

LAWS RELATED TO DRUG ABUSE

Author: Agrim Verma, I year of B.B.A., LL.B. from Symbiosis Law School Hyderabad

ABSTRACT

In India, the drug addiction epidemic among the youth has reached worrisome proportions. Changing cultural attitudes, rising economic hardship, and deteriorating supporting ties are all contributing to the onset of substance abuse. Cannabis, heroin, and pharmaceutical medications made in India are the most commonly abused narcotics in India. The kind of drug abuse, the individual's personality, and the addict's surrounding environment all play a role in drug use, misuse, and abuse. The conventional systems of social control have loosened as a result of industrialization, urbanisation, and migration, leaving an individual open to the pressures and strains of modern life. At both the national and international levels, India has prepared to meet the threat of drug trafficking. Several steps have been implemented, including innovative reforms to the enforcement, legal, and judicial systems. The imposition of the death sentence for drug-related offences has proven to be a significant deterrent. Various government agencies and non-governmental organisations have developed a comprehensive plan involving specialised programmes to reduce overall drug use, which is reinforced by measures such as education, counselling, treatment, and rehabilitation. This research paper examines the drug addiction culture in India, the numerous laws in place to combat it, as well as the various policies and programmes implemented by the government to assist drug addicts.

INTRODUCTION

Drug Abuse has been described as an incurable and relapsing disorder. Drug abuse is a situation when people purchase legal or illegal substances in the way they should not. People generally take more than the regular dose of pills or use other people's prescriptions to procure the same. These drugs are usually obtained to feel good, to ease the level of stress or to escape reality. Through the reports of various surveys conducted, 50% percent of deaths in India occur through drugs. The drug often leads to depression, anxiety and serious situations and with increased addiction the person proves to be a threat to his/her surroundings and even to society. Drug abuse often leads to people committing the crime of theft so that they can get money and procure drugs. Drugs usually control the human mind and their behaviour as well leading to a severely

depressed state or even traumatize the particular person as drugs directly affect the brain of the person when they tend to enjoy the pleasure by those drugs. The side effects of these drugs could be seen in a month or a week and if the person is regularly consuming the drugs there is a change in the behaviour with every passing day.

There are various groups of drugs divided based on the effects they have on human brains. They are: 1. Stimulants, 2. Depressants, 3. Opium-related painkillers, 4. Hallucinogens. Commonly used drugs include cocaine, marijuana. Being a nation with a particular amount of legitimate and illegitimate drug growth, a travelling path and a market full of customers, the drug policy of India demands the control of the supply and demand of the narcotized substances. The large synthetic and the medicinal industry pull out the consideration of the nation on the production of the unauthorized drugs and foresee its distribution and exercise control over it as well as restrict the use of these drugs without any medical prescription. Several parts of the country account for critically high rates of people dependent on drugs, people infected with HIV and viral hepatitis are among those who inject these drugs, making the policy regarding health and the reduction of harm caused by it even more considerable. Although India has harsh laws about drugs, particularly criminalizing the use of illicit drugs and imposing capital punishment for the use of certain drugs offences conform firmly with the prosecution.



India has taken early and decisive steps to address drug problems. Article 47 of the constitution states 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”. Presently India is a party to three United Nations Drug Conventions against Illicit Traffic in Narcotic Drugs and Psychotropic Substances. India had enacted The National Drugs and Psychotropic Substances Act in the year 1985, the act was amended three times i.e. 1988, 2001 and 2014 which is the latest. The primary aim of the NDPS was 'to prevent and combat drug abuse and illicit trafficking, an apparent emphasis on the supply reduction.

In India, drug abuse is a punishable offence with imprisonment ranging from 6 months to 1 year with or without a fine. In the case *Gurmeet Singh v. Union Territory of J&K*, the accused was caught with an illicit drug in his possession and was trying to escape the police, despite his

attempt to run the police apprehended him. After the search of the bag, it was found that he was carrying 100g of heroin. After the final investigation, he was presented before the judge and was prosecuted for the crime he committed.

RESEARCH OBJECTIVES

The objectives of the study are:

1. To study drug abuse.
2. To closely assess the issue of drug abuse in India.
3. To learn about various laws made to prevent drug abuse.
4. To learn in detail about the steps taken by the government to reduce illicit drug trafficking.

RESEARCH QUESTIONS

The questions addressed in the research paper are:

1. What is drug abuse? What are the problems caused by it?
2. What steps are taken by the government of India to resolve this issue?
3. What laws are made to prohibit drug-abusing?
4. What policies are formulated to avert the illegal drug trade?
5. What measures are being taken to help drug abusers?

DRUG ABUSE AND ITS EFFECTS

The outbreak of drug abuse in all generations in India has become an alarming issue. Change in cultural values, rise in economic problems and a significant decrease in supportive relations leads people to initiate drug use. By the World Health Organization, drug or substance abuse is unrelated to acceptable medical practices. If the statistics of the drug abusers worldwide are taken into the consideration, the issues appear to be very serious. The sale and purchase of drugs is the third-largest business, with a turnover of over \$300million, next to the petroleum and arms trade. Addiction to these illicit causes distresses and leads to the production, distribution and consumption worldwide. Drug abuse gives rise to crime and violence. The historical study of substance addiction reveals that drug use and drug abuse have coexisted without being viewed as a societal problem or even as terrible for thousands of years. Drug abuse began as a problem in

the form of drug addiction just a few hundred years ago. The fact that substance addiction has a long political and historical history, however, is not uncertain.

There are broad and varied factors responsible for drug abuse and drug addiction. Causal factors vary from country to country and from time to time and from individual to individual in the same country. Drugs can be used and abused to either reduce pain or increase pleasure. Beyond this stage, however, the problem begins to get fuzzy. Several causal variables originate in the minds and bodies of those who abuse drugs as well as in the environment in which they live. It is generally said that it is society itself that creates the conditions that lead to drug use being lawful and illegal. The use of drugs is not just an issue of deviance; it is derived from our society's fundamental mores. There are various effects on the body of the individual who consumes drugs. The effect varies on the number of doses one has consumed. In case the lower amount is consumed it produces "euphoria, reduced fatigue, and a perception of increased mental acuity" and in the case of high doses it produces severe ill-effects such as "irritability, paranoia, panic, repetitive stereotyped behaviour, diaphoresis, mydriasis, tachyarrhythmia, stroke, and seizure". It even has long term effects on the health of the one who regularly consumes it. It causes chronic diseases such as bronchitis, lung problems, and cancer. It could even reduce the life expectancy of a person. It can damage the body to a very large extent and cause various infections. Consumption of certain drugs can even cause depression and anxiety leading to schizophreniform disorder.

Other than the harmful impacts on the body of the individual it has serious effects on the family, children of the abuser. It also affects the community the person belongs to and the society the person resides in. The emotional and subsequent behavioural conditioning of substance addicts' immediate family members can be very critical. Parental inconsistency can contribute to a lack of the child's structure and boundary setting, which can lead to improper behavioural change. If emotionally deprived at home, frustration can result in other types of miscarried expressions of anger, which can affect both the home and the community. Ultimately, such feelings can lead to drug self-medication and the potential to take the path of drug abuse. The cost of substance addiction to the community and culture is immense. Extreme dependency and altered behaviour secondary to abuse are responsible for the most critical effects on families and society.

STEPS TAKEN TO COMBAT DRUG ABUSE

To tackle this serious issue the government is using the two-branched approach that is- reduction in supply and reduction in demand. Under the purview of the Enforcement Agencies, falls the approach of reduction in supply. The strategy that includes reduction of demand is in the domain of the social sector. In the Indian Government, the “Ministry of Social Justice and Empowerment” is held responsible for the task of implementing the activities that can gradually lead to demand reduction. The major concern of the strategy is empowering the community and society to manage the problem of drug abuse. The approach is to acknowledge drug abuse as a psycho- socio-medical problem, the best way to handle it is through community-based interventions at three different stages.

PRIMARY PREVENTION

- Keeping safe through the promotion of drug prevention and moderation of alcohol.

SECONDARY PREVENTION

- Facilitating the behaviour modification phase of high-risk people on their own; early recognition of distressed individuals; therapy and early assistance.

TERTIARY PREVENTION

- The medication, recovery and reintegration into the mainstream of recovering addicts.

The concerned ministry for demand reduction is implementing schemes such as “Prevention of Alcoholism and Substance (Drug) Abuse”. The scheme was revised in 1994, 1999 and 2008 respectively. Their major objectives were:

1. For creating awareness and educating people regarding the bad effects of alcoholism on the individual, and the society.
2. To provide the services such as recognition, motivation, counselling, deaddiction, etc.
3. To mitigate the effects of drug and alcohol dependence among the individual, family and community.
4. To gather the related and required data and to strengthen the objectives thus formulated.

The Drug Demand Reduction Strategy formulated by the government of India broadly focuses on the three areas:

1. Awareness through Preventive Education.
2. Counselling, treatment and rehabilitation.

3. Capacity building of service providers.

AWARENESS THROUGH PREVENTIVE EDUCATION

Building knowledge and educating people through preventive education efforts through different audio-visual aids and materials for Information Education & Communication (IEC) about the ill effects of substance abuse.

COUNSELING, TREATMENT AND REHABILITATION

A multi-faceted approach to coping with addicts encompasses services of motivational therapy, recovery, follow-up and social reintegration of recovering addicts. Treatment of those who are dependent on drugs is a very complex process that comprises of:

1. Identification/ Intervention
2. Detoxification
3. Rehabilitation
4. After Care



CAPACITY BUILDING

Another important area of action by the Government of India through the Ministry of Social Justice and Empowerment is the delivery of substance abuse prevention/rehabilitation training to volunteers to build up a professional service provider network.

LEGAL FRAMEWORK

The primary cause of drug addiction starts with the excessive use of opium. Drugs such as marijuana or cannabis have been used since the war and their use can even be traced back to the Vedic period. In India, cannabis was legally sold until 1985 and was widely used for recreational purposes. The Single Convention on Narcotic Drugs (1961) introduced by the United States was discouraged by India. The collective decision reached by the convention was to give India a "Grace Period" of about 25 years to restrict the use of cannabis to scientific and medical uses only. As it was a very sensitive political agenda and the country was bound by foreign delegations. This prompted the Indian government to abolish the deep-seated racial use of

cannabis. So, the Narcotics Drugs and Psychotropic Substances Act was enacted on 14 November 1985, banning all narcotic drugs with little resistance in India.

According to the Narcotics Drugs and Psychotropic Substances Act- “ it is illicit for a person to produce or manufacture/cultivate, possess, sell, purchase, transport, store, and/or consume any narcotic drug or psychotropic substance”. A special bureau- Narcotics Control Bureau (NCB) was formed under the act of 1985 which came into effect in March 1986. India's chief law enforcement and intelligence agency, the Narcotics Control Bureau (NCB), is responsible for fighting drug trafficking and the misuse of illicit drugs. It was established on 17 March 1986 to allow the NDPS Act to be fully enforced and combat its infringement. Neurotic people make up most of the overdose users. Typically, no sign of being a drug user is given by a normal person and it is most likely that he will become one. And some of the causes of drug addiction are genetic variables, peer pressure, anxiety, mental disorders, depression, dysfunctional personality, leisure, too much benefit, adverse social reactions, physical inability to do a job, etc. The Act continues to impose tougher sanctions on substance offenders in India.

OFFENCES	PUNISHMENTS	PROVISIONS
“Cultivation of illicit substance such as cannabis, opium without a license”.	“Rigorous imprisonment up-to 10 years plus fine up-to Rs. 1 Lakh”.	“Section 18(c), 20”
“Knowingly allowing one’s premises to be used for committing an offence”.	“Same as for the offence”.	“Section 25”
“External Dealings in Narcotics Drugs and Psychotropic Substances Act- i.e. engaging in or restricting trade whereby drugs are	“Imprisonment ranging from 10-20 years and fine of Rs. 1 to 2 Lakhs”. (Regardless of the quantity)	“Section 24”

procured from outside India and sold to a person outside India”.		
“Violations pertaining to controlled substances (precursors)”	“Rigorous imprisonment up-to 10 years plus fine of Rs. 1 to 2 Lakhs”.	“Section 25(A)”
“Financing traffic and harboring offenders”.	“Imprisonment ranging from 10-20 years and fine of Rs. 1 to 2 Lakhs”.	“Section 27(A)”
“Punishment for violations not elsewhere specified”.	“Imprisonment for up-to 6 months or fine or both”.	“Section 32”

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