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Drug Abuse In Indian Slums

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Abstract:

Drug Abuse is a plight that breeds in almost every society in the world including India. It is a costly burden that inhibits the growth of a country. However, the prevalence of drug abuse and pattern of drug consumption varies in different types of population. The slum dwellers, whose growth is critically hindered due to economic and social problems, the prevalence of substance abuse in this population might be different from other communities and interrelated to these problems. The aim of this research paper is to study the prevalence of drug abuse and the factors that foster it within the slum population of India. The paper discusses the policies in place to deal with drug abuse in the general scenario and about their enactment gaps in the Slums of India using multitude assessments including the PESTLE analysis and strengths/weaknesses analysis. These policies include- National Drug and Psychotropic Substances Act, 2014 and The Nasha Mukt Bharat Campaign.

Keywords: Drug Abuse, slum dwellers, prevalence, pattern, Slums, poverty, crime, factors, analysis, impact, social, economic


1.0 Introduction

Substance abuse or Drug Abuse refers to the harmful or hazardous use of psychoactive substances, including alcohol and illicit drugs. Psychoactive substance use can lead to dependence syndrome - a cluster of behavioural, cognitive, and physiological phenomena that develop after repeated substance use and that typically include a strong desire to take the drug, difficulties in controlling its use, persisting in its use despite harmful consequences, a higher priority is given to drug use than to other activities and obligations, increased tolerance, and sometimes a physical withdrawal state.¹ As a product of fast development, the slums in Indian cities are growing rapidly. A slum is a contiguous settlement where the inhabitants are characterized as having inadequate housing and basic services.²

Drug abuse inflicts immeasurable harm on public health and safety around the world each year and threatens the peaceful development and smooth functioning of many societies³. With the research work being carried out around the world to study the adversity of a menacing peril like drug abuse, the problem is accentuated when it comes to densely populated slums exposed to unhygienic living conditions. A large section residing in the slums succumbs to the dismal reality of drug dependence. Trapped in the vicious cycle of poverty and exploitation, drug abuse may occur to relieve the stress associated with this social strain. With less access to support systems, healthcare and awareness programmes, drug abuse is a greater concern in the slums. The above statistics propound the vulnerability of the slum population when it comes to drug abuse. Be it the living standards, illiteracy, poverty, social strain, lack of awareness and many other inextricable factors drive people to jeopardize their lives falling prey to menaces like drug abuse.

Standing at the utmost importance is the youth and the adolescents characterized by a high degree of impulsiveness and impatience. Young people, keen on learning and exploring new things, retreat into the confines of like-minded individuals and resort to substance abuse for psychological or emotional escape. Slum dwelling families susceptible to parental alcoholism, poverty, and abusive conditions at home, provoke impulses of young juveniles who are again caught in the rattraps of a grave problem like Substance Abuse.

The National Action Plan for Drug Demand Reduction by Ministry of Social Justice and Empowerment (Government of India), explicates numerous policies and acts with stringent provisions to control and regulate the operations relating to narcotic and psychotropic drugs⁴, but in slums, such imposition and implementation diverges due to lack of awareness, social exclusion, government’s negligence and other indefensible influences.
Having shed light on the gravity of a grave problem fosters the need for this evil to be condemned before it eats the roots of our society, which culminates the need for people to be well acquainted with the same. The research paper (with reference to available secondary data) therefore aims at elucidating the pattern of drug consumption in Indian Slums and reviewing the policies available for dealing with Substance Abuse, and the scope of the policies when deliberated about slums. The paper will give an in-depth view of various socio-economic aspects of the slums in India. So, as to make people informed about the same and draw the attention of the concerned authorities towards understanding the deeper problems faced by the slum dwellers in respect of drug abuse.

2.0 Prevalence of Drug Abuse in Indian Slums

Drug addiction poses a significant threat to the health and safety of the communities. It is a costly burden on society in all domains and is a problem that inhibits the growth of a country. The illegal production and possession of drugs encourage crime and violence worldwide. India too is adversely affected by the curse of drug abuse. The cases of drug abuse in India are on a rise. According to a UN report, one million heroin addicts are registered in India, and unofficially there are as many as five million. What started off as casual use among a minuscule population of high-income group youth in the metro has permeated to all sections of society. Cannabis, heroin, and Indian-produced pharmaceutical drugs are the most frequently abused drugs in India. Cannabis products, often called charas, bhang, or ganja, are abused throughout the country because it has attained some amount of religious sanctity because of its association with some Hindu deities.9

Drug abuse is rampant among the Indian slums. A study on drug abuse among residents of northeast Delhi’s Seemapuri by The Society for the Promotion of Youth and Masses (SPYM) revealed that at least 80% of the children surveyed in the slum are addicts. It was further found that children as young as seven started abusing drugs in this rural locality. The study was ordered after six cases of juveniles addicted to drugs indulging in crime were registered in Seemapuri. It pointed out that most of the parents knew that their children were consuming drugs. But they were either helpless or unperturbed by the problem. The residents of the neighbourhood are mostly addicted to ganja (marijuana), smack (heroin), beer or tobacco.10

Another survey revealed there are an estimated three million addicts in India for the drug, available easily at street corners in some areas.11 Street children who use drugs are more likely to be exposed to parental abuse, arrests and sex work.
Millions of drug addicts face emotional devastation most directly. It not only causes distress to the addict but also to their spouse, children and other family members. The direct consumers of drugs pose a threat to the non-consumers and the environment. In the case of poor slum-dwellers, excessive expenditure on possession of drugs leads to depletion of income, further leading to a lack of family care and other responsibilities.

### 3.0 Comparison of data on select variables across the slums of various Indian states:

<table>
<thead>
<tr>
<th></th>
<th>Jalandhar District, Punjab 12</th>
<th>Guwahati, Assam 13</th>
<th>Indore, Madhya Pradesh 14</th>
<th>Bhilai Chhattisgarh 15</th>
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<tbody>
<tr>
<td>collection</td>
<td></td>
<td></td>
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<tr>
<td>Sample size</td>
<td>400</td>
<td>401</td>
<td>5516</td>
<td>172</td>
</tr>
<tr>
<td>Demography</td>
<td>adolescents and young adults (11-35 years)</td>
<td>Adolescents (10-19 years)</td>
<td>10+</td>
<td>Adolescents (10-19 years)</td>
</tr>
<tr>
<td>Drug use pattern</td>
<td>alcohol=41.8%, tobacco=21.3%, heroin=20.8%, non alcohol and non tobacco substance=34.8%</td>
<td>non-tobacco substance=83.4% Prevalence of drug abuse=8.33% Drug dependence=5.13 %</td>
<td>alcohol=46.5%, cannabis=8.9%, tobacco=53.9%, opiates=4.9%, cocaine=0.1%, non tobacco=41.4%</td>
<td>tobacco=25%, alcohol= Tobacco users had significantly higher rates of use of alcohol=90% than tobacco non-users=7.8%</td>
</tr>
</tbody>
</table>

### 4.0 Factors that Foster Drug Abuse in Indian Slums and the Crimes driven by them:

a. Poverty and Lack of opportunities for social and economic advancement: The slum dwellers’ lives are characterised by the absence of social and economic opportunities, in that event people are also known to be involved in the cultivation, manufacturing and production of and trafficking in drugs so as to earn money or to supplement their meagre wages. Organized crime groups and gangs prefer recruiting the vulnerable groups like the slum dwellers or migrant labourers, especially children and young adults for drug trafficking. The first reason is the recklessness associated with this age group, even when they are
faced with police or rival gangs, and the second is their obedience in carrying out orders. The desire to belong to a gang and to be highly regarded by its members imparts to the children a sense of obedience and a strong will to obey orders from and the rules of their gangs.\textsuperscript{16} Consequently, young individuals give free rein of their lives to crime and further turn deviant.

b. Lack of access to Education and Illiteracy: The social environment of the slum dwellers even today, shapes the mindsets of the youth that puts up at these slums. Education is still considered as a luxury rather than a need. Children who are not able to go to schools, lack awareness about the concept of substance abuse and the affliction it brings along. Thus, before people can construe the devastation of the peril, the damage has already taken place.

c. Inherent Substance Abuse in Slum Dwelling Families: Slum dwelling youth may have families or parents with substance abuse problems that contribute to the development of substance abuse problems amongst children.

d. Abusive conditions, toxic family environment and drugs used to deal with anxiety and depression: Owing to the pernicious conditions the slum inhabitants have been subject to such as, abusive conditions at home, lack of belongingness in family, sexual and physical abuse encounters at a very young age etc., the slum dwellers consume psychoactive substances as a part of their coping mechanism. Subsequently, many street-involved children use inhalants as a form of comfort and relief in a harsh and unpeaceful environment so as to numb their feelings. Children and ladies are subject to domestic violence by drunk fathers and husbands. Anger and frustration of work is used as an excuse to explain the excessive consumption of psychoactive substances primarily alcohol. When young children are exposed to such violent environmental interactions, it does shape their mindsets in a certain way and determines their further code of conduct in future. Burdened with the responsibility of raising children and having nowhere to go these women are also fatal to forced sex. Lack of awareness and social exclusion makes slum-dwelling women feel helpless and destitute.

e. Personality Traits of an Individual: In the wake of unpleasant conditions explained in the last point above, certain traits or characteristics develop in the individuals that abuse drugs. These may be, inability to delay gratification, low tolerance for frustration, poor impulse control, high emotional dependence on other people, poor coping ability and low self-esteem. Individuals with these personality characteristics find it difficult to abstain from drug/substance abuse.\textsuperscript{17}

f. Loneliness and Lack of Love and Belongingness: Studies suggest that if one has strong relationships with family and friends, one is significantly less likely to use or become addicted to drugs than if you are lonely, out of touch, or have little to no family support\textsuperscript{18}. Correspondingly, many of the slum
families are at times characterised by loose relations, lack of family or friendly support, and hence, precipitate the need within an individual to seek a different sort of pleasure by resorting to substance abuse.
g. Peer Pressure and Love of Adventure: The period of adolescence is the one most crucial which shapes an individual. Adolescents undergo physical and psychological development and are vulnerable to influences like antisocial peers and role models and hence, with the excitement of experiment and the adrenal rush to try new things, manage to get themselves into the fine kettle of fish of drug abuse. Lack of parental monitoring as well, contributes to the youth getting influenced by bad company.
h. Increased Availability leading to Juvenile Delinquency: With the world growing at a very fast pace everything has become easily accessible in some or the other way. The drug syndicates try selling these drugs usually to high-income groups but slum-dwelling youth are also subjected to come in contact with these syndicates and succumb to substance abuse because of lack of awareness. Lack of playgrounds and recreation drives the children to play in the streets, away from all controls, where they learn many acts of delinquency. The slum areas are the sources from where either the adult criminality or the juvenile delinquency originates to the greater extent. Migration of deserted and destitute boys to slums brings them in contact with antisocial elements carrying on prostitution, smuggling of liquor or narcotic drugs and bootlegging. Money required to purchase drugs is sheltered by various acts of delinquency be it robbery, burglary, shoplifting or even stealing money from one’s own house. At times the situation worsens to killing someone in order to obtain money to satisfy substance abuse. These may be through fair or unfair means. There are cases of drunken driving where the drunk drivers may have hit someone or have harmed someone’s assets. In addition to that, not only are people injured due to this but also the roadside animals like stray dogs are at times hit by the unconscious drug consumers.
i. Sexual Indulgence of Street Dwellers at a very young age:
   ● Not only do street children live, survive and grow in an unprotected environment, but they also might be abused or exploited by local gangs or criminal groups to engage in street crimes or sex work. To survive in such a hostile environment, street children may do odd jobs such as street vending, hustling, drug dealing or begging, or may engage in “survival sex work”, which is the exchange of sex for specific food items, shelter, money or drugs.
   ● The sexual encounters at a very young age drive the impulses of especially young minds and provoke them towards becoming sexually active. These sexually active individuals not only commit sex-related crimes within their own social strata but also outside their social strata. The
sexually active minds now turn into sexual predators which consider merely any human being as a sex object.

- Young girls which dwell in these slums are at times also a victim of carnal abuse but again are helpless due to lack of awareness and their mental health is seriously impacted because of the same.

6.0 PESTLE Analysis:

a. Political Impact:

- The country faces a large number of cases relating to drug abuse. Without any governmental interference, the use of drugs will further worsen the prevailing situation, which already statistically seems out of hand. The Government has taken up several initiatives to deal with the drug trafficking problem. It constituted the Narco-Coordination Centre (NCORD) in November 2016 and revived the scheme of “Financial Assistance to States for Narcotics Control”. The government also constituted a fund called “National Fund for Control of Drug Abuse” to meet the expenditure incurred in connection with combating illicit traffic in Narcotic Drugs; rehabiliting addicts, and educating the public against drug abuse, etc. National Drug Abuse Survey is also being carried out by the government to measure the trends of drug abuse in India through the Ministry of Social Justice & Empowerment with the help of National Drug Dependence Treatment Centre of AIIMS. The Ministry of Social Justice and Empowerment has drafted a National Action Plan for Drug Demand Reduction (2018-2023) for addressing the problem of drug and substance abuse in the country, dumping a long-pending draft policy on the matter. The government also launched a national toll-free helpline number for alcohol and drug abusers to seek help.

- While the government initiatives look good in theory, they are yet to be assessed in practice. For a long time, little or no efforts have been made for the process of data collection relating to drug abuse. Drug traffickers in countries all over the world corrupt officials at all levels of law enforcement and government in order to continue with their criminal activities unimpeded. As a result, citizens in affected areas often live with compromised law enforcement institutions.

b. Economic Impact:

- Cost of Drug Consumption: Drugs are more of a luxury commodity and do have some considerable cost associated with them. With the meagre income earned by the slum dwellers, it
is although difficult for them but still, the addiction drives them to spend more on drugs hence, further increasing their cost of living and pushing them deeper into the vicious cycle of poverty. The other aspect associated with the cost of drug consumption is again the Increased Cost of Living due to Drug Consumption triggering unfair means to obtain money discussed above. (refer to section Drug Abuse Driving Increase in Crime Rates)

- In a very general scenario, drug abuse requires societies to contribute resources to prevention, education and prevention measures including treatment and rehabilitation. But what lacks in case of slums is, firstly, the awareness of such treatment and rehabilitation programmes as well as the stigma surrounding the treatment at rehabilitation centres. Because of the mindset that visiting rehabilitation centres will invite certain negative judgements from the social elements leaves the drug-addicts untreated. Secondly, at times the cost of these drug rehabilitation programmes are a little far-fetched when it comes to the cost associated with it.

- Impact on workplace productivity: The slum dwellers are people working as labourers or in other words mostly engaged in the unorganised sector or the small scale sectors to earn their bread and butter. Drug-abusers in the workforce are significantly less efficient and hamper the work productivity. Tasks that require constant attention, immediate memory, and fine motor skills are easily disrupted as a consequence of work done after Drug Consumption. Consequently, the low productive workforce is fired and the mere source of livelihood of the slum dwellers is also scrapped.

c. **Social Impact:**

- Drug abuse has been prevalent in India since recorded history. Drug abuse affects not only the physical and mental health of people but also has social and economic consequences. Drug abuse is a growing concern. In India, most of the studies have been carried out in the last four decades.

- Poverty and Lack of opportunities for social and economic advancement; Lack of access to Education and Illiteracy; Inherent Substance Abuse in Slum Dwelling Families; Abusive conditions, toxic family environment and drugs used to deal with anxiety and depression; Loneliness and Lack of Love and Belongingness; are some factors which expound the social impact of drug abuse. (refer to section Factors that Foster Drug Abuse in Indian Slums)

- Side effects of drug addiction may include:
  
  ➔ A weakened immune system, increasing the risk of illness and infection
Heart conditions ranging from abnormal heart rates to heart attacks and collapsed veins and blood vessel infections from injected drugs

➔ Nausea and abdominal pain, which can also lead to changes in appetite and weight loss

➔ Increased strain on the liver, which puts the person at risk of significant liver damage or liver failure

➔ Seizures, stroke, mental confusion and brain damage

➔ Lung disease

➔ Problems with memory, attention and decision-making, which make daily living more difficult

➔ Global effects of drugs on the body, such as breast development in men and increases in body temperature, which can lead to other health problems.25

• The side effects of drugs mentioned above not only leads to decrease in the personal growth of the drug consumer (and returning to a vicious cycle of poverty) but also decreases the concern for the family in the minds of him/her. The person becomes least bothered of his/her responsibilities towards their families which further triggers some of the problems stated above like an unpleasant family environment.

\[d. \textbf{Technological Impact:}\]

• Technology has contributed to significant improvement in areas like communication and transportation. As a result of advanced technology, the problem of drug selling and possession has enlarged. The increased exposure to the internet, the accessibility to drug sellers and their potential to reach out to non-drug users has also widely increased. Among the herbal supplements sold on the net, 48% has been found to be likened to illicit drugs such as marijuana and ecstasy. This is greatly favoured by the individuals involved as both the sellers and the buyers get to maintain their anonymity over the internet and are able to ensure regular supply of drugs.

• Narcotics Control Bureau has been provided funds for developing a new software i.e. Seizure Information Management System (SIMS) which will create a complete online database of drug offences and offenders.26

\[e. \textbf{Environmental Impact:}\]
• Almost all the slums have the problems of accumulated garbage thrown on the streets. In this process, they scatter garbage around the bins and unknowingly subject themselves to health hazards\textsuperscript{27}. Corresponding to these challenges faced by the slum dwellers the problem of substance abuse becomes more important to be paid heed to. There is no proper disposal or recycling method followed for alcohol glass bottles, drug injections, drug inhaler mediums etc. Further, it leads to the spread of diseases as well as the environmental condition goes on deteriorating. The slum dwelling areas remain dirty and become filthy when no one clears the garbage and is home to various other health problems and social pollution.

\textit{f. Legal Impact:} \textsuperscript{29}

• Article 47 of the Constitution provides that “The State shall regard the raising of the level of nutrition and the standard of living of its people and the improvement of public health as among its primary duties and, in particular, the State shall endeavour to bring about prohibition of the consumption except for medicinal purposes of intoxicating drinks and of drugs which are injurious to health.”

• India is a signatory to the three UN Conventions namely:
  - Single Convention on Narcotic Drugs, 1961,
  - Convention on Psychotropic Substances, 1971 and
  - Convention against Illicit Traffic in Narcotic Drugs and Psychotropic Substances, 1988.
  - Article 38 of the Single Convention on Narcotic Drugs, 1961 and Article 20 of the Convention on Psychotropic Substances, 1971 obligates countries for taking all practicable measures for the prevention of abuse of drugs/psychotropic substances and for the early identification, treatment, education, after-care, rehabilitation and social reintegration of the persons involved and also for promoting the training of personnel in these areas.

• The Government of India enacted the Narcotic Drugs and Psychotropic Substances (NDPS) Act in the year 1985 to make stringent provisions for the control and regulation of operations relating to narcotic drugs and psychotropic substances. The act was amended thrice, first in 1989, second in 2001, and third in 2014.

• The Government of India has also brought out a National Policy on Narcotic Drugs and Psychotropic Substances (NDPS) in 2012 to serve as a guide to various
Ministries/Departments, State Governments, International Organisations, NGOs, etc. and re-assert India’s commitment to combat the drug menace in a holistic manner.

- Drug Abusers as victims of the Criminal Justice System The NCRB statistics of 2014 show that over 50,000 cases are charge-sheeted per year by the police and still have pendency of 31.7 per cent by the end of the year. The prison statistics of 2015 shows 7227 convicted under NDPS cases all over India and 15959 undertrials under NDPS cases in the prisons all over India. These numbers itself highlight the overcrowding in prisons of NDPS and the number of cases dealt with by the police.

- Drug Law Enforcement Agencies in India: The Narcotics Control Division in the Department of Revenue facilitates and co-ordinates the functioning of the Narcotics Control Bureau (NCB), Central Bureau of Narcotics (CBN) and the Chief Controller of Factories (CCF). Department of Revenue is the nodal department responsible for the administration of the Narcotic Drugs and Psychotropic Substances Act, 1986 and implementation of international conventions, treaties, bilateral agreements and MOUs.

  ➔ The Narcotic Control Bureau (NCB) The NCB which is responsible for anti-narcotic operations all over the country, checks the spread of the contraband as well as the cultivation of drugs.

  ➔ Central Bureau of Narcotics (CBN): The responsibilities of CBN include:

  - (a) Supervision over licit cultivation of opium poppy in India;
  - (b) Investigation of cases under the NDPS Act, 1985 and filing of the complaint in the Court;
  - (c) Action for tracing and freezing of illegally acquired property;
  - (d) Issue of licenses for manufacture of synthetic narcotic drugs;
  - (e) Issuance of Export Authorisations/Import Certificate for export/import of Narcotic Drugs and Psychotropic Substances;
  - (f) Interaction with International Narcotics Control Board;
  - (g) Vienna and the Competent Authorities of other countries to verify the genuineness of the transaction prior to authorizing the shipments.

  ➔ Other Agencies: The Directorate of Revenue Intelligence is a part of the Ministry of Finance and is responsible for information on the smuggling of goods, including drugs into, or out of, India. Other law enforcement agencies with counter drug responsibilities are the Central Bureau of Investigation, the Customs
Commission, and the Border Security Force. The Customs Commission has a wide variety of drug law enforcement tasks and falls under the Ministry of Finance’s Central Board of Excise and Customs. The Border Security Force, under the Home Ministry, is a paramilitary force that controls India’s land borders and frequently interdicts drug shipments.

- **SCHEME OF NATIONAL ACTION PLAN FOR DRUG DEMAND REDUCTION:**
  This particular policy framework has been initiated for the period of 2018-2025 and the table below shows the key aspects of it. Because the plan still has a long way to go, the analysis of it may be vague. So this research paper will only discuss what all are the key aspects of this plan and their expected outcomes. The plan does emphasize creating an impact on vulnerable groups which makes this plan mandatory to be included in this research paper. The objectives of the programme are:

  ➔ The prime objective is to focus on preventive education, awareness generation, identification, counselling, treatment and rehabilitation of drug-dependent persons, training and capacity building of the service providers through collaborative efforts of the Central and State Governments and NonGovernmental Organizations.

  ➔ Create awareness and educate people about the ill-effects of drugs abuse on the individual, family, workplace and the society at large and reduce stigmatization of and discrimination against, groups and individuals dependent on drugs in order to integrate them back into the society.

  ➔ Develop human resource and build capacity to (a) Provide a whole range of community-based services for the identification, motivation, counselling, de-addiction, aftercare and rehabilitation for Whole Person Recovery (WPR) of addicts; (b) Formulate and implement comprehensive guidelines, schemes, and programmes using a multi-agency approach for drug demand reduction; (c) Undertake drug demand reduction efforts to address all forms of drug abuse; (d) Alleviate the consequences of drug dependence amongst individuals, family and society at large. (e) Facilitate research, training, documentation, innovation and collection of relevant information to strengthen the above-mentioned objectives;
The above framework aims not only creating impact in a general scenario in India but seeks to empower the vulnerable groups like the slum dwellers or street dwelling children.

7.0 Prevalence of Drug Abuse at Indian Slums amidst the COVID-19 Pandemic

With not much data available in relevance to drug abuse at slums during the pandemic, the interpretation over here is based on data of some particular states who’ve been fighting the war on drugs since a long time and how the pandemic has somewhat brought a change in the prevalence of drug abuse in general, not just specific to slums.

POSITIVE IMPACT: In a positive fallout of the COVID-led lockdown, States such as Punjab has achieved a “major success” against the malady of drug abuse with over 86,000 addicts registering themselves for treatment amid the nearly total curb on narcotics peddling. The Indian Express explains what these new addict registrations with Outpatient Opioid Assisted Treatment (OOAT) centres mean for Punjab’s war on drugs. From March 23, when the Punjab government imposed a strict curfew and lockdown, to June 17, when the unlock relaxations were in place, 1,29,504 new addicts were enrolled in the OOAT centres. Around 1.2 lakh of them registered during the period when curfew and lockdown were strictly in place. As of June 17, the total number of addicts registered with OOAT centres is 5,44,125, meaning that 23 per cent of the total enrolled in less than three months alone during the pandemic. What does the increase in new registrations mean? As per functionaries of Punjab government and anti-drug STF, this is a welcome development where such a large number of addicts registered for treatment in a short span, widening the treatment canvass. With lockdown relaxations, however, there are apprehensions among the fresh addicts registering for treatment. There may be relapses if the supply chain of illegal drugs resumes.  

NEGATIVE IMPACT: However, with the above positive impact of the pandemic on the menace of drug abuse, comes along a negative impact too. The economic downturn caused by the global pandemic may drive more people to substance abuse or leave them vulnerable to involvement in drug trafficking and related crime. In past, during the global recession that followed the 2008 financial crisis, drug users sought out cheaper synthetic substances and patterns of use shifted towards injecting drugs, while governments reduced budgets to deal with drug-related problems.
The entire focus of the government’s healthcare programme is now tackling coronavirus, it has taken its eyes off the ball in several other healthcare issues such as immunisation drives, treatment for other communicable diseases as well as drug de-addiction programmes. India, which has seen one of the most severe and completely unplanned lockdowns in the world, is already facing a potential boom in drugs usage since millions have lost their jobs in the past four months, with little prospect of finding any alternatives or any savings to fall back on. Officials and experts have warned that these people are amongst the most vulnerable to drug usage as a way to deal with their hardships.\textsuperscript{35}

8.0 Policy Reviewal and Analysis:

There have been numerous policies and acts which have been proposed and implemented for the regulation of drug consumption and trafficking, prevention and rehabilitation of drug addicts, creating awareness etc. The following policies which have had a large impact in India.

9.0 SWOT (Strengths, Weaknesses, Opportunities, Threats) Analysis

A. NATIONAL DRUG AND PSYCHOTROPIC SUBSTANCES ACT,2014

- The principal Central Acts namely, the Opium Act, 1857, the Opium Act, 1878, and the Dangerous Drugs Act, 1930 were repealed by The kingpin legislation on narcotic drugs and psychotropic substances in India is the NDPS Act, 1985.\textsuperscript{36} After the amendments thrice from 1985 to 2014, In early 2014, the NDPS Act was amended for the third time and the new provisions came into force on 1 May 2014. The main features include: Creation of a new category of “essential narcotic drugs”, which the central government can specify and regulate uniformly throughout the country
  
  ➔ Widening the objective of the law from containing illicit use to also promoting the medical and scientific use of narcotic drugs and psychotropic substances in keeping with the principle of ‘balance’ between control and availability of narcotic drugs that underpins the international drug control treaties.

  ➔ Including the terms “management” of drug dependence and “recognition and approval” of treatment centres, thus allowing for the establishment of legally binding treatment standards and evidence-based medical interventions
Making the death penalty discretionary for a subsequent offence involving a certain quantity of drugs under section 31 A. The court will have the alternative to impose imprisonment for 30 years under section 31.

Enhanced punishment for small quantity offences from a maximum of six months to one-year imprisonment.

Allowing private sector involvement in the processing of opium and concentrated poppy straw.

Raising the rank of officers authorized to conduct search and arrest license holders for alleged NDPS violations.

More elaborate provisions for forfeiture of property of persons arraigned on charges of drug trafficking.

ANALYSIS OF THE ACT: 38 and 39

<table>
<thead>
<tr>
<th>Strengths (+)</th>
<th>Weaknesses(-)</th>
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<tbody>
<tr>
<td>1. The act decides punishments based on the quantity of drug involved i.e., “small”, “commercial” or “intermediate”.</td>
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<td>2. Death Penalty: The sentencing court will hear the offender on punishment and have the power to impose a prison sentence instead of death.</td>
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<td>3. Consumption of drugs is illegal and results in a jail term of up to six months or one year and/or a fine, depending on the substance consumed.</td>
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<td>4. Presently, possession of small amounts attracts uniform punishment, irrespective of intent.</td>
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<tr>
<td>5. Instead of sentencing a drug-dependent person convicted for a low-level drug offence to imprisonment, the court can, after assessing her/ his background and health status and obtaining consent, remand her/him to a treatment facility maintained or recognized by the government.</td>
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<tr>
<td>6. Prohibition of certain activities relating to property derived from offences. The Act envisages the creation of a Central Authority to coordinate the activities of these Central and State agencies which are involved in drug law enforcement.</td>
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<td>7. A new Chapter 108 was introduced into the Act in May 1989 to provide for the investigation, freezing, seizure and forfeiture of</td>
<td>1. The NDPS Act does not provide guidance for ascertaining quantity, some courts have to rely on the statutory definition of drugs, especially those that refer to a numerical percentage to calculate the quantity involved. This resulted in inconsistent interpretations and conflicting decisions not just between different classes of drugs but even for the same drug.</td>
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<tr>
<td>2. The government declared that in calculating the quantity, the total weight of the seized product must be considered and not the pure drug content. This has significantly been damaging for people who use drugs and other low-level offenders who risk being sentenced for intermediate or commercial quantity offences since street drugs are heavily ‘cut’ and rarely ever seized in pure forms.</td>
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<td>3. Quantity-based sentencing makes other vital considerations like the motive and role of the offender irrelevant. Simple possession attracts the same amount of punishment as a distribution for profit.</td>
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<tr>
<td>4. Courts have clarified that people charged with offences involving small quantities of drugs have a right to get bail. Yet, neither police nor people who use drugs seem to be</td>
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</table>
property 344 derived from or acquired through illicit trafficking in narcotic drugs and psychotropic substances. This Chapter prohibits any person from holding any property derived from drug trafficking; and authorizes officers empowered under the Act to investigate, identify and seize such property.

Aware of the law, indiscriminate raids and arrests, especially of street users are not uncommon.

5. Since the law itself does not distinguish between possession for personal use and possession with intent to sell for profit, it is difficult to comment authoritatively on whether enforcement is targeted at ‘users’ or ‘traffickers’.

6. In the implementation of the NDPS Act, treatment provisions have neither been prioritized nor applied in earnest by courts.

7. Many facets of the NDPS Act such as the criminalization of drug use, punishment for possession of drugs for personal use and the death penalty are more strict or severe than those provided by the UN drug control conventions.

8. Though the Act provides punishments to the culprits, there is a hitch-slow trial, leading to crowding of jails and acquittals, and hence the Act proved to be a hissing snake without venom in its fangs.

### Opportunities (+)

1. Assets derived from drugs trafficking are liable to forfeiture, and the sale proceeds to be credited to the National Fund for Control of Drug Abuse.

2. The NDPS Act supports treatment for people who use drugs both as an ‘alternative’ to, and independent of criminal measures. Several provisions stipulated under the Act penalised consumption and offences involving small quantities of drugs, and encourage treatment-seeking.

3. NGOs and government departments are eligible to make requests for grants for drug control activities including treatment. Preventive education and awareness on the ‘ills’ of drug dependence have been prioritized for funding.

4. Drug dependent people who express willingness to get treated can claim immunity from prosecution, provided the offence they are charged with is that of consumption or involves a minor quantity of drugs. Criminal proceedings may be reinstated if the treatment program is not completed.

### Threats (-)

1. Despite the statutory responsibility on the government to make rules for the establishment and regulation of treatment centres, neither the central nor state governments have framed such rules. As a result, a large number of unauthorized ‘de-addiction’ centres have proliferated to cash in on the desperation of people who use drugs and their families. Instead of medical care, ‘punishments’ are meted out to patients, inflicting severe torture and, in some cases, causing death.

2. Despite the institution of statutory rules, people who use drugs continue to be detained involuntarily and experience violence, brutality and a host of other human rights violations in such centres.

3. Under Section 50, if a person who has been arrested for possessing drugs is not taken to the nearest Magistrate or gazetted officer immediately, the contraband seized cannot be used to fix the liability of unlawful possession.
against him; and the non-compliance of Section 50 vitiate the trial.

4. Under section 42, if a police officer makes seizures but does not inform his superiors about its grounds, the accused is liable to be acquitted.

5. Whenever there is a delay in sending samples, the prosecution version becomes vulnerable and may pave the way for the acquittal of the accused

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B. NASHA MUKT BHARAT CAMPAIGN

- In accordance with the spirit of the United Nations Conventions and the existing NDPS Act, 1985 and NDPS Policy, 2012, a National Action Plan for Drug Demand Reduction (NAPDDR) has been prepared for 2018-2023 which aims at reduction of adverse consequences of drug abuse through a multi-pronged strategy involving education, de-addiction and rehabilitation of affected individuals and their families.  

- As a part of the annual action plan 2020-21, Nasha Mukt Bharat Campaign was launched on the occasion of International Day against Drug Abuse and Illicit trafficking (26.06.2020). The campaign aims to focus on 272 most affected districts of the country which mostly belong to Punjab, Haryana, Uttar Pradesh and the North-Eastern States. The key components of the campaign is to generate awareness programmes, reach out to communities and households, involve various universities, schools and youth clubs.

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SWOT ANALYSIS

<table>
<thead>
<tr>
<th>Strengths(+)</th>
<th>Weaknesses(-)</th>
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<tbody>
<tr>
<td>1. The campaign aims to cover 272 most affected districts of the country</td>
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<td>2. More strategic approach is followed rather than institutional</td>
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<td>3. Focus on treatment facilities and awareness programs.</td>
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<td>4. Increased financial support.</td>
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<tr>
<td>1. There is no data available for the basis of selection of the 272 most-affected districts by drug abuse.</td>
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<tr>
<td>2. There is a need to scale up de-addiction centres and hospitals as the statistics for treatment available for such addictions also clearly show a big gap -</td>
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</table>
5. Preventive education and awareness generation among the target group.
6. Capacity Building for service providers.

75% of the drug addicts who try quitting do not receive any treatment and the few who do get it at government de-addiction centres.
3. Reach of the national programmes for the treatment of substance use disorders is grossly inadequate. 41

<table>
<thead>
<tr>
<th>Opportunities(+)</th>
<th>Threats(-)</th>
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<tbody>
<tr>
<td>1. Involvement of university, school students and youth groups will help in reaching out to the worst affected group who are potential first-time users.</td>
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<td>2. Community outreach through household surveys will help in the identification of dependent populations.</td>
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<td>3. Funds for the programme has been increased to Rs 260 crores, more than 5 times than it was 3 years ago.</td>
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<tr>
<td>1. It is difficult to reach out to the community for household surveys amidst the Covid-19 pandemic.</td>
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<td>2. With the schools and universities being shut and classes being conducted virtually, the scope of awareness generation programmes narrows down.</td>
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<tr>
<td>3. Too much focus on strategic planning can lead to a laid back attitude of the institutions.</td>
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9.0 Why are there gaps in the Enactment of Policies at Indian Slums?

- Even though a lot of policies are being created and proposed, the question that arises is why still the slum dwellers aren’t able to cope very well with drug abuse?
- Firstly, because of the gaps between the creation and implementation of these policies. Secondly, the lack of awareness about various policies available.
- Due to lack of awareness about policies the slum dwellers are not very much aware of whom to seek help from.
Also, as discussed above, the prejudice in our society becomes a major barrier for drug abuse victims to seek help. For example, Drug Abuse victims are shy because they believe that society will look at them with a feeling of disgust and this makes them afraid of seeking support.

Even though some efforts are made by the governmental policies through various programmes the personal bias also plays a crucial role when it comes to people being able to reap the benefit of the policies created.

Other than that, the most important requirement to create policies is the adequate amount of data should be available but since in case of slums, it becomes more difficult to obtain data, especially because of remote locations the policies catering to their needs specifically, prove to be less impactful.

However, even though a lot of measures have been undertaken like the creation of hospitals, treatment centres, rehabilitation centres and they have been adequately funded as well, what becomes a barrier at times is the personal bias of people operating at these centres. The people at these centres at times find sentencing the only measure as dealing with drug abuse victims and are reluctant to provide restorative support. With this seeking treatment becomes more far-fetched for the drug abuse victims.

10.0 Conclusion:

Drug abuse has assumed alarming dimensions in India. Considering how grave the problem is in Indian slums particularly, the emphasis is much needed on generating awareness not only in elite schools but in urban slums as well. Peer-group counselling and community outreach are the effective measures that must be taken to reach the drug users that can be found on nooks and corners of Indian streets of metro cities. Strict implementation of the legislation is required on the ground level.

The study brings out that substance abuse often occurs due to extreme emotions, feelings of loneliness and social strains resulting out of poverty and unhealthy living conditions. Hence, significant attention should be laid on support groups and institutions to ensure the accessibility of mental healthcare for all.

The involvement of civil society, non-governmental organisations, media and judiciary is necessary. The government should focus on collaboration with such institutions and international organisations. Apart from that, the contribution of the society as a whole is necessary to combat the problem. The victims of drug abuse do deserve punitive justice however they also need to be cured with restorative justice so that they feel belonged and do not find drug abuse as a means of escape. Drug Abuse victims shall not be looked at with disgust but rather should be uplifted with immense love and support so that they can grow and reach greater heights.
References


27. P.P., (2000). “Bangalore City A Study In Environmental Pollution.” Bangalore University, & B.D.C. http://hdl.handle.net/10603/18155


