

# CONCEPT-NOTE



## **“SANKALPA: NASHAMUKT DEV BHOOMI ”**

**A Campaign for Legal Services to the Victims of Drug Abuse,  
Eradication of the Drug Menace  
and  
Rehabilitation of Drug Addicts**



**Uttarakhand State Legal Services Authority  
Nainital**



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*“If you can quit for a day, you can quit for a lifetime.”*

~ Benzamin Alire Saenz

### **1. INTRODUCTION**

A nation is a stable community of people entwined on the basis of a common territory, history, ethnicity manifested together in a common culture. A nation is built by its citizens and progresses ahead with their collective efforts. The constant growth, in the standards of living, health and happiness of its citizens marques a nation prosperous. Children and youths hold the key towards the pious work of nation building, since they constitute nearly half of our population. Therefore, it becomes excruciating when we see that today the lives of our youth and children in the clutches of opiates, narcotics and psychotropic substances.

The menace of drug abuse is not only a psycho-medical issue, but a social threat as well. This hazard can be best addressed by awareness and community based interventions. It is certainly a difficult task for a drug addict to start afresh, towards a new beginning and fight to recover from this dreadful addiction, but if we stand together alongside our children and take up the root cause with sincere efforts, we may certainly save our future generations from this menace existing in our society.

### **2. BACKGROUND**

India's approach towards Narcotic Drugs and Psychotropic Substances (NDPS) is enshrined in Article 47 of the Constitution of India which mandates 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'. Drug addiction is very harmful to physical and mental health of all. Mainly following types of ill effects are seen in the drug abusers :-



- (a) Depression;
- (b) Violent behaviour;
- (c) Respiratory failure;
- (d) Memory loss;
- (e) Social withdrawal;
- (f) Loss of interest in school, work, family and friends;
- (g) Mood swings;
- (h) Abdominal pain and nausea;
- (i) Sleep disorders;
- (j) Risk of heart attacks; and
- (k) Death risk.

Furthermore, the National Policy on NDPS aims to “Re-assert India's commitment to combat the drug menace in a holistic manner.” In the year 2015, National Legal Service Authority (NALSA), formulated Legal Services to the Victims of Drug Abuse and the Eradication of the Drug Menace Scheme, 2015. The objectives of the said scheme are:-

- i. To disseminate awareness amongst the general masses regarding the Legal Provisions, various Policies, Programmes and Schemes, in respect of Narcotic Drugs and Psychotropic Substances as well as to create awareness about the ill effects of drug abuse amongst the children in schools and colleges, street children, urban slum children, injective drug user(s), families concerned, prisoners, workers in unorganized Sector, Chemists, drug pedlars, sex workers and general masses etc.
- ii. Organizing literacy camps for sensitizing the farmers who are carrying out permissible cultivation of various substances/source plants about the adverse health and life threatening effects of consumption of such drugs and substances.
- iii. To spread awareness amongst the parents, teachers and students about the ill effects of the substance abuse.
- iv. To sensitize the various stakeholders viz; Judiciary, Prosecution, Members of Bar, Police, Forensic Laboratories, De-addiction Centres, Corrective Homes, Rehabilitation Centres, School, College and University administration, Children Homes, Old-age Homes, Nari Niketans, Schools for Special Children, Ministerial Staff of Courts, etc. about the drug menace and effective measures to curb it.



- v. To mobilize the available infrastructure in identifying the victims of drug abuse, their treatment and post detoxification rehabilitation.
- vi. To tap the potential of the Panchayati Raj Institutions/Local Bodies at grassroot level for intervention and prevention of drug abuse and destruction of illicit cultivation of plants used to derive the drugs/substances.
- vii. To maintain effective coordination with the Drug De-Addiction Centres and Rehabilitation Centres etc. for better facilities and respect for the rights of the victims and to intervene, if any breach is noticed.
- viii. To co-ordinate the activities of the various stakeholders working in the field.
- ix. To ensure essential legal services to the victims of drug trafficking and drug abuse.

Furthermore, though there are various Laws, Government Policies and Schemes for the welfare, rehabilitation and social re-integration of the drug abusers. However, victims of drug abuse are not aware of these welfare laws and schemes. Therefore, a massive drive is required, to make aware and provide better future life opportunities to the drug addicted persons.

Therefore, for the abovementioned pious objectives and in order to implement the NALSA scheme more effectively in the State of Uttarakhand, the Hon'ble Executive Chairman, Uttarakhand State Legal Services Authority has desired to launch a statewide campaign.

### **3. NOMENCLATURE**

Uttarakhand is a Himalayan State and holds a special place in the religious and spiritual world. Being abode of Lord Shiva, Lord Vishnu and many other deities, Uttarakhand is also known as “Devbhoomi”. Apart from its geographical location situated at the borders of two countries, Uttarakhand shares a large part of its border with the most populous State *ie.* Uttar Pradesh. This makes Uttarakhand a transit State for smuggling of drugs across the international as well as State borders. The geographical location of Uttarakhand is major hurdle for drug control in the State. For the last few years, there is a phenomenal rise in drug trafficking and drug abuse amongst the youth, children and adults of the State. It is worth mentioning that some regions of the State are severely affected by this menace. This is an area of great concern for which all of us have to join hands and pledge our allegiance



towards this cause. Hence, Hon'ble the Chief Justice of High Court of Uttarakhand who is also Hon'ble the Patron-in-Chief of Uttarakhand State Legal Services Authority, has been pleased to name this campaign as “**SANKALPA: NASHAMUKT DEV BHOOMI**”.

#### **4. RESEARCH WORK/SAMPLE SURVEY**

To achieve good results in this campaign, a sample research work/survey of victims of the drug abuse and ill effects of psychotropic substance abuse was carried out in three districts of Uttarakhand namely, District Dehradun, District Nainital and District Almora as a pre-campaign activity. With the help of students of Law Colleges, PLVs and NGOs, the respective DLSAs conducted research and sample survey on some specific relevant points according to the approved Plan of Action. The research work/survey was based on Rapid Assessment Survey Methodology. After completion of this research work, data/ information was submitted by concerned DLSAs to the SLSA.

- A.** The summary of the data/information is as follows:-
- i. Most of the drug addicts fall in the age group of 18-32 years, which means that the younger generation is more prone to the menace of drugs;
  - ii. Smack, Marijuana (*Ganjha*) and Cannabis (*Bhang*) are used by majority of drug addicts;
  - iii. 92% drug addicts are Male and 8% are Female;
  - iv. 70% drug addicts are illiterate or educated up to XIIth standard;
  - v. Maximum age of drug addict person is 70 years;
  - vi. Minimum age of drug addicts person is 09 years; and
  - vii. Majority of drug addicts surveyed want to quit drugs.
- B.** In this research work/survey, the following persons were identified as victims of drug abuse :-
- i. Street children;
  - ii. Urban slum children;
  - iii. Injective drug users;
  - iv. Students;
  - v. Prisoners etc.



C. In the research work/survey, following main reasons of drug addiction were identified :-

- i. Depression or Stress;
- ii. To feel good or better;
- iii. Atmosphere of home and family;
- iv. Communication gap with parents and elders;
- v. Peer factor and Friends Group;
- vi. Availability and Financial Incentives;
- vii. Experimenting and Curiosity;
- viii. Easy Self Medication;
- ix. Sleep disorders;
- x. Emotional Immaturity; and
- xi. Effect of Mass Media.

D. On the basis of same research work/survey, it has been found that the commonly used drugs amongst the drug abusers including children and adolescents, are as follows :-

- i. Tobacco;
- ii. Alcohol;
- iii. Smack;
- iv. Marijuana (*Ganjha*);
- v. Cannabis (*Bhang*);
- vi. *Charas*;
- vii. Opium (*Afeem*);
- viii. Nail paint, Whitener and Cough Syrup etc.

## 5. STRATEGIC FRAME WORK

Considering the reports/results of the aforesaid research work/survey as sample size for the whole State, a State level campaign will be carried out under the following Plan of Action:

### I. Time Period

All the 13 District Legal Services Authorities of Uttarakhand shall conduct the said State level campaign for a pre-defined period across the State



under the supervision and guidance of the Uttarakhand State Legal Services Authority.

## **II. Collaborative Departments for Coordination and Co-operation**

In the campaign, the following departments of State of Uttarakhand are required to co-operate/co-ordinate with UKSLSA/DLSAs :-

- i. Department of Social Welfare;
- ii. Department of Medical Health & Family Welfare;
- iii. Department of Women and Child Welfare;
- iv. Department of Education;
- v. Department of Panchayati Raj;
- vi. Department of Home;
- vii. Department of Finance; and
- viii. Narcotics Control Bureau.

SLSA and DLSAs shall hold meetings and make necessary communications with the aforesaid departments to conduct the campaign so that co-ordinated approach is adopted for successful & meaningful completion of the campaign.

## **6. PLAN OF ACTION**

The objectives, strategy and the series of the activities of the campaign are as follows:-

### **A. Establishment of Special Units**

In the NALSA's Scheme, there is a provision of establishment of Special Units, consisting of Judicial Officer(s), young lawyer(s) to be nominated by the Chairman, DLSA, Medical Officer(s) to be nominated by the Chief Medical Officer concerned, a Revenue/Police/Forest Officer(s) nominated by the Chief Secretary, Social Workers, Para Legal Volunteers and a Representative of NGO(s).

In this regard, Hon'ble the Patron-in-Chief, UKSLSA has simplified the procedure for appointment of Special Units. Now, the Revenue/Administrative Officers may be nominated by the concerned District Administration. The Special Units will be constituted as under:

- i. Judicial Officer;
- ii. Young Lawyer;



- iii. Medical Officer;
- iv. Revenue Officer;
- v. Police Officer;
- vi. Forest Officer;
- vii. Social Workers;
- viii. PLVs; and
- ix. Representative of NGO.

The DLSAs across the State shall make endeavour towards the constitution of Special Units as mentioned above and shall make all needful efforts to improve the performance of Special Units.

### **B. Formation of Teams of Panel Lawyers, PLVs and NGOs etc.**

Secretary to DLSA shall constitute teams consisting of Law Students, Para Legal Volunteers and members of reputed NGOs. In view of the population or area of a district, the DLSA may constitute more than one team for such District. The teams shall work under the supervision and guidance of the Special Units as mentioned above and Drug Addict Counselling Committee. These teams shall have the following functions:-

- i. Identification of drug peddlers, stockers, transporters, sellers etc.;
- ii. Identification of drug addicts/victims in the district;
- iii. Identification of drug addicts under treatment;
- iv. Identification of main reasons for drug addiction;
- v. Identification of the NGOs working actively for drug addicts in the District;
- vi. Co-ordination with the NGOs/De-addictions Centres to ensure the safety and treatment of drug abusers;
- vii. Co-ordination with the Psychologists and Doctors working in the field of drug De-addiction/rehabilitation;
- viii. Identification of former Drug Addicts and Associate them in awareness camps to share their experiences; and
- ix. Any other work, as DLSA deems fit.

### **C. Sensitization of Teams about the Subject/Topic and Relevant Laws/Schemes**

Secretary to DLSA and Special Unit shall sensitize the abovementioned teams about the sensitivity of the subject/issue, relevant laws and schemes. Apart from the NALSA scheme, the teams shall be apprised of the following drug laws of India and other relevant enactments:-



- i. The Drugs and Cosmetics Act, 1940;
- ii. The Pharmacy Act, 1948;
- iii. Factories Act, 1948;
- iv. The Industries (Development and Regulation) Act, 1951;
- v. The Drugs and Magic Remedies (Objectionable Advertisement) Act, 1954;
- vi. The Medicinal and Toilet Preparations (Excise Duties) Act, 1956;
- vii. The Drugs (Prices Control) Order, 1995 (under the Essential Commodities Act);
- viii. The Narcotic Drugs and Psychotropic Substances Act (NDPS), 1985;
- ix. The Prevention of Illicit Traffic in Narcotic Drugs and Psychotropic Substances Act, 1988;
- x. Juvenile Justice (Care and Protection of Children) Act, 2015; and
- xi. United Provinces Excise Act, 1910.

#### **D. Constitution of Anti Drug Clinics**

- i. Anti Drug Clinics shall be constituted at the University, College and School level to make the youth and students aware of the ill effects of drug abuse.
- ii. PLVs, students, teachers and parents shall be the members of the Clinics which shall be headed by the Principals or Head of the Institution concerned. DLSA will write to school administrations for constitution of such clinics.
- iii. If required, assistance of the Department of Education shall be taken for this purpose.
- iv. Apart from the level of Colleges and Schools, Village level Legal Aid Clinics/Legal Services Clinics may also be constituted for wider awareness of ill effects of drug abuse amongst the masses.

#### **E. Awareness Programmes and Drug Education**

For the success of campaign, awareness and sensitization programmes shall be organized amongst the masses, schools, colleges, jails, observation homes, hospitals, de-addiction and rehabilitation centres *etc.* in every District. Special awareness and sensitization programmes may be organised in drug affected areas of the district and the victims of drug abuse, families of the victims, street children, sex workers, chemists, farmers, media persons and representatives of stakeholders/special units should be included in such



awareness programmes. School/college based drug education programmes shall be organized regularly in all Private/Government schools.

## **F. Mode of Sensitization and Awareness Programmes**

- i. Whenever PTMs (Parent-Teacher Meetings) are held in the schools, the parents, teachers and the students should be made aware by SLSA, DLSAs and TLSCs about functioning of the Anti Drug Clubs/Clinics and the ill effects of drugs.
- ii. Besides the awareness programmes organised in PTMs, awareness-cum- sensitization programmes may also be held in the following manners :-
  - At Universities & Colleges - SLSA and UJALA
  - At Senior Secondary Schools - Secretary or Retainer Lawyer of DLSA
  - At Other Schools - Trained PLVs.
- iii. Essay, drawing, debate, quiz competitions and sports activities may be organised in the form of State Olympiad.
- iv. Documentaries, short films and *nukkad nataks* may be exhibited at the public places to make the general masses aware. Pamphlets, leaflets and booklets may also be distributed in colleges, schools and cinema halls.
- v. Radio talks and Television Interviews may be organised on harmful effects of drugs and means to curb the same.
- vi. Famous or popular personalities and celebrities may be associated with the campaign as Youth Icons.
- vii. Social media accounts like Facebook, Twitter etc. may be opened by SLSA and DLSAs to spread out the awareness.

## **G. Rehabilitation and Social Re-integration**

Rehabilitation of drug abuse is one of the most challenging tasks. Following steps may be taken for rehabilitation and de-addiction of drug abuse victims:-

### **D) Identification of Drug Addicts/Victims**

Identification of victims should be the primary task. Following modalities may be helpful for this purpose:-



NGOs and PLVs shall identify the victims in slum areas, near educational institutions through door to door campaign and visits. Secretaries of Legal Services Authorities, Panel Lawyers and PLVs shall identify the victims in Jails, Observation Homes, Special Homes and Other Correctional Institutions through inspections or visits. Team of UKSLSA shall visit the Jails, Observation Homes, Special Homes etc. and District Judges, District Magistrates and Superintendent of Police may be present during such visits.

## **II) Identification of Drug Peddlers and Sellers and legal action against them**

Identification of drug peddlers and sellers is another important and challenging task. This objective may be achieved with the help of raids by Task Force constituted with the help of Police and Narcotics Control Bureau and Special Units. Special Task Forces apart from Special Units may be constituted with the help of Police Department. Police will be requested to constitute Special Task Force for action against the Drug Peddlers/Sellers. The information relating to identified Drug Peddlers/Seller will be given to police, who will take the action as per the law under intimation to DLSA concerned.

## **III) Co-ordination with Panchayat Institutions**

A large number of victims of drug abuse reside in the rural areas. For their identification, co-operation of Panchayati Raj Institutions shall be taken. For this purpose, the District Judges may be directed to take assistance of District Magistrates of their respective districts.

## **IV) Mode of Rehabilitation**

For rehabilitation following modes may be useful:-

### **(i) Counselling :**

- a. It should be the first and primary object to provide counselling to the early stage addicts of drug abuse.
- b. Counselling Committees shall be constituted at District and Tehsil levels.
- c. Psychologists, trained Panel Lawyers, Social Workers and PLVs may be associated in counselling.
- d. Assistance of JJBs/CWCs and Nirbhaya Cells may also be taken. Good reputed NGOs may be associated with this work.



**(ii) Establishment of De-addiction and Rehabilitation Centres and Treatment of Drug Addicts therein :**

- a. The State Government may be requested to establish at least one Rehabilitation Centre in every district immediately within prescribed time.
- b. Intermediary and advance level victims shall be admitted in the De-addiction and Rehab Centres.
- c. Presently there are no Government de-addiction or rehabilitation centers, therefore some victims may be admitted in private centres, or centres run by the NGOs or by various other organisations under Corporate Social Responsibility at the expence of such centres. For this purpose co-ordination with these private centres shall be established to financially support the De-addiction/Rehabilitation.
- d. For cure of the remaining addicts in private centres, expenses may be born by the UKSLSA. For this purpose, the State Government will be requested to provide budget.
- e. Former drug addicts who have been thoroughly rehabilitated, may be associated in the awareness campaigns to share their experiences.

**H. Emphasis on treatment needs of Female Addicts/Abusers**

The Psychiatry/ De-addiction department of all Government run Medical Colleges in the State may have separate facilities for treatment of female patients. Special Unit shall co-ordinate with Department of Health for treatment of female drug addicts in such separate facilities.

**I. Demand Reduction Activities**

Demand reduction means prevention, treatment, rehabilitation and all other efforts that help towards ending the craving and desire for drugs. The best long-term strategy for reducing demand lies with:-

- i. Educate everyone, especially the young, about the dangers of drugs;
- ii. Provide effective rehabilitation of drug addicts and helping them to become responsible citizens;
- iii. Uttarakhand Judicial and Legal Academy (UJALA) will be requested to train the Panel Lawyers and PLVs for creating awareness in victims of drug abuse;



- iv. Liaisoning with at least 5 to 10 doctors in Government hospitals and Co-ordinating with them for de-addiction and treatment facilities; and
- v. Co-operation of Department of Medical Health & Family Welfare, Social Welfare and NGOs will be sought in this regard.

### **J. Supply Reduction activities**

The campaign will not be successful unless a check is imposed on the production and supply of raw material for drugs. Hence to eliminate the identified illicit cultivation of the opium, poppy etc., following measures will be taken :-

- i. Illicit cultivation shall be identified by special unit with the help of PLVs and local bodies/Panchayati Raj Institutions at grass root level in all districts;
- ii. Create 'Special Task Forces' for carrying out narcotic substance destruction operation;
- iii. Initiate an awareness programmes on ill-effects of drug abuse, in pockets known for 'traditional illicit drug cultivation';
- iv. Develop proper healthcare facilities, including de-addiction and treatment facilities in such areas;
- v. Develop alternative means of livelihood for 'traditional' illicit drug cultivators; and
- vi. Co-operation of Department of Police, Revenue, Social Welfare and Panchayati Raj will be sought in this regard.

### **K. Court Matters Related Strategy**

- i. In case of small quantity appropriate drug victim will be given legal aid and services to avail benefit of provisions of Section 64A of NDPS Act.
- ii. SLSA or DLSA shall provide help to the victims in medical treatment for De-addiction from a hospital or an institution maintained or recognised by the Government or Local Authority.
- iii. For medical treatment, co-ordination shall also be made with private or NGO run/maintained De-addiction/Rehabilitation centres.
- iv. The SLSA/DLSA shall ensure essential legal services to the victims of drug trafficking and drug abuse. Apart from this, SLSA/DLSA



shall ensure legal services and assistance including witness protection in accordance with law to the witnesses.

## **7. EXPECTED OUTCOME**

- i. Make the special unit actively functional;
- ii. Constitute the anti-drug clinics;
- iii. Coordination with De-addiction/rehabilitation centres;
- iv. Increase awareness amongst drug abuse victims and common masses and the availability of free legal aid;
- v. Increase awareness amongst drug abuse victims about their rights;
- vi. Identification, treatment and rehabilitation of drug abuse victims suffering from mental illness and depression. Special attention for female drug abuse victims;
- vii. Legal representation to all drug abuse victims as per NALSA's scheme; and
- viii. Focus on demand and supply reduction activities.

## **8. FOLLOW UP, SUPERVISION AND COMPILATION**

DLSA shall take follow up action so that the legal services promised to and needed by the drug abuse victims during the campaign are actually delivered.

The follow up, actions may spread beyond the duration of period of this campaign. The campaign shall be carried out under the supervision of Uttarakhand SLISA. The activities, achievement, learnings and success stories at the campaign shall be compiled by the DLSAs who will share the same with SLISA.

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