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GOVERNMENT OF MANIPUR
SECRETARIAT: SOCIAL WELFARE DEPARTMENTNOTIFICATIONS

Imphal, the 30th June, 2020

No. 19/24/2012- S(SW): The following draft of the Manipur State Policy on Substance Use, 2019, which the State Government proposes to make has been drafted by a Drafting Committee constituted by Social Welfare Department consisting of different stakeholders viz. Civil Organization, Student Groups, Law Enforcement Agencies, NGOs and Line Departments with due deliberation and discussion. The draft Policy is hereby published for the information of all persons likely to be affected; and notice is hereby given that the said draft Policy shall be taken into consideration after the expiry of **thirty** days from the date on which the copies of the Official Gazette in which this notification is published are made available to the public;

Objections and suggestions, if any, may be addressed to the Principal Secretary, Social Welfare, Government of Manipur;

The objections and suggestions which may be received from any person with respect to the said draft before the expiry of period specified above, will be considered by the State Government.

DRAFT POLICY**THE MANIPUR STATE POLICY ON SUBSTANCE USE, 2019****Short Title, extent and commencement:**

1. The policy may be called as the 'Manipur State Policy on Substance Use 2019'.
2. It extends to the whole of the State of Manipur.
3. It shall come into force on the date of publication of the policy in the official Gazette.

Definition:

1. The term "Substance" or "Drug" referred to as in this policy document will be as defined in Narcotic Drugs and Psychotropic Substances Act 1985.
2. Substance use disorder means a maladaptive pattern of substance use leading to clinically significant impairment or distress, as manifested by one (or more) of the following within

a 12 months' period: (a) recurrent substance use resulting in a failure to fulfil major role/ obligations at work, school or home; (b) recurrent substance use in situations in which it is physically hazardous; (c) recurrent substance-related legal problems; (d) continued substance use despite having persistent or recurrent social or interpersonal problems caused or exacerbated by the effects of the substance.

3. Current Use of any substance is defined as use (even once) within preceding 12 months.
4. Harmful use means a pattern of substance use that causes damage to the health, mental or social consequences of the substance use.
5. Inhalants mean substances that are inhaled for psychoactive effects.
6. Demand Reduction is a term used for a range of policies and programmes which seek a reduction of desire for substance use and of preparedness to abstain from substance use disorder.
7. Harm Reduction is a term used particularly for policies or programmes that aim to reduce the harm without necessarily requiring abstinence.
8. Supply Reduction is a term used for a range of activities designed to stop the production, manufacture and distribution of illicit drugs.
9. Quantum of Work combines the prevalence of Harmful use and Dependence, which are understood as categories of consumption-pattern in which the individual requires professional help. It also indicates substance use disorders.
10. ATS—Amphetamine type stimulants. ATS refer to group of drugs whose principal members include amphetamine and methamphetamine.

Abbreviations used:

AIDS:	Acquired Immuno Deficiency Syndrome
ADGP:	Additional Director General of Police
ATS:	Amphetamine –type Stimulants
BoSEM:	Board of Secondary Education Manipur
CBO :	Community Based Organization
CC:	Core Committee
CoHSEM:	Council of Higher Secondary Education Manipur
CMO:	Chief Medical Officer
CSR:	Corporate Social Responsibility
DGP:	Director General of Police
DSWO:	District Social Welfare Officer
DTC:	District Technical Committee
FC:	Finance Committee
FINGODAP:	Federation of Indian NGOs on Drug Abuse Prevention
GO:	Governmental Organization
GOI:	Government of India
HIV:	Human Immuno Deficiency Virus
H.O.D:	Head of Department
ICMR:	Indian Council of Medical Research
IDU:	Injecting Drug User
IRCA:	Integrated Rehabilitation Centres for Addicts
IEC:	Information Education and Communication

GP:	<i>Inspector General of Police</i>
JNIMS:	<i>Jawaharlal Nehru Institute of Medical Sciences</i>
MACS:	<i>Manipur State AIDS Control Society</i>
MaSSUCA:	<i>Manipur State Substance Use Control Authority</i>
MoSJE:	<i>Ministry of Social Justice and Empowerment</i>
MU:	<i>Manipur University</i>
NACO:	<i>National AIDS Control Organisation</i>
NDPS:	<i>Narcotic Drugs and Psychotropic Substance</i>
NGO:	<i>Non-Governmental Organization</i>
NSS:	<i>National Service Scheme</i>
NYKS:	<i>Nehru Yuva Kendra Sangathan</i>
OPD:	<i>Out Patient Department</i>
OST:	<i>Opioid Substitution Therapy</i>
PIT:	<i>Prevention of Illicit trafficking</i>
RIMS:	<i>Regional Institute of Medical Sciences</i>
SCERT:	<i>State Council of Educational Research and Training</i>
SHG:	<i>Self Help Group</i>
Sl.No.:	<i>Serial Number</i>
SSOPSAM:	<i>State Society for Prevention of Substance Abuse Manipur.</i>
SP:	<i>Superintendent of Police</i>
STC:	<i>State Technical Committee</i>
SWD:	<i>Social Welfare Department</i>
YAS:	<i>Youth Affairs and Sports</i>
ZEO:	<i>Zonal Education Officer</i>

Background

- 1.1. The geographical location of the State of Manipur which shares a porous international border of 367.5 km long with Myanmar makes the State highly vulnerable to the problem of drug use and its related issues.
- 1.2. Manipur is one of the States in India with high incidence of people affected by substance use disorder. The problem became more complex since 1980s. The users are reported to consume alcohol, cannabis, opioid, sedatives, various inhalants and others.
- 1.3. There are many reports on increase in number of *substance* users among young age group of women in the last two decades and also children starting to use one or multiple substances as early as 12 years of age.
- 1.4. The various reports of *substance* users reveal similar patterns, trends of substance use in all the districts, rural and urban areas of Manipur. However, there is no such scientific and systematic study in the State.
- 1.5. The magnitude of *substance* use in Manipur is at alarming rate. Prevalence of almost all categories of substance use in Manipur is of high incidence. The quantum of work (total number of harmful users and number of dependent) is also high in almost all the categories.¹

Government of India reported the status of magnitude of substance use in Manipur as shown below:

Sl. no.	Substance	Current Use %	Dependent %	Quantum of Work %
1	Alcohol	22.4	3.8	9
2	Cannabis	3.74	0.33	0.88
3	Opioids	14.22	1.80	4
4	Sedatives	7.73	0.77	1.76
5	ATS	4.86	0.46	1.76

MENTAL ILLNESS

Having a population of about 29 lacs according to 2011 census 2.4% population (68,539) are suffering from severe incapacitating mental illness, 9.4% (2,68,444) are affected with depression & other mood disorders, 6.3% (1,79,915) are having stress related & other anxiety neurotic disorders, 1% from epilepsy & another 1% from intellectual disabilities and 23.7% (6,67,000) of the population suffer from drug use disorders.²

- 1.6. The existing facilities in terms of demand, harm, and supply reduction approaches, by the Government and private sector is not sufficient to address the issue of the substances menace in the State.
- 1.7. The area of illegal cultivation of poppy plants in the State is reportedly increasing rapidly in all the interior parts of hills of Manipur. However, the areas under illegal poppy cultivation in the State have not been mapped so far.
- 1.8. The combat on poppy plantation is a big challenge on the supply reduction because of various reasons including lack of infrastructure, human resource and rough terrain.
- 1.9. There are instances of busting/cracking down of laboratories operating in clandestine manner where brown sugar is manufactured in both hill and plain areas in recent times. This shows that Manipur is now becoming one of the drugs producing States.
- 1.10. The problem of substance use disorder is mainly of a psycho social medical problem which is a serious concern to public health. There are evidences that *substance* users, irrespective of mode of using are more prone to various health problems such as HIV, Hepatitis, Tuberculosis, etc. or combination of two or more health problems.

2. Objectives

- 2.1 The objective of the Policy is to make Manipur free from substance use disorder.
- 2.2 To control wide spread *substance* use disorder and address the issues in the State in general and among the youths in particular and across gender with appropriate facilities of treatment and rehabilitation and other preventive measures.
- 2.3 To promote collective initiatives of line departments and stakeholders in addressing the issue.

- 2.4 To focus on primary intervention programmes among the non-users with special focus on women and children both in short and long term holistic approach.
- 2.5 To set guidelines for regulation of all demand reduction programmes and to identify proper agencies to implement programmes.
- 2.6 To strengthen the curbing mechanism of the problem of trade, smuggling, manufactures of narcotic and psychotropic substances, production or commercial activities of raw materials used for manufacturing narcotic and psychotropic substances.
- 2.7 Creating and promoting awareness about the harm of illicit narcotic crops cultivation and develop alternatives for shifting to other crops.
- 2.8 To constitute State authority and its various committees to ensure scientific and evidence based response.
- 2.9 To facilitate networking among policy planners, service providers and stakeholders with an aim to advocate proper advocacy.
- 2.10 To facilitate survey and research, training, documentation, and collection of the relevant information to strengthen the above mentioned objectives.

3. The Mandate

- 3.1 The Right to Equality is guaranteed by the Constitution of India as a fundamental right to each and every citizen and social security and health have been made the concurrent responsibility of the State Government.
- 3.2 The Government of Manipur considers the problem of substance use disorder as a great social, political, economic and public health crisis, which calls for an immediate and urgent action that the Government is committed to provide adequate fund for proper implementation of the programme at the State, District and Community levels.
- 3.3 The Government of Manipur is fully committed to ensure proper treatment and rehabilitation of the substance use disorder, and welfare and security provisions of their spouse and children.
- 3.4 The Government of Manipur is fully committed in strengthening the network and coordination between the law enforcement agencies involved in supply reduction activities and the GOs/NGOs involved in demand reduction activities so as to facilitate effectiveness of the substance use prevention programmes in the State.
- 3.5 The Department of Social Welfare, Government of Manipur, shall be designated as a facilitator for effective and efficient implementation and monitoring of substance use prevention and treatment programmes in the State.

4. Guiding Principles

- 4.1 The Policy recognizes that the people affected by substance use disorder as part and parcel of the society and they are capable of achieving their full potential for which they deserve the necessary treatment and opportunities.
- 4.2 The Policy understands gender specific problems in treatment and rehabilitation.
- 4.3 The Policy considers the importance of public health and human rights in dealing with prevention and control of substance use in the State.

- 4.4 The policy recognises that effective impact will require the multi-sectoral approach involving Social Welfare Department, Health Department, Law Enforcement Agencies, NGOs, etc

5. Management

- 5.1 There shall be a State level authority called *Manipur State Substance Use Control Authority (MaSSUCA)*. The *MaSSUCA* shall consist of
- | | | |
|--------|---|------------|
| i. | Chief Minister, Manipur | - Chairman |
| ii. | Cabinet Ministers in-charge of Social Welfare/Home/
Youth Affairs & Sports/Health/Education/Finance/
Agriculture/Horticulture and Soil Conservation/Law &
Legislative Affairs. | - Member |
| iii. | Chief Secretary, Manipur. | - Member |
| iv. | Director General of Police , Manipur | - Member |
| v. | Administrative Secretary, Home, Manipur | - Member |
| vi. | Administrative Secretary, YAS, Manipur | - Member |
| vii. | Administrative Secretary, Health, Manipur | - Member |
| viii. | Administrative Secretary, Education, Manipur | - Member |
| ix. | Administrative Secretary, Finance, Manipur | - Member |
| x. | Administrative Secretary, Law, Manipur | - Member |
| xi. | Administrative Secretary, Agriculture, Manipur | - Member |
| xii. | Administrative Secretary, Horticulture, Manipur | - Member |
| xiii. | Director, Social Welfare, Manipur | - Member |
| xiv. | Representative of Ministry of Social Justice and
Empowerment,
Government of India | - Member |
| xv. | Representative of Narcotics Control Bureau,
Government of India | - Member |
| xvi. | Representative of State Mental Health Authority | - Member |
| xvii. | Three representatives of reputed NGOs working in the
field of substance use disorder in Manipur | - Member |
| xviii. | Three renowned academicians/medical practitioners
working in the related field | - Member |
| ix. | Administrative Secretary, Social Welfare, Manipur | - Convenor |

The term for NGO representatives and academicians shall be of three years.

The *MaSSUCA* may co-opt other members, whenever necessary, such as experts, Government of India agencies / Ministries, affected persons, etc. from time to time.

The *MaSSUCA* shall meet at least once in a year.

- 5.2 The *MaSSUCA* shall approve annual plan and programmes.
- 5.3 The *MaSSUCA* shall constitute State Technical Committee to monitor and evaluate the programmes and Research Team to study the impact of the programmes and different aspects of the problem of Substance Use.
- 5.4 The *MaSSUCA* may form/constitute, if feel necessary, specific committees to facilitate the functioning of State Technical Committee.
- 5.5 The *MaSSUCA* shall mobilize, manage, allocate fund from various agencies/agents.

5.6 The *MaSSUCA* may frame Bye-Laws and Rules & Regulation to be followed by STC for attainment of the objectives of the Policy.

5.7 The *MaSSUCA* shall exercise such other powers and performs such other duties as may be necessary or consistent to the attainment of the objectives of the policy.

5. State Technical Committee (STC)

6.1 The STC shall consists of the members of the Executive Committee of the State Society For Prevention of Substance Abuse, Manipur and other members as mentioned below which may be amended from time to time:-

- | | | |
|-------|---|------------|
| i. | Principal Secretary, Social Welfare, Manipur | - Chairman |
| ii. | Director, Social Welfare, Manipur | - Convenor |
| iii. | ADGP/ IGP nominated by DGP | - Member |
| iv. | Director, Education-S, Manipur | - Member |
| v. | Director, Education -U, Manipur | - Member |
| vi. | Director, Health, Manipur | - Member |
| vii. | Project Director, MACS | - Member |
| viii. | State Mission Director, National Health Mission | - Member |
| ix. | H.O.D or Representative, Psychiatry Department, RIMS | - Member |
| x. | H.O.D or Representative, Psychiatry Department, JNIMS | - Member |
| xi. | Superintendent of Police, Narcotics & Affairs of Border | - Member |
| xii. | Director, Youth Affairs & Sports, Manipur | - Member |
| xiii. | Joint Director, Social Welfare, Manipur | - Member |
| xiv. | Deputy Director, Social Welfare, Manipur | - Member |
| xv. | Three representatives of reputed NGOs working in the field of substance use disorder in Manipur, at least one should be from the Community. | - Member |

7. District Technical Committee (DTC)

7.1 In every district, there shall be a District Technical Committee.

- | | | |
|-------|--|------------|
| i. | Deputy Commissioner | - Chairman |
| ii. | District Social Welfare Officer (DSWO) | - Convenor |
| iii. | Zonal Education Officer (ZEO) | - Member |
| iv. | Chief Medical Officer (CMO) | - Member |
| v. | District AIDS Officer | - Member |
| vi. | Superintendent of Police (SP) | - Member |
| vii. | District Youth Officer | - Member |
| viii. | Two representatives of reputed NGOs working in the field of substance use disorder, at least one from the Community. | - Member |
| ix. | One renowned academicians/medical practitioners working in the related field | - Member |

The term for NGO representatives and academicians shall be of three years.

7.2 The DTC may co-opt members such as persons having necessary expertise and knowledge from time to time.

7.3 The District Technical Committee (DTC) shall:

7.3.1 Meet at least once in six months.

7.3.2 Develop work plan for the district and identify the agencies/agents to carry out the programmes.

7.3.3 Develop a resource pool of experts in the districts.

7.3.4 Mobilize resource in consultation with STC.

7.3.5 Develop monitoring system to evaluate programmes.

7.3.6 Constitute, if necessary, any committees to speed up activities.

7.3.7 Submit quarterly report to STC.

8. Programmes

8.1 The programmes shall be developed by State Technical Committee (STC) and should obtain the concurrence of *MaSSUCA*.

8.2 Any programme, initiated by any other agencies/agents shall be submitted to STC for examination and subsequently for obtaining approval of the *MaSSUCA*.

8.3 The programmes should be related with prevention, treatment, and harm reduction, training of trainers in different fields of substance use disorder, awareness and any other activities with adolescents, general public, harmful users, and substance dependents.

9. Selection Criteria for NGOs for running a programme.

9.1 A society registered under the Societies Registration Act, 1860 or any relevant Act of the State Government or a registered public trust or an organization/institute having Aims and Objectives/ Memorandum of Association to take up such programmes related with substance use disorder.

9.2 The eligible organizations as defined in Para 9.1 should also.

9.2.1 Have a properly constituted managing body with clearly defined powers, duties and responsibilities of Officials/office bearers.

9.2.2 Have resources, facilities and experience for undertaking any such programme.

9.2.3 Not to be run for financial profit of any individual or a body of individuals.

9.2.4 Have worked at least for a period of three years in the field related with the programme.

9.2.5 The Society/Trust/Organization/Institution should register with Social Welfare Department, Government of Manipur.

10. State Level Academy of Research and Training (SLART) on Substance Use Disorder

10.1 There shall be a State Level Academy of Research and Training (SLART) on Substance Use Disorder under Social Welfare Department, Government of Manipur.

10.2 The Academy shall develop a pool of trainers with the existing State/National level agencies and youth programmes particularly so as to impart training to the National Service Volunteers, sportspersons, youth leaders, NGOs and *Meira Paibis*, etc. at State-and District-Level for promotion of youth activities to prevent substance use.

- 10.3 The Academy shall conduct workshop, short term courses for service providers in prevention, treatment, and harm reduction approaches.
- 10.4 The Academy shall conduct general workshop, short term courses for Police personnel (law enforcers), Prison Staffs, members of NGOs doctors, nurses, counsellors, ward boys, teachers, etc.
- 10.5 The Academy shall develop training modules, curriculum, training calendar, IEC materials, monitoring and evaluation tools, etc.
- 10.6 There shall be a research wing in the Academy for conducting constant survey and research works on the magnitude and nature of the substance use in the state and outcome of various programmes.
- 10.7 The Research Wing of the Academy shall develop locally suitable approach to curb the substance use problem in different districts of the State.
- 10.8 The Research Wing of the Academy shall maintain a database and take up documentation for further research and link with website for public domain.

11. Demand Reduction Prevention

- 11.1 Special attention shall be given on primary prevention for control of youth and children so as to free from substance use. Information on harms of substance use in terms of its effect on physical, health, social and personal development shall be made available to young boys and girls by setting up or improving existing information centres. Information and knowledge may be disseminated by integrating with other youth programmes under State or National Schemes such as programmes under YAS, NYK and NSS.
- 11.2 Young boys and girls shall be trained on life skill development.
- 11.3 Vocational career counselling, entrepreneurship consultation and technical input will be provided through information/youth centres of YAS, NYKS, NSS, CBOs, NGOs and government agencies, etc.
- 11.4 There shall be interaction, workshop with family members of vulnerable groups, school teachers, members of school management, *individuals, groups or agencies dealing with youths and children, sport and health clubs, YAS, Local clubs, Meira Paibis. etc.* on youth motivation, and dealing with young substance users.
- 11.5 CoHSEM, BoSEM and SCERT shall focus on inclusion of one chapter on harmful effects of substance use in the curriculum for students.
- 11.6 There shall be summer and winter youth festivals in which sports (including adventure sports), cultural activities, and literary activities would be organized. Preventive measures shall also be taken up during major festivals of the state. *viz IEC materials, leaflets may be distributed; Shumang Lila, Short Play, Cycle Rally, Media Campaign, may be organized in coordination with youths, local bodies and communities. Youths, local clubs, bodies shall be encouraged for a substance free environment while celebrating or organizing major festivals of the state. Programmes to disseminate inner essence of the festivals may be organized in consultation with the relevant civil bodies or State departments.*
- 11.7 There may be substances use disorder counselling units in all Government/Private educational institutions.
- 11.8 There shall be a special guideline both for dealing with adolescent substance users and their support system.

- 11.9 Peer led intervention programme shall be given emphasis as a focus preventive measures to curb the menace of substance use.
- 11.10 The State shall adopt stringent methods to check the use of substances especially vehicle drivers with the help of Breath Analyser or latest technique under the provisions of existing laws.

Treatment

- 11.11 De-addiction Centre of the Government (both Central and State), non-governmental organizations or missionaries running private rehabilitation centres, etc. shall be established/strengthened for maintaining proper detoxification and treatment of substance (including alcohol) users in adequate number.
- 11.12 There shall be a standardized treatment protocol laid down by the Government towards private establishment, functioning of de-addiction and rehabilitation centres and also for physicians dealing with substance use disorder in both government and private health care settings. The rehabilitation centres receiving fund from Government of India are bound by the scheme guidelines. For the rehabilitation centres not funded by the Government of India, Government of Manipur will formulate suitable guidelines and develop protocols for registration through consultative process.
- 11.13 Free treatment should be provided to clients who cannot afford, especially from economically weaker section, at least 10% of the total capacity for one month (for non-funded centres).
- 11.14 Treatment facility at OPD in Hospital/Appropriate Health Care Centres, Drop in Centre, Community based detoxification camp, home detoxification, Counselling centres, Peer led Intervention shall be established in adequate number for those substance users who are not willing for residential/in house treatment services,.
- 11.15 Separate treatment centres shall be set up adequately for women, children, third gender for substance use disorder.
- 11.16 Separate programme should also be mandated for parents whose children are in substance use disorder, as to how they can support their children towards recovery. Implementation of the programme at centres and community level shall be mandatory for all the rehabilitation centres irrespective of government sponsored or private, organizations, dealing with substance use disorder in the State.
- 11.17 The State shall create welfare opportunities for recovering dependent users by giving job information and entrepreneurship facilities and vocational training with special attention to women and children.
- 11.18 The State shall endeavour to create a corpus fund to be utilized as means of livelihood for community or Self Help Groups (SHGs) of recovering substance users.
- 11.19 Paramedical, Law Enforcement Agencies and volunteers shall be trained on substance overdose management.
- 11.20 The toxicological laboratory at hospitals, medical colleges, and Forensic laboratory shall be strengthened to detect and identify the specific substances.

12. Harm Reduction

- 12.1 The Policy envisages harm reduction principle as a public health approach to Injecting Drug Users (IDUs).
- 12.2 There shall be special provisions for treatment, detoxification and Opioid Substitution Therapy of substance use disorder including prison.
- 12.3 Treatment protocols enumerated from Para 11.12 to Para 11.20 shall also be followed.
- 12.4 Harm reduction measures shall be made available by integrating Opioid Substitution Therapy and other on-going programmes of NACO, etc.
- 12.5 Opioid Antagonist treatment or overdose management shall be available at all strategic centres or outlets including hospitals.

13. Supply Reduction of Illicit Narcotic and Psychotropic Substances

- 13.1 The State shall provide all the facilities and opportunities to improve general livelihood pattern in rural and hill areas.
- 13.2 The illicit crops cultivation such as poppy shall be dealt expeditiously under the provisions of existing laws.
- 13.3 Cultivation of alternative crops shall be encouraged for alternative livelihood.
- 13.4 The State shall adopt stringent method to check the inflow of illicit substance user as narcotic and psychotropic substance along the various routes including air, road transport, etc. and also diversion of prescription drugs for misuse.
- 13.5 The State shall adopt all the available methods for effective checking in the flow of precursor chemicals used in manufacture of illegal drugs.
- 13.6 State Technical Committee shall look into the financial, infrastructural and manpower requirements etc. of law enforcement agencies and other auxiliary agencies including Forensic laboratories for effective control, raids, arrests and prosecution of substance traffickers.
- 13.7 There is one fast track court at Cheirap Court, Imphal to dispose cases related to NDPS Act in a time bound manner. The State shall endeavour to strengthen and increase the number of Fast Track Courts to prosecute the substance traffickers in time and punish them in accordance with law and constitute advisory committee for of NDPS Act.
- 13.8 The State shall look into matters relating with border management including border fencing in vulnerable areas, real time intelligence sharing, empowering border guarding forces established under Central and State laws through relevant departments/ agencies.
- 13.9 The State shall look into the problems faced by law enforcement agencies while arresting drug peddlers/traffickers who are drug users. Home Department shall open appropriate detention centre or designated security hospital wings in the existing hospital setup for persons with substance use disorder.

14. Information Education Communication (IEC)

- 14.1 Emphasis shall be given to change people's attitude including families, relatives, friends, CBOs, etc. so as to minimize stigmatization, marginalization, isolation of persons with substance use disorder through various media to facilitate their return to the social mainstream society.
- 14.2 Intended messages shall be communicated to the target group with the help of different media including print and electronic, folk media, etc.
- 14.3 Educational materials such as posters, leaflets, booklets, newsletter containing correct and latest information on harms, treatment options and signs of substance disorder, services

available etc. shall be published specifically for substance users, health workers, relevant agencies, NSS, NYKS, Youth centres, local clubs, NGOs, CBOs and general population.

- 14.4 The materials shall be published in Manipuri, English and different dialects of the State to ensure suitability, understanding, acceptability and popularity among the target group.
- 14.5 The IEC materials shall not contain any information, which may cause fear or create misunderstanding with regards to acceptability and popularity among the target group and the general population as a whole.
- 14.6 The contents and format of IEC materials shall be developed by DTCs, Line Department or any NGOs; however the content and format of the materials should be approved by State Technical Committee.

15. Human Rights and Ethics

- 15.1 The State shall adopt various methods to minimize harassment and stigmatization of substance users in the society.
- 15.2 No substance user shall be denied of any service or opportunity including hospital admission, treatment, blood donation, delivery, medical investigation and employment, purely based on his/her substance use history/behaviour.
- 15.3 The State shall respect privacy, dignity, individual and human rights guaranteed by the constitution of the country.
- 15.4 Strict confidentiality in terms of a person's history/behaviour of substance use shall be ensured in treatment facilities, that any information without anonymity shall not be ensured about a patient without his/her written consent or a directive from a competent authority. Breach of confidentiality by any treatment personnel shall be treated as a disciplinary matter.
- 15.5 The treatment of substance users shall only be done with his/her informed consent; in case of children, the informed consent of parents or legal guardians is mandatory.
- 15.6 The State shall safeguard security and rights of agencies/personnel who are on duty in any fields of substance use.
- 15.7 A legal cell shall be constituted or any legal body shall be designated as the statutory authority to enforce Human Rights and Ethics related laws in relation with substance use problem.

16. Inter-Sectoral Coordination

- 16.1 The State Technical Committee shall co-ordinate with Social Welfare Department, Health Department, Home Department, Law Enforcement Agencies, and NGOs working in any field of psychoactive substance use, and the general community for effective enforcement of strategies, programmes including proper treatment of harmful drug users and substance dependents, dissemination of information on physical, social and psychological harms of the drug and alcohol use, HIV/AIDS, Hepatitis, other blood borne diseases.
- 16.2 State Technical Committee shall co-ordinate with the Health Department and medical colleges for referral of clients who needs detoxification and referring back for rehabilitation to NGOs and private run treatment centre and vice versa.
- 16.3 Facilities in the Psychiatry Departments of RIMS Imphal, JNIMS Porompat and district hospitals shall be enhanced to act as Referral Centres for complicated cases of patients suffering for substance use disorder and specially those who are having other complexity of physical and/or mental disorder.

- 16.4 State Technical Committee shall co-ordinate with the Education Department and educational institutions for enhancing primary prevention activities at schools and colleges. Students found with substance use disorder symptoms shall be intervened in time by referring to treatment facilities or physicians/psychologists by taking account of one's degree of dependency and others syndromes. At the same time, concerned authorities in co-ordination with DTCs, NGOs shall also ensure the right to education of these students.
- 16.5 State Technical Committee shall co-ordinate with the Drug Licensing and Dispersing Authority to verify sale/purchase of drugs that are defined in Narcotics Drugs & Psychotropic Substance Act 2017.
- 16.6 The State Drug Controller under Directorate of Health Services, Government of Manipur shall ensure that sale and prescription of drugs on large scale are strictly as per prescription and dispersing policy and rules. Defaulting chemists and pharmacists shall be prosecuted
- 16.7 The State Technical Committee shall co-ordinate with the District Industrial Centres, Manipur Society for Skill Development, Financial Institutions, Government Schemes, SHGs of substance users, etc. for effective vocational skill development and economic rehabilitation.
- 16.8 The State Technical Committee shall co-ordinate with Tribal Affairs and Hills, Social Welfare, Veterinary and Animal Husbandry, Agriculture, Horticulture, Forest Departments as well as with universities to develop alternative model of livelihood for poppy and other illegal crop cultivators.
- 16.9 The State Technical Committee shall co-ordinate with the Home Department to sensitize the police personnel on the issue of drug use especially its legal and ethical issues. The Committee may ensure to incorporate sensitization of security personnel in their training centres like Manipur Police Training Centre, Pangei, etc.
- 16.10 The State Technical Committee shall co-ordinate with all the Law enforcing agencies working on supply reduction.

17 Resource Mobilization

- 17.1 The MaSSUCA being the apex body shall be responsible for mobilization of funds to carry out activities.
- 17.2 A separate bank account shall be opened for channelizing the fund for addressing the issue related with substance use effectively.
- 17.3 The Social Welfare Department shall earmark 5 % of its annual developmental budget allocation. Resources from the Government of India especially the Ministry of Social Justice and Empowerment, Government of India shall also be mobilized. Various activities related to substance use like Integrated Rehabilitation Centres for Addiction (IRCA), detoxification camp, training, workshop, etc which are already in the schemes of Central Ministry and other agencies, sponsored by the Government of India shall be explored.
- 17.4 The allocation shall be earmarked by MaSSUCA for various activities relating to Prevention, Intervention, Aftercare, IEC, Research, Training, etc.
- 17.5 Other State Departments which are directly or indirectly related with Substance Use such as Education, Health, Youth Affair, Home Department, etc may earmark at least 2 % of their annual developmental budgetary provision to be utilized for the achievement of the objective of the policy. Technical support to these programmes shall be given by the District Technical Committee.

- 17.6 The fund earmarked as stated at para 17.3 and 17.5 shall be transferred to the account of STC which shall be jointly operated by Chairperson and Convenor of the Committee. STC shall utilize the fund as per work programmes approved by MaSSUCA
- 17.7 Members of Legislative Assembly and Members of Parliament may be requested to earmark at least 1 % of their developmental fund towards the achievement of the objectives of the policy in their respective constituencies. Technical support to these programmes shall be provided by the District Technical Committee.
- 17.8 To make endeavour for mobilization of funds from Corporate Social Responsibility (CSR).

18 Monitoring and Evaluation

- 18.1 The STC, the DTC and State Level Academy of Research and Training (SLART) on Substance Use Disorder shall monitor and evaluate the on-going programmes to assess the progress, impact, gap and challenges in the operation. State Academy of Training and Research on Substance Use disorder may outsource the research and documentary works, if situation demands.

19 Review of the Policy

- 19.1 The MaSSUCA may review the Manipur State Policy on Substance Use 2019, with necessary modifications, amendments and introduction of innovative programmes, from time to time, as required..

By orders & in the name of Governor,

V. VUMLUNMANG
Principal Secretary (SW),
Government of Manipur.