

SOCIAL STIGMATIZATION OF JUVENILE DRUG OFFENDERS IN THE JUVENILE OBSERVATION AND PROTECTION CENTER, UDON THANI PROVINCE

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Abstract

This study aims to investigate the social stigmatization experienced by juvenile drug offenders detained in the Juvenile Observation and Protection Center of Udon Thani Province. Employing a quantitative research methodology, data were collected from a total population of 87 juveniles. A structured questionnaire, comprising two sections, was utilized to gather data on personal characteristics and experiences of social stigma. Descriptive statistics, including frequency, percentage, mean, and standard deviation, were employed for data analysis. The findings indicate that the overall level of social stigmatization among the sample group was moderate, with a mean score of 2.98. The highest mean was found in the perception of being negatively viewed by others due to their drug-related history (mean = 3.77), followed by lack of societal acceptance in efforts toward rehabilitation (mean = 3.16), and experiences of unfair treatment (mean = 3.11). The study underscores the profound implications of social labeling processes on juvenile offenders' reintegration prospects.

Keywords: Social Stigmatization, Juvenile Offenders, Juvenile Observation and Protection, Udon Thani Province

Introduction

Thailand is currently grappling with a severe drug epidemic, particularly due to the illicit importation of narcotics from Myanmar through the Lao People's Democratic Republic into the Golden Triangle region. Border provinces such as Mae Hong Son, Chiang Rai, and Phayao have become major distribution hubs, facilitating the nationwide spread of drugs (Phufa Resthome, 2023). Additionally, social media platforms have played an increasingly prominent role in accelerating drug transactions, thus amplifying the drug distribution network.

The consequences of drug abuse are severe, impacting both physical and mental health, often resulting in neurological damage, depression, anxiety, and drug-induced psychosis. Furthermore, drug addiction significantly contributes to familial disintegration and societal instability due to irresponsibility, economic losses, and the perpetration of crimes to sustain drug consumption (Faculty of Medicine, Ramathibodi Hospital, Mahidol University, 2022).

Recidivism among juvenile offenders, particularly in drug-related cases, presents a critical societal challenge. Adolescents aged 13 to 17 are particularly vulnerable due to developmental characteristics, curiosity, and peer pressure, making them susceptible to drug experimentation and eventual trafficking (Sirilak Panya & Saowalak Tajang, 2020). Frank Tannenbaum (1938) posited that deviant behavior is reinforced when society labels individuals as "criminals" or "bad," leading them to internalize these roles. Juvenile offenders, once processed through the justice system, often face prejudiced perceptions by authority figures, exacerbating their marginalization and increasing the likelihood of reoffending.

Accordingly, this study seeks to analyze the extent and nature of social stigmatization among juvenile drug offenders detained in the Juvenile Observation and Protection Center of Udon Thani Province, thereby contributing to the development of evidence-based interventions and policies aimed at mitigating the adverse effects of stigma.

Research Objective

To investigate the social stigmatization of juvenile drug offenders in the Juvenile Observation and Protection Center of Udon Thani Province.

Research Methodology

Population and Sample

The population for this study comprised 87 juvenile offenders detained in the Juvenile Observation and Protection Center of Udon Thani Province (Juvenile Observation and Protection Center, Udon Thani, 2024). Due to the relatively small population size, a census method was employed, encompassing all 87 individuals who had committed drug-related offenses.

Research Instrument

Data were collected using a structured questionnaire divided into two sections:

Section 1: Personal characteristics, including gender, age, education level, pre-arrest living arrangements, and types of drugs used. Questions were multiple-choice, allowing for the selection of one option.

Section 2: Social stigmatization experiences, measured using a five-point Likert scale (Likert, 1961), encompassing 30 items.

Data Collection Procedure

The questionnaire was developed through an extensive review of relevant literature, theories, and prior research. Ethical approval was obtained from the Human Research Ethics Committee of Suan Sunandha Rajabhat University, and permission was sought from the Director-General of the Department of Juvenile Observation and Protection.

Subsequently, data collection was conducted under strict adherence to institutional regulations. Completed questionnaires were manually compiled and entered into a statistical software program for analysis.

Data Analysis

Descriptive statistics were used, including frequency, percentage, mean, and standard deviation. Mean scores were interpreted as follows:

4.21 - 5.00: Very High

3.43 - 4.20: High

2.61 - 3.42: Moderate

1.81 - 2.60: Low

1.00 - 1.80: Very Low

Research Results

Demographic data indicated that the majority of respondents were male (94.25%), predominantly aged 17 years (63.22%), with the majority having completed lower secondary education (52.87%). Most resided with both parents prior to detention (39.08%).

In terms of social stigmatization (Table 1), the findings revealed a moderate overall level (mean = 2.98). The highest mean score was recorded for being perceived negatively by others due to drug-related history (mean = 3.77), followed by lack of societal acceptance for rehabilitation efforts (mean = 3.16), and experiences of unfair treatment (mean = 3.11).

Table 1: Social Stigmatization Mean Scores

Item	Mean	S.D.	Interpretation
Negative perception due to drug history	3.77	1.107	High
Lack of societal acceptance	3.16	1.160	Moderate
Unfair treatment due to drug history	3.11	1.115	Moderate
Distrust by family or neighbors	3.02	1.276	Moderate
Social avoidance	2.82	1.225	Moderate
Denial of educational opportunities	2.48	1.209	Low
Negative societal attitudes preventing reintegration	2.79	1.183	Moderate
Negative judgment during recounting of past experiences	3.09	1.207	Moderate
Denial of employment opportunities	2.41	1.483	Low
Overall	2.98	0.856	Moderate

Discussion

The findings reveal a moderate level of social stigmatization among juvenile drug offenders, with notable challenges concerning negative perceptions, societal rejection of rehabilitation efforts, and unfair treatment. These findings align with the theoretical framework posited by Howard S. Becker (1963) and Erving Goffman (1963), wherein labeling and stigmatization profoundly influence self-identity and societal integration.

Becker (1963) emphasized that societal labeling not only defines deviant behavior but also perpetuates it by reinforcing negative self-concepts. Goffman (1963) similarly asserted that stigma marginalizes individuals by devaluing them based on perceived deviations from societal norms. This conceptual framework illuminates how juvenile offenders internalize societal judgments, ultimately inhibiting their successful reintegration into society.

Moreover, the findings corroborate those of Wright, et al. (2011), who found that labeled juveniles encounter social exclusion, educational marginalization, and limited opportunities for reintegration. Link and Phelan (2001) further posited that stigma, when coupled with social power imbalances, exacerbates psychological distress, engendering shame, anger, and depression. Such psychological burdens can significantly impede the rehabilitative process, fostering a sense of alienation and hopelessness among juvenile offenders.

The phenomenon of secondary deviance, as articulated by Edwin Lemert (1951), offers an additional lens through which to interpret these findings. Secondary deviance occurs when an individual internalizes a deviant identity due to societal reactions, thereby perpetuating

further deviant behavior. In the context of juvenile drug offenders, the experience of stigma may entrench criminal self-identities, leading to increased recidivism rates.

Further, the socio-ecological model proposed by Bronfenbrenner (1979) suggests that individual behavior is influenced by multiple layers of the social environment, including family, community, and societal institutions. The pervasive stigma experienced by juvenile offenders thus not only reflects individual-level prejudice but also systemic barriers entrenched within educational, judicial, and employment systems.

The role of media representations in reinforcing negative stereotypes must also be acknowledged. Numerous studies have demonstrated that media portrayals of juvenile offenders often emphasize violence, deviance, and incorrigibility, thereby reinforcing public fears and biases (Dorfman & Schiraldi, 2001). Such portrayals contribute to a societal climate wherein juvenile offenders are deemed irredeemable, thereby justifying exclusionary practices.

Culturally specific factors must also be considered. In Thai society, concepts of "face" and familial honor play a significant role in social interactions. Consequently, families of juvenile offenders may also experience courtesy stigma (Goffman, 1963), leading to familial strain, isolation, and reduced support networks for the youth upon release. These dynamics further complicate reintegration efforts, as familial support is a crucial protective factor against recidivism.

Addressing these multifaceted challenges requires systemic reform. Strengthening restorative justice programs, which emphasize repairing harm and reintegrating offenders into the community, may mitigate the negative effects of stigmatization. Restorative practices provide opportunities for juvenile offenders to demonstrate accountability, express remorse, and rebuild trust within their communities, thereby countering stigmatizing narratives (Zehr, 1990).

Educational interventions also hold promise. Anti-stigma campaigns targeting schools, community centers, and the general public can challenge prevailing stereotypes and promote a more nuanced understanding of juvenile delinquency. Such campaigns should highlight the socio-economic and psychological vulnerabilities that predispose youth to substance abuse and criminal behavior, thereby fostering empathy and support rather than condemnation.

Moreover, specialized training for criminal justice personnel, educators, and social workers is essential. Such training should focus on recognizing and mitigating implicit biases, adopting trauma-informed approaches, and supporting rehabilitative rather than punitive models of juvenile justice.

Ultimately, the findings of this study underscore the necessity of adopting a holistic, multi-level strategy to address the social stigmatization of juvenile drug offenders. Efforts must transcend individual-level interventions to encompass community mobilization, institutional reforms, and policy initiatives that collectively foster environments conducive to rehabilitation and reintegration.

Recommendations

Policy Recommendations

1. Launch public awareness campaigns emphasize that juvenile offenders are capable of rehabilitation, particularly targeting educational institutions and communities where reintegration is anticipated.
2. The Ministry of Justice should develop rehabilitation curricula incorporating life skills training, self-esteem enhancement, and anti-stigma strategies, complemented by mentorship programs involving individuals with similar life experiences.

3. Establish case management systems integrating the Ministry of Justice, the Ministry of Social Development and Human Security, and local administrative organizations, providing scholarships or internship opportunities for reintegrating juveniles.

Recommendations for Future Research

1. Conduct comparative studies across various juvenile detention centers to assess the influence of geographic, cultural, and community contexts on stigmatization levels.

2. Employ qualitative methods, including in-depth interviews with juveniles, guardians, and officials, to capture the complex social and psychological dimensions of stigmatization.

3. Examine the longitudinal effects of social stigma on recidivism rates among juvenile offenders.

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