enhancing substances have led to widespread abuse across all sports and age groups [46].

Athletes' success relies on hard training, exercise, and talent. However, doping, the use of pharmacologically active substances to enhance performance, has been prevalent since ancient times. Doping is found in athletes of all ages and levels of competition. Many sports organizations have banned drug use and strict consequences for those caught. Addressing drug abuse in athletes requires preventive measures, education, and pharmacologic interventions. Strict consequences for drug abuse are in place for those caught [47].

Doping is a secretive phenomenon with limited data for statistical analysis due to the small number of athletes tested and imprecise research methods. The tests, conducted by Italian and WORLD athletes, may involve both in and out-of-competition testing. Currently, urine samples are used, but blood tests could reveal doping forms that cannot be detected in urine. In 2006, an anonymous questionnaire revealed that these tests are infrequently and poorly effective. Despite technological advancements, analytical methods are not reliable for searching the complete list of substances in anti-doping lists. It is challenging to anticipate opponent moves and adopt new substances and methods. Collaboration among accredited laboratories, ties with the pharmaceutical industry, and the instrumentation and measurements industry could help anticipate new doping

tendencies and forms through "scientific vigil" [48].

Doping in sports is a violation of World Anti-Doping Code (WADA) guidelines, involving illegal performance-enhancing medications. It has been linked to adverse health effects, such as hypertension, increased prevalence of cardio-vascular diseases, liver damage, and psychological dependence. It also tarnishes the spirit and prestige of sports and leads to untimely deaths. Health authorities have issued new techniques and guidelines to control doping, but most are limited to analytical advances within a specific class of drugs. Analytical-based experimental approaches like mass spectrometry and gas chromatography are used to detect doping in athletes. This review provides a comprehensive assessment of academic research on anti-doping analytical approaches over the last decade [49].

Drug abuse is a global epidemic, particularly in Punjab, India. It is linked to crime. A study involving 200 participants aged 18-30 found a significant difference in criminal behavior between substance abusers and sportspeople. The study recommends youth to engage in organized sports activities to divert their minds and channel their energy in a more meaningful manner. The findings suggest that providing ample time for sports participation can help reduce criminal behavior among youth [50].

The study reveals that various psychological and social support factors contribute to athletes' propensity to engage in drug abuse substances. These factors include a willingness to enhance performance, high perception of ego, coach criticism, concern for mistakes, personal standard, lack of self-confidence, low social support, and high task and ego orientations. Many athletes believe that performance is more important than adapting to advanced techniques. Some athletes believe that banned substances should be legalized in competitions, and inadequate knowledge about dope substances and their adverse effects could also contribute to their use. Sports officials should distribute information booklets to all players about banned substances to help them avoid using these substances. Psychological factors play a crucial role in athletes' decisions towards using banned substances, and proper counselling by sports psychologists is essential. Social support factors should also be considered during counselling. Athletes should be encouraged to learn new skills and techniques to enhance performance, and coaches, sports physiotherapists, sports psychologists, and sports officials should guide athletes towards a positive approach to competition. Emphasis should be placed on sports participation, and coaches should praise athletes for their efforts, never criticizing them for their mistakes but motivating them to learn from them [51].

Drugs are substances that alter body physiological processes, used for diagnosis, prevention, and treatment of diseases. Abuse refers to injudicious or irrational application. Performance-enhancing drugs are a major problem in sports, despite efforts by sporting bodies and medical professionals. Unethical substance or method use should not unfairly advantage players or pose health risks.

Drug testing programs are established to promote a safe and fair competition environment. Clinicians treating athletes should be familiar with commonly abused substances and doping methods [52]. The knowledge and awareness of doping and drugs abuse in sports among Coaches, Physical Education Teachers, Sports Physiotherapists, and Medical Doctors in Central India is important. A questionnaire was created to address aspects of doping; including WADA banned substances, methods, and Therapeutic Use Exemption (TUE) form. The results showed significant variation between groups of participants. The majority of participants (54% were aware of the WADA banned substance list), while 46% were unaware. The majority (53% were aware of TUE, and 47% were unaware). Knowledge about doping testing methods was 41% positive, while 59% were unaware. This survey provides insight into the overall knowledge and awareness of doping in sports among these professionals [53].

Doping, the use of drugs to improve sports performance, has been a practice since ancient times. In India, the first positive test of banned substances occurred in the 1990 Auckland Commonwealth Games. The Indian laboratory received ISO/IEC 17025: 1999 accreditation in 2003 and WADA accreditation in 2008. It successfully tested for 2 major international games in 2010 and found the most positives in bodybuilding, athletics, kabaddi, weightlifting, and powerlifting. Anabolic steroids were the most prevalent banned drug group. High-quality control is crucial for doping laboratories to ensure best practices and keep up with advancements in drug detection. Sportspeople should also be vigilant about antidoping rules and regulations [54].

Already there is a huge number of drug abuse cases pending in India but drug abuse cases in sports and by sports persons accelerate such number. Following measures can be undertaken to reduce drug abuse cases among sports persons:

Athletes should be trained to recognize signs and symptoms of drug abuse, including changes in physical health and behaviors. Early prevention curricula for Performance-Enhancing Drugs (PED) use in sports programs should focus on positive effects rather than negative effects. Mental health professionals should be included in the network of team doctors and healthcare providers to develop strong drug prevention policies that emphasize education and treatment. Mental health professionals should maintain a year-round presence with athletes and teams to build trust. Increased screening for underlying mental illnesses like depression should be done, and the effectiveness of this screening should be studied. Referral networks or team assistance programs should be established for athletes and teams. A comprehensive strategy to reduce drug abuse cases among athletes requires a concerted effort from sports governing bodies, coaches, athletes, and other stakeholders.

### Way forward

Punjab, despite political promises from political parties, continues to grapple with drug addiction. Former Chief

Minister Captain Amarinder Singh (2021) promised to make Punjab a drug-free state in just 4 weeks, while Bhagwant Mann (2023) pledged to ensure that Punjab's youth use a pen instead of injections means education is solution not drugs. To combat drug trafficking and distribution, the government should enhance training and resources for law enforcement agencies, allocate additional resources, implement stricter monitoring and control measures, establish specialized drug enforcement units, conduct well-planned undercover operations, and integrate technology solutions into court processes.

Judicial reforms should include efficient case management systems, increased court staff, specialized drug courts, alternative dispute resolution methods, and integration of technology solutions. Legal reforms should cover all aspects of drug abuse, trafficking, and possession, revise penalties, introduce diversion programs, launch public awareness campaigns, promote accessible rehabilitation centers, and encourage community members to report drug-related activities anonymously and safely.

International cooperation is crucial to combat cross-border drug trafficking effectively. Collaborating with neighbouring states and countries, strengthening information sharing networks with international agencies, and seeking international assistance from organizations like the United Nations Office on Drugs and Crime (UNODC) can help develop comprehensive anti-drug initiatives. These proposed solutions aim to reduce the backlog of drug abuse cases in Punjab, address the root causes of drug abuse, enhance law enforcement capabilities, and ensure fair and timely justice.

### Discussion

The backlog of drug abuse cases in Punjab is significantly affecting individuals and society, leading to prolonged suffering and perpetuating drug abuse problems. The findings have significant implications for the justice system and society. Addressing the issue requires a concerted effort from all stakeholders, including the legal system, law enforcement, healthcare providers, and society. By addressing this issue comprehensively, we can mitigate the devastating effects of drug addiction and delayed justice on communities. Future research is needed to explore specific solutions and strategies to reduce the backlog of drug abuse cases in Punjab. Monitoring the situation and assessing the impact of legal system changes is also crucial to ensure timely justice delivery and societal benefits.

### Conclusion

This research paper examines the drug abuse problem in Punjab, northern India, focusing on its causes, impact on the criminal justice system, and potential solutions. The study identifies conflicting emotions, youth unemployment, consumption practices, and traditional Punjabi masculinity as contributing factors. Punjab ranks second in the country for drug abuse, with 66% of school-going students consuming gutka or tobacco. The Punjab government's 'Decisive War against Drugs' in July 2022 led to 19,093

arrests of drug smugglers and peddlers. The state has consistently increased drug abuse cases, with the state leading the list of states with the highest number of drug-related FIRs between 2019 and 2023. The Comprehensive Action against Drug Abuse (CADA) Programme aims to combat drug abuse by enforcing laws against drug trafficking and taking legal action against drug smugglers, suppliers, dealers, and peddlers.

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### Conflict of Interest

Authors have no conflict of interest to declare.

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