Drug addiction causes immense human distress and the illegal production and distribution of drugs have spawned crime and violence worldwide. Today, there is no part of the world that is free from the curse of drug trafficking and drug addiction. Millions of drug addicts, all over the world, are leading miserable lives, between life and death. India too is caught in this vicious circle of drug abuse, and the numbers of drug addicts are increasing day by day. The development of contemporary treatment responses to drug abuse at the local, regional or national level is required to develop the strategic framework for providing rehabilitation of the drug addicts. The most important principle of an effective drug treatment programme is to attend the multiple needs of the individual and not just his/her drug abuse. Treatment can be defined in general terms as the provision of one or more structured interventions designed to manage health and other problems as a consequence of drug abuse and to improve or maximize personal and social functioning. According to the World Health Organization (WHO) Expert Committee on Drug Dependence, the term "treatment" refers to "the process that begins when psychoactive substance abusers come into contact with a health provider or any other community service, and may continue through a succession of specific interventions until the highest attainable level of health and well-being is reached. Although drug policy in India provides for treatment, it is not prioritized in enforcement. This paper critically examines the legal framework for drug treatment and offers suggestions for developing a strategic framework for meeting the health and rehabilitation needs of the drug abusers.
consumption, notably drug injecting. Such a change in user behaviour is particularly significant given the role played by injecting drug use in the transmission of HIV/AIDS and other blood borne infections. The management of this issue has become a cause for concern within the field of drug demand reduction and has serious implications for the development realities of many Asian countries [1].

**DRUG TREATMENT: MEANING AND OBJECTIVE**

Treatment and rehabilitation are defined as a comprehensive approach to identification, assistance, health care, and social integration with regard to persons presenting problems caused by the use of any psychoactive substance. According to the World Health Organization (WHO) Expert Committee on Drug Dependence, the term “treatment” refers to “the process that begins when psychoactive substance abusers come into contact with a health provider or any other community service, and may continue through a succession of specific interventions until the highest attainable level of health and well-being is reached”[2].

The above definition includes the equalization of opportunities and community involvement. The definition is also compatible with WHO’s constitutional objective, which is "the attainment by all peoples of the highest possible level of health". The aim of treatment, within this broader context, is to improve the health and quality of life of persons with problems caused by their use of psychoactive substances.

The Expert Committee (WHO, 1998) suggests that treatment should have three broad objectives [3]:

- To reduce dependence on psychoactive substances
- To reduce the morbidity and mortality caused by, or associated with, the use of psychoactive substances; and
- To ensure that users are able to maximise their physical, mental and social abilities and their access to services and opportunities, and to achieve full social integration.

Therefore, this needs to be prioritized and a strategic framework needs for treatment of drug abusers/addicts in India.

**DRUG POLICY IN INDIA W.R.T. TREATMENT**

India is highly vulnerable to the problem of trafficking of drugs into and out of the country. Drug addiction has emerged as a serious socio-economic problem as well as an area of concern in India. Despite of the fact that there are constitutional as well as legal provisions made in India for abatement of drug addiction, but the problem has become very grave.

*Treatment* can be defined in general terms as the provision of one or more structured interventions designed to manage health and other problems as a consequence of drug abuse and to improve or maximize personal and social functioning. Although drug policy in India provides for treatment, it is not prioritized in enforcement.

**Constitutional Provisions**

Article 47, Directive Principles of Our State Policy : (Part IV - DPSP) of our Constitution provides that "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" [4].

India is a signatory to three International Conventions, namely:

- (i) Convention on Narcotic Drugs, 1961;
- (ii) Convention on Psychotropic Substances, 1971; and

Thus, India also has an international obligation to, inter alia, curb drug abuse. The United Nations General Assembly, in its 20th Special Session in 1998, has accepted demand reduction as an indispensable pillar of drug control strategies. The demand reduction strategy consists of education, treatment, rehabilitation and social integration of drug dependent persons for prevention of drug abuse.

The Narcotic Drugs and Psychotropic Substances Act, 1985 ("NDPS Act") – India’s primary law to combat drug trafficking. The law was enacted to fulfill India’s obligations under a series of international conventions and reiterate its commitment towards eradication of the drug problem across the country. In its present form, it envisages stringent punishments for drug traffickers and rehabilitation for addicts. While the consumption of drugs is prima facie criminalised, the Act makes a clear distinction between traffickers – who are subject to strict penal action – and individual consumers, who can be pushed towards rehabilitation.

With respect to health, the Narcotic Drugs and Psychotropic Substances Act (NDPS) and Rules there under provide for: (1) use of narcotic and psychotropic substances for medical reasons, (2) treatment of persons dependent on such substances and, (3) administration (Table 1).

Table 1: Key features of the NDPS Act on treatment

<table>
<thead>
<tr>
<th>Section</th>
<th>Provision</th>
</tr>
</thead>
<tbody>
<tr>
<td>Section 2 (a)</td>
<td>An “addict” is a person who is dependent on any narcotic drug or psychotropic substance</td>
</tr>
<tr>
<td>Section 4 (2) (d) and 7 A</td>
<td>Treatment is one of the measures that the central government must take and allocate funds for, from the National Fund</td>
</tr>
<tr>
<td>Section 64 A</td>
<td>Drug dependent people, who are charged with consumption or an offence involving a small quantity of drugs can choose to undergo treatment and be exempt from prosecution</td>
</tr>
<tr>
<td>Section 39</td>
<td>Instead of sentencing, courts can divert drug dependent people convicted for consumption or an offence involving a small quantity of drugs, to a recognized medical facility for detoxification, instead of sentencing</td>
</tr>
<tr>
<td>Section 71, 76 (2) (d) and 78 (2)(b)</td>
<td>The government (central and or state) can set up and regulate centers for the identification, treatment and care of drug dependent people</td>
</tr>
</tbody>
</table>

Though guided by prohibition, the NDPS Act does provide room to accommodate use of drugs, in medical as well as non-
rules for the establishment and regulation of treatment centers, despite the statutory responsibility on the government to create a caring environment within the institutions. That is intended to ensure a positive, empathetic and respectful relationship between providers, based on recognition of the rights and duties of the patients, which include patients, foreign nationals, registered “addicts” and persons undergoing treatment for drug dependence. In the latter category, the NDPS Act supports treatment both as an alternative to, and independent of penal measures [5]. Arguably, for drug users, addiction treatment is part of the right to health, which the Supreme Court has recognized within the constitutional guarantee of life and liberty [6] and international human rights law [7]. Treatment provision must then be guided by principles of non-discrimination, participation, quality and evidence informed standards that characterize the right to health [8].

In India, ‘de-addiction’ centers are the mainstay of drug treatment delivery. According to the NDPS Act, these centers may be set up by the central or state governments or voluntary organizations. Presently, services for drug dependence are available through:

- **Government hospitals** that provide inpatient and outpatient care, mostly detoxification.
- **NGOs**, which receive grants from the Ministry of Social Justice and Empowerment (MOSJE) and their state counterparts (Departments of Social Welfare) to run integrated rehabilitation centers in order to make “addicts drug free, crime free and gainfully employed”.
- **Psychiatric hospitals or nursing homes**.
- **Private 'de-addiction' centers** that operate without registration or license.

**Initiative of the Ministry of Social Justice and Empowerment**

In accordance with its mandate for coordinating the alcohol and drug demand reduction strategy of the Government of India, the Ministry of Social Justice and Empowerment, for the last many years, has been implementing a wide range of community-based programmes, through the voluntary sector, for the prevention of alcoholism and drug abuse and the treatment and rehabilitation of addicts. The community-based organizations associated with the programmes have been engaged in a wide variety of innovative, needs-based, localized interventions, adapted to the needs of the community in general and the target groups in particular. Training programmes, meant for the service providers, on the principles and practices of care and protection in substance abuse rehabilitation have, over the years, set certain minimum standards of services among the rehabilitation professionals.

**Central Sector Scheme of Assistance for Prevention of Alcoholism and Substance (Drugs) Abuse and for Social Defence Services** [9]

The Manual has defined a code of ethics for the service providers, based on recognition of the rights and duties of the clients. That is intended to ensure a positive, empathetic and caring environment within the institutions. Despite the statutory responsibility on the government to make rules for the establishment and regulation of treatment centers, neither the central nor state governments have framed such rules. As a result, a large number of unauthorized 'de-addiction' centers 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. These incidents have come to light from all across India, indicating that existing norms around minimum quality standards of care are not being followed. A legal intervention in 2009 led to the promulgation of NDPS Rules for treatment facilities in Haryana and Punjab, which inter alia require all drug treatment and rehabilitation facilities to obtain license and be subject to inspection. The Rules unequivocally support voluntary admission into treatment and provide for closure and, in some cases, criminal action against centers that operate without a license or where human rights are violated. 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 centers. Further, the Central Sector Scheme of Assistance for Prevention of Alcoholism and Substance (Drugs) Abuse and for Social Defence Services, if implemented sincerely by the partners, the Government and non-governmental organizations, is expected to usher in a new era of quality-based services through voluntary organizations in the social sector. It would also pave the way for continuous review and refinement in standards through new experiences and increasing maturity in the implementation of programmes.

**CONCLUSION**

Drug treatment in India largely remains unregulated, placing the health and safety of patients at risk. Attention should be directed to the under said areas that should be considered as part of the development and implementation of a treatment strategy. Those areas are as follows:

- Involving partner agencies;
- Involving service users and the community;
- Ensuring policy commitment;
- Conducting sound assessment and planning;
- Consult with civil society groups, including representatives of people who use drugs, medical professionals, academics and patient groups specializing in drugs issues in drug policy formulation
- Allocating resources in accordance to needs;
- Developing an incremental and step-by-step approach;
- Fostering collaboration, coordination and integration;
- Building on community-based responses;
- Ensuring service availability and accessibility;
- Access to essential medicines;
- Monitoring performance;
- Aftercare/support;
- Community drug-free counseling;
Establish regular data collection on drug use, dependence and related health implications such as HIV and viral hepatitis prevalence amongst people who inject drugs.

And lastly and most importantly, on the aspect of rehabilitation, the apathy and redundancy of the NDPS Act has been very evident. The inadequacy of accompanying institutional mechanisms – in terms of training of the judiciary, essential rehabilitation systems, etc – has rendered the reformatory objective of the statute nugatory. This, coupled with the problematic implementation of the legislation by multiple authorities and the lack of government established rehabilitation programmes, has hindered effective implementation of the statute. Therefore, there is requirement of developing a strategic framework at the local, regional or national level for providing rehabilitation of the drug addicts. The most important principle of an effective drug treatment programme is to attend the multiple needs of the individual and not just his/her drug abuse.

REFERENCE


4. Article 47: Duty of the State to raise the level of nutrition and the standard of living and to improve public health

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 purpose of intoxicating drinks and of drugs which are injurious to health.

5. Tripti Tandon, Lawyers Collective HIV/AIDS Unit, Delhi, “Reclaiming drug treatment as a right”, Newsletter Theme: Drug Abuse: Policy and Legal Aspects(A Newsletter brought to you by the National Drug Dependence Treatment Centre, All India Institute of Medical Sciences, New Delhi), Issue: December 2009


8. See General Comment No. 14 to Article 12 of International Covenant on Economic, Social and Cultural Rights.
