

Analysis of Alcohol and Cigarette Consumption in Children and Adolescents and Its Implications for Crime Prevention in Indonesia from a Criminological Perspective

Jason Matthew Anthony¹, Maria Minerva Gani², Nathasya Jhonray Siregar³ Tasya Amira⁴

Faculty of Law, Pelita Harapan University, Indonesia

Article Info

Article history:

Accepted: 30 April 2026

Publish: 9 May 2026

Keywords:

juvenile delinquency

child protection

alcohol

tobacco

criminology

Abstract

This article examines juvenile delinquency in the form of alcohol and tobacco consumption among children under 18 years old in Indonesia from both legal and criminological perspectives. Using a normative-empirical approach, this study analyzes statutory regulations alongside secondary data from institutions such as WHO and the Indonesian Ministry of Health. The findings indicate that early exposure to addictive substances functions as a criminogenic factor that increases the likelihood of future criminal behavior. Although Indonesia has established a comprehensive legal framework, including Law No. 35 of 2014 on Child Protection and Government Regulation No. 109 of 2012, weak enforcement and regulatory inconsistencies remain significant challenges. A comparative perspective with Singapore and Malaysia reveals that stricter enforcement and integrated preventive policies contribute to better outcomes. This study concludes that early intervention through legal, social, and structural approaches is essential to prevent the escalation of juvenile delinquency into criminal acts.

This is an open access article under the [Lisensi Creative Commons Atribusi-BerbagiSerupa 4.0 Internasional](https://creativecommons.org/licenses/by-sa/4.0/)



Corresponding Author:

Pietro Grassio

Dosen Universitas Pelita Harapan

Email: pietroyulio5@gmail.com

1. INTRODUCTION

The phenomenon of delinquency among children and adolescents in Indonesia is not only evident in the form of explicit criminal acts, but also in early deviant behavior that has the potential to develop into more serious violations. One of the most prominent early behaviors is the consumption of cigarettes and alcohol in an age group that is legally still considered a child, namely, under 18 years of age. From a global health perspective, the WHO defines adolescents as the age group 10 to 19 years old, so the discussion in this article is more appropriate to use the term " **children and adolescents from early childhood**". Choosing the right terminology is crucial to ensure that the object of study, empirical data, and legal framework fall within a consistent analytical framework. Therefore, cigarette and alcohol consumption among children and adolescents deserves to be positioned as an early deviation that requires legal and criminological interpretation, not simply as minor delinquency.

Empirical data show that exposure to addictive substances among children and adolescents in Indonesia remains at an alarming level. A Ministry of Health report shows that the prevalence of smoking among the population aged 10–18 years increased from

7.2% in 2013 to 9.1% in 2018. WHO, through the *Global School-based Student Health Survey, Indonesia 2023*, also noted that 23% of students aged 13–17 years used tobacco products, 5.6% consumed alcohol in the 30 days before the survey, and 6.0% had been drunk at least once in their lives. Besides that, the *Global Youth Tobacco Survey Indonesia 2019* showed that 60.6% of student smokers who tried to buy cigarettes were not prevented because of age, and 71.3% bought cigarettes. This data set shows that the main problem does not stop at individual choice, but is also related to ease of access, weak age controls, and the social normalization of deviant behavior.

From a criminological perspective, early cigarette and alcohol consumption should not be treated as neutral deviations. The WHO emphasizes that adolescence is a phase in which behavioral patterns are formed that can either protect or endanger current and future health. Therefore, repeated, unchecked minor deviations have the potential to reduce children's and adolescents' sensitivity to norms, forming the perception that minor violations are normal. The risks to be aware of include not only health damage but also the development of tolerance for other deviant behaviors through social learning and weak environmental controls. Therefore, the issue of cigarette and alcohol consumption among children and adolescents is relevant for discussion as a matter of child protection, social control, and crime prevention.

Based on this background, this article aims to analyze cigarette and alcohol consumption among children and adolescents as a form of early deviance from a legal and criminological perspective. The analysis focuses on four aspects: the accuracy of legal subject categories, the empirical conditions of exposure to addictive substances, criminogenic factors that encourage the normalization of deviance, and the effectiveness of the regulatory framework in protecting children. The discussion also examines the gap between protection norms and distribution practices that still allow children and adolescents to access addictive products. To strengthen the argument, this article uses a limited comparison of control practices in Singapore and Malaysia. Through this structure, this article hopes to demonstrate that crime prevention needs to begin with controlling minor deviations before they develop into more serious ones.

Thus, this research is important to emphasize that ignoring mild deviance in children and adolescents not only weakens legal protection but also opens up space for the normalization of delinquency, which can develop into more serious forms of deviance. Therefore, through research on children and adolescents exposed to cigarette and alcohol consumption, the author aims to analyze how these behaviors can be understood as forms of early deviance from a legal and criminological perspective. The author also aims to examine the effectiveness of the Indonesian legal framework, the criminogenic factors that influence the emergence and normalization of these behaviors, and lessons learned from Singapore and Malaysia in preventing the normalization and escalation of early deviance in children and adolescents in Indonesia.

2. METHOD

This research is a normative legal study supported by the use of official secondary data to strengthen the reading of the factual conditions of cigarette and alcohol consumption among children and adolescents in Indonesia. This study uses a legislative approach, a conceptual approach, and a comparative approach. The legislative approach is used to examine legal norms governing the protection of children from exposure to addictive substances, particularly Law Number 35 of 2014 concerning Child Protection, Law Number 17 of 2023 concerning Health, and Government Regulation Number 28 of 2024 concerning

Implementing Regulations of Law Number 17 of 2023 concerning Health. The conceptual approach is used to analyze cigarette and alcohol consumption as a form of initial deviation from a criminological perspective. The comparative approach is used to a limited extent to compare control policies in Indonesia with practices in Singapore and Malaysia.

The research materials consist of primary legal materials, secondary legal materials, and official secondary data. Primary legal materials consist of laws and regulations relevant to child protection and the control of addictive substances, while secondary legal materials consist of books, scientific journals, and academic works discussing juvenile delinquency, criminological theory, and the effectiveness of law enforcement. Official secondary data were obtained from reports from the Ministry of Health of the Republic of Indonesia. *Global School-based Student Health Survey, Indonesia 2023*, *Global Youth Tobacco Survey, Indonesia 2019*, as well as official policy documents from Singapore and Malaysia. All materials were collected through literature review and document searches. The materials were then analyzed qualitatively using an argumentative approach to connect legal norms, official secondary data, and criminological theory to assess the effectiveness of legal protection for children and adolescents from exposure to addictive substances.

3. RESULTS AND DISCUSSION

Cigarette and alcohol consumption among children and adolescents in Indonesia can no longer be understood as sporadic behavior, as the practice occurs at relatively high rates and is supported by relatively lax access. The Indonesian Ministry of Health noted that the prevalence of smoking among the population aged 10–18 years increased from 7.2% in 2013 to 9.1% in 2018. In the group of students aged 13–17 years, *Global School-based Student Health Survey, Indonesia 2023* recorded that 19.9% of students still smoke, 23.4% use tobacco products, 12.4% use e-cigarettes, and 5.1% consumed alcohol in the 30 days before the survey. This situation is reinforced by the *Global Youth Tobacco Survey, Indonesia 2019*, which showed that 60.6% of student smokers who tried to buy cigarettes were not prevented because of age, while 71.3% bought cigarettes. When these facts are read in their entirety, it appears that cigarettes and alcohol do not exist as stand-alone deviations, but rather as behaviors made possible by structures of access, social permissiveness, and weak normative barriers.

From a criminological perspective, the situation is best read through the lens of *social learning theory*, because children and adolescents tend to learn deviant behavior from social environments that present it as familiar, normal, or even attractive. Literature *open access* regarding the influence of parents and peers on adolescent smoking behavior, it explains that the initiation and escalation of smoking moves largely through the process of imitation, *peer influence*, and *peer selection*, so that this behavior does not arise suddenly, but is learned from the social network around the teenager. The pattern is consistent with the results of *GYTS Indonesia 2019*, which recorded that 56.8% of students saw tobacco use on television, videos, or films, 65.2% noticed cigarette advertisements or promotions on television, 60.9% saw promotions in outdoor media, 10.5% owned items with cigarette brand logos, and 6.0% had been offered free tobacco products by company representatives. Even 7.9% of students who had not yet smoked were noted as being vulnerable to trying smoking in the future. Within this framework, cigarettes and alcohol are not only consumer products, but also social symbols that are continually repeated in visual space, social space, and identity space. Therefore, the consumption of cigarettes and alcoholic beverages deserves to be understood as an **initial deviation**, because such behavior marks a phase

when children and adolescents begin to learn that minor infractions are acceptable, imitated, and normalized.

The reading becomes even stronger when linked to *social control theory*, which places the family, school, and social environment as the main barriers that prevent children from falling into deviant behavior. *GSHS Indonesia 2023*, 54.0% of students stated that their parents or guardians never or rarely understand their problems and concerns, 46.6% stated that their parents or guardians never or rarely know what they do in their free time, and 32.1% had skipped school without permission at least one day in the 30 days before the survey. Theoretically, this condition indicates a weakening *attachment* and *monitoring*, which, from a social control perspective, actually functions as a brake against deviation. Analysis *open access* Travis Hirschi's theory-based study in Batam also places smoking and drinking as forms of juvenile delinquency outside of school, while sociological studies in Makassar confirm that family background, community environment, and school are important factors influencing juvenile delinquency. Thus, empirical data not only show the existence of addictive substance consumption but also show why this behavior can persist, namely, because the social controls that should limit the initial deviation do not work effectively enough.

From a legal perspective, cigarette and alcohol consumption among children and adolescents takes on a more explicit meaning because Indonesia has established a protection framework that positions children as subjects who must be protected from exposure to addictive substances. Law Number 35 of 2014 emphasizes the orientation of child protection, while Law Number 17 of 2023 concerning Health and Government Regulation Number 28 of 2024 strengthen control over tobacco products and other addictive substances by limiting exposure, marketing, and access to young age groups. This means that normatively, the state does not view these behaviors as neutral habits, but rather as conditions that must be prevented and controlled. Therefore, when cigarettes and alcohol remain easily accessible and are repeatedly used by children and adolescents, this situation is not only a health issue but also a deviation from the legal protection order established by the state. Based on this overall description, the first problem formulation is answered by the conclusion that cigarette and alcohol consumption among children and adolescents in Indonesia can be understood as a form of early deviation, because this behavior arises from the social learning process of deviance, is reinforced by weak social control, and occurs in conditions that contradict the direction of national legal protection.

The effectiveness of Indonesia's legal framework in preventing the normalization and escalation of early deviance in children and adolescents cannot be measured solely by the presence or absence of regulations, but rather by the extent to which those regulations are able to cut off access, exposure, and repetition of deviant behavior. Normatively, Indonesia has moved toward a more comprehensive legal framework through Law No. 35 of 2014 concerning Child Protection, Law No. 17 of 2023 concerning Health, and Government Regulation No. 28 of 2024 as its implementing regulation. According to the Ministry of Health's official explanation, Government Regulation No. 28 of 2024 is directed at reducing cigarette consumption, including through regulating retail cigarette sales, restricting advertising, and strengthening health warnings. Conceptually, this development demonstrates that the state no longer views the control of addictive substances as a peripheral issue, but rather as part of a broader public health and child protection regime. However, this normative power can only be considered effective if it truly transforms market behavior, social behavior, and the social spaces that have traditionally served as a medium for normalizing initial deviation.

The gap between norms and effectiveness is seen when the legal framework is compared with the empirical reality of adolescents in Indonesia. *Global School-based Student Health Survey, Indonesia 2023* recorded that 23.4% of students aged 13–17 years used tobacco products, 19.9% still smoked, 12.4% used e-cigarettes, and 5.1% consumed alcohol in the 30 days before the survey. *Global Youth Tobacco Survey, Indonesia 2019* also noted that 60.6% of student smokers who tried to buy cigarettes were not prevented because of age, 71.3% bought cigarettes, 65.2% saw cigarette advertisements or promotions on television, and 60.9% saw promotions in outdoor media. In the logic of legal effectiveness, these figures indicate that normative instruments have not fully succeeded in severing the three main pathways leading to initial deviation: access, exposure, and repetition. Thus, Indonesia's primary problem is no longer the absence of regulations, but the weak implementation, oversight, and deterrent effect of existing regulations.

This ineffectiveness becomes even more apparent when read through the criminogenic factors operating around children and adolescents. In perspective, *social learning theory*, smoking, and drinking behaviors do not develop in isolation, but are learned through peers, media exposure, and social symbols that make the behavior seem normal or attractive; literature reviews also show that the initiation and escalation of adolescent smoking move largely through the process of imitation, *peer influence*, and *peer selection*. At the same time, *social control theory* explained that deviance will more easily develop when ties with family and social institutions are weakened, and this is reflected in the 2023 GSHS when 54.0% of students stated that their parents or guardians never or rarely understand their problems, 46.6% stated that their parents or guardians never or rarely know what they do in their free time, and 32.1% had skipped school without permission at least one day in the 30 days before the survey. If these findings are read in conjunction with Travis Hirschi's theory-based article in Batam, which places smoking and drinking as forms of juvenile delinquency outside of school, it appears that the main criminogenic factors in the Indonesian context lie not only in the substance, but in a combination of loose market access, continuous symbolic exposure, peer influence, and weak family supervision. Therefore, the effectiveness of the law will always be limited as long as the law only works at the level of formal prohibition, but is not strong enough to cover the social factors that actually reproduce the initial deviation itself.

Singapore's experience shows that preventing early deviation requires a combination of firm age limits, concrete sanctions, and consistent supervision. The Health Sciences Authority stipulates *Minimum Legal Age* for the purchase, use, possession, sale, and supply of tobacco products by the age of 21 as of 1 January 2021. For retailers selling tobacco products to persons under that age, Singapore law provides for a fine of up to S\$5,000 for the first offense and S\$10,000 for the second or subsequent offense, along with a six-month retail license suspension for the first offense and license revocation for subsequent offenses. At the general population level, the *National Population Health Survey Singapore* reported a daily smoking prevalence of 8.8% in 2023. A key lesson from Singapore is that legal effectiveness does not stem from the formulation of strict norms alone, but rather from the close relationship between age restrictions, retail licensing controls, swift administrative enforcement, and a consistent state message that children's access to addictive products is non-negotiable.

Malaysia offers a different, but equally important, lesson: that strengthened sanctions must be accompanied by youth surveillance and specific public health interventions. *The Smoking Products for Public Health Act 2024 (Act 852)* prohibits the sale of cigarette products to minors with the threat of heavier fines and penalties for repeat violations.

However, *National Health and Morbidity Survey: Adolescent Health Survey 2022* still recorded a prevalence of any tobacco product use of 18.5%, current smokers of 6.2%, e-cigarette or vape users of 14.9%, and current alcohol drinkers of 7.4% among Malaysian youth. This shows that stricter laws do not automatically eliminate early deviance if the social environment, adolescent demand, and consumption habits have already been established. Therefore, the answer to the second problem formulation is that Indonesia's legal framework has substantially moved towards being stronger, but its effectiveness is still limited by weak implementation, promotional exposure, loose retail access, peer influence, and weakened family control. Meanwhile, lessons from Singapore and Malaysia confirm that preventing the normalization and escalation of early deviance will only be successful if legal restrictions, administrative enforcement, adolescent surveillance, and family-school-community interventions are implemented in an integrated manner.

4. CONCLUSION

Juvenile and adolescent delinquency, particularly cigarette and alcohol consumption, is a phenomenon with serious implications for the development of crime in Indonesia. Although Indonesia has a fairly adequate legal framework, its implementation still faces various obstacles, particularly in terms of law enforcement and policy consistency. From a criminological perspective, this behavior is a criminogenic factor that can develop into more serious criminal acts if not addressed early.

Therefore, prevention must be carried out comprehensively through legal, social, and structural approaches. Comparisons with other countries show that firm law enforcement and consistent policies are key factors in successfully controlling such behavior. Therefore, it can be emphasized that crime prevention efforts must begin with controlling early childhood delinquency, particularly that related to the use of addictive substances, as part of a long-term strategy to create a more orderly and safe society.

5. BIBLIOGRAPHY

- Ashadi, A., & Purnawan, A. (2018). Handling juvenile delinquency caused by alcohol consumption. *Jurnal Daulat Hukum*, 1(3), 678–685. <https://jurnal.unissula.ac.id/index.php/RH/article/view/3932>
- Mulvihill, C. (2014). Parental and peer influences on adolescent smoking: A literature review. *Interdisciplinary Journal of Health Sciences*, 4(1), 33–38. <https://doi.org/10.18192/riss-ijhs.v4i1.1218>
- Saragih, K. W., Simanjuntak, R., & Siregar, M. (2024). Juvenile delinquency in the perspective of criminology in Indonesia: A systematic literature review. *Journal Analytica Islamica*, 13(1), 77–89. <https://jurnal.uinsu.ac.id/index.php/analytica/article/view/24677>
- Sisca, M., & Alhakim, A. (2022). Analysis of juvenile delinquency based on social control theory. *Legal Brief*, 11(2), 210–218. <https://legal.isha.or.id/index.php/legal/article/view/386>
- Sutarjo, A., Nugroho, P., & Firmansyah, D. (2024). Law enforcement against juvenile delinquency in Indonesia. *Res Nullius Law Journal*, 6(1), 88–99. <https://ojs.unikom.ac.id/index.php/law/article/view/18610>
- Akers, R. L. (1998). *Social learning and social structure: A general theory of crime and deviance*. Northeastern University Press.
- Hirschi, T. (1969). *Causes of delinquency*. University of California Press.

- Santrock, J. W. (2011). *Adolescence* (13th ed.). McGraw-Hill.
- Soekanto, S. (2012). *Faktor-faktor yang mempengaruhi penegakan hukum*. RajaGrafindo Persada.
- Health Sciences Authority. (n.d.). Overview of tobacco control. <https://www.hsa.gov.sg/tobacco-regulation/overview>
- Health Sciences Authority. (2018, December 28). Minimum legal age (MLA). <https://www.hsa.gov.sg/announcements/regulatory-updates/minimum-legal-age-%28mla%29>
- Institute for Public Health, Ministry of Health Malaysia. (2023). National health and morbidity survey (NHMS) 2022: Adolescent health survey 2022 fact sheet. https://iku.gov.my/images/nhms-2022/2a._ahs_factsheet_bi_18052023.pdf
- Kementerian Kesehatan Republik Indonesia. (2024). Laporan akuntabilitas kinerja Kementerian Kesehatan Republik Indonesia tahun 2023. https://ppid.kemkes.go.id/toapsoot/2022/06/FINAL_LAKIP-KEMENKES-2023_compressed.pdf
- Kementerian Kesehatan Republik Indonesia. (2024, August 2). Tekan konsumsi perokok anak dan remaja. <https://kemkes.go.id/eng/tekan-konsumsi-perokok-anak-dan-remaja>
- Ministry of Health Singapore. (2024). National population health survey 2023 report. <https://www.moh.gov.sg/others/resources-and-statistics/nphs-2023>
- World Health Organization. (n.d.). Adolescent health. <https://www.who.int/health-topics/adolescent-health>
- World Health Organization. (2019). Global youth tobacco survey: Indonesia 2019 fact sheet. <https://www.who.int/publications/m/item/2019-gyts-fact-sheet-indonesia>
- World Health Organization. (2023). Global school-based student health survey: Indonesia 2023 fact sheet. <https://www.who.int/publications/m/item/2023-gshs-fact-sheet-indonesia>
- Indonesia. (2014). Undang-Undang Republik Indonesia Nomor 35 Tahun 2014 tentang Perubahan atas Undang-Undang Nomor 23 Tahun 2002 tentang Perlindungan Anak. <https://peraturan.bpk.go.id/Home/Details/38723/uu-no-35>
- Indonesia. (2023). Undang-Undang Republik Indonesia Nomor 17 Tahun 2023 tentang Kesehatan. <https://peraturan.bpk.go.id/Details/258028/uu-no-17-tahun-2023%29>
- Indonesia. (2024). Peraturan Pemerintah Republik Indonesia Nomor 28 Tahun 2024 tentang Peraturan Pelaksanaan Undang-Undang Nomor 17 Tahun 2023 tentang Kesehatan. <https://peraturan.bpk.go.id/Details/294077/pp-no-28-tahun->
- Malaysia. (2024). Control of Smoking Products for Public Health Act 2024 (Act 852). https://infosihat.moh.gov.my/images/media_sihat/lain_lain/Akta%20852%20%26%20Akta%20Makanan%20Pindaan%202024/Warta%20Akta%20852%20BI.pdf