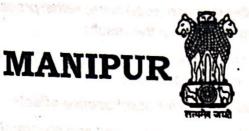


THE MANIPUR STATE POLICY ON PSYCHOACTIVE SUBSTANCES, 2019

DEPARTMENT OF SOCIAL WELFARE GOVERNMENT OF MANIPUR



GAZETTE

EXTRAORDINARY PUBLISHED BY AUTHORITY

No. 303

Imphal, Monday, December 21, 2020

(Agrahayana 30, 1942)

GOVERNMENT OF MANIPUR SECRETARIAT: SOCIAL WELFARE DEPARTMENT

NOTIFICATIONS

Imphal, the 18th December, 2020

No.CSSS-1305(2)/2/2020- SW-SW: The draft of the Manipur State Policy on Substance Use, 2019 was published in the official Gazette vide Notification No.19/24/2012-S dated 30th June, 2020 for the information of all persons likely to be affected and notice was given for thirty days from the date on which the copies of this notification was published and made available to the public;

Thereafter, the objections and suggestions received from various stakeholders were examined by the Drafting Committee of State Drug Policy and by the Core Committee for formulation of the State Drug Policy. All necessary amendments were made in the draft Manipur State Policy on Substance Use, 2019. The draft policy has been renamed as "Manipur State Policy on Psychoactive Substances, 2019". The State Cabinet approved the draft Manipur State Policy on Psychoactive Substances, 2019 in its Cabinet meeting held on 9th December, 2020.

Now, therefore, with the approval of the State Cabinet, the State Government hereby makes the following Policy, namely

THE MANIPUR STATE POLICY ON PSYCHOACTIVE SUBSTANCES, 2019

Short Title, extent and commencement:

- 1. The policy may be called as the 'Manipur State Policy on Psychoactive Substances 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 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.

- Current Use of any substance is defined as use (even once) within preceding 12 months.
 Unless specified, 'Use' refers to 'current use' in the results.
- 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 necessary 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. Psychoactive Substances are substances that, when taken in or administered into one's system, affect mental processes, e.g. cognition or affect.(WHO). Eight Categories of psychoactive substances used in India-Alcohol, Cannabis, Opioids, Cocaine, Inhalants, ATS, Sedatives, Hallucinogens.(MoSJE)
- 10. 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.
- 11.ATS refer to group of drugs whose principal members include amphetamine and methamphetamine.
 - 12. Economically Weaker Section in Manipur is a category of people having an annual household income less than 1.2 lakhs.

Delinition:

Abbreviations used:

AIDS: Acquired Immuno Deficiency Syndrome

ATS: Amphetamine type Stimulants

BoSEM: Board of Secondary Education Manipur

CBO: Community Based Organization

CC: Core Committee

CoHSEM: to ad Council of Higher Secondary Education Manipur in Council of Higher Secondary

CMO: Chief Medical Officer

CSO: Civil Society Organization

CSR: Corporate Social Responsibility

DSWO: District Social Welfare Officer

DTC: District Technical Committee

EWS: Economically Weaker Section

FC: Finance Committee

FINGODAP: Federation of Indian NGOs on Drug Abuse Prevention

GO: Governmental Organization

GOI: Government of India

HIV: Human Immuno Deficiency Virus

ICMR: Indian Council of Medical Research

IDU: Injecting Drug User

IRCA: Integrated Rehabilitation Centres for Addicts

IEC: Information Education and Communication

JNIMS: Jawaharlal Nehru Institute of Medical Sciences

MACS: Manipur State AIDS Control Society

MaPSCA: Manipur Psychoactive Substances Control Authority

MoSJE: Ministry of Social Justice and Empowerment

MU: Manipur University

NACO: National AIDS Control Organisation

NDPS: Narcotic Drugs and Psychotropic Substance

NGO: Non-Governmental Organization

NSS: National Service Scheme

NYKS: Nehru Yuva Kendra Sangathan

OPD: Out Patient Department

OST: Opioid Substitution Therapy

PIT: Prevention of Illicit Trafficking

RIMS: Regional Institute of Medical Sciences

SCERT: State Council of Educational Research and Training

SHG: Self Help Group

SSOPSAM: State Society for Prevention of Substance Abuse Manipur

STC: State Technical Committee

SWD: Social Welfare Department

WHO: World Health Organization

YAS: Youth Affairs and Sports

ZEO: Zonal Education Officer

1. Background modes was S menda and an apply

- 1.1. The geographical location of the State of Manipur which shares a porous international border of 398 km (approx.) 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 psychoactive 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 psychoactive substance users among young age group of women in the last two decades and also children using one or multiple substances as early as 12 years of age.
- 1.4. The various reports of psychoactive substance use 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 solely carried out to study the magnitude, pattern and nature of substance use 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. In 2019, Government of India reported the status of magnitude of substance use in Manipur as shown below:

SI. No.	Substance	Current Use %	Dependent %	Quantum of Work %		
1	Alcohol	22.4 AND THE PROPERTY OF	3.8 SHEELEN TO THE WA	9	HORV.	
2	Cannabis	3.74	0.33	0.88		
3	Opioids	14.22	1.80	4	, such eyes	
4	Sedatives	7.73 merbegne2 :	0.77 cauv umav.	1.76	VYKS.	
5	ATS	4.86	0.46	1.76	iago	

MENTAL ILLNESS

Having a population of about 29 lakhs according to 2011 census, the prevalence of mental illness in one form or other is²

SI. No.	Nature of mental illness	Percentage/Prevalence			
1.	Severe incapacitating mental illness	2.4%	SCERT		
2.	Depression & other mood disorders	9.4%	SHG		
3.	Stress related & other anxiety neurotic disorders	6.3%	SSOPSAM		
4.	Epilepsy	1%	OTO		
5.	Intellectual disabilities	1%	-70 % (C)		
6.	The prevalence of substance use	23.7%			

¹(Source- Magnitude of Substance Use in India 2019 – Ministry of Social Justice Empowerment).

²(Source – National Mental Health Survey 2015-16 Manipur)

- 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 menace of the psychoactive substances 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. Manipur is now reportedly becoming one of the illicit drugs producing States.
- 1.10. The problem of psychoactive substance use 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 use 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 illegal use of all psychoactive substances.
- 2.2 To control wide spread psychoactive substance use and address the issues thereof in the State in general and among the youth in particular and across gender with appropriate facilities for 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 and 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 better 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 ensure proper advocacy.
- 2.10 To facilitate survey and research, training, documentation, and collection of 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. The State Government will uphold the Constitution.

e coating factored in terms of demand, have supply a

- 3.2 The Government of Manipur considers the problem of psychoactive substance as a great social, political, economic and public health crisis, which calls for an immediate and urgent action for which the Government is committed to provide adequate provision 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 psychoactive substance use disorder, and welfare and security provisions of their spouse and children.
- The Government of Manipur is fully committed to strengthen the network and coordination between the law enforcement agencies involved in supply reduction activities and the GOs/NGOs/CBOs/CSOs involved in harm and demand reduction activities so as to facilitate effectiveness of the psychoactive substance use prevention programmes in the State.
- 3.5 The Department of Social Welfare, Government of Manipur, shall be designated as a Nodal Department for effective & efficient implementation and monitoring of psychoactive substance use prevention and treatment programmes in the State.

4. Guiding Principles

- 4.1 The Policy recognizes that the people affected by psychoactive substance use 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 takes note of the importance of public health and human rights in dealing with prevention and control of psychoactive substance use in the State.
- 4.4 The policy recognises that the effective impact will require the multi-sectoral approach involving Social Welfare Department, Health Department, Law Enforcement Agencies, NGOs, CSOs, etc.

5. Management

- 5.1 There shall be a State level authority called Manipur Psychoactive Substances Control Authority (MaPSCA). The MaPSCA 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

	3.3	iii.	Chief Secretary, Manipur.	- Member
	5001	iv.	Director General of Police , Manipur	- Member
86	enedr	٧.	Administrative Secretary, Home, Manipur	- Member
. (vi.	Administrative Secretary, YAS, Manipur	- Member
	ns.	vii.	Administrative Secretary, Health, Manipur	- Member
	197	viii.	Administrative Secretary, Education, Manipur	- Member
	. 0	ix.	Administrative Secretary, Finance, Manipur	O- Member
	1	X.	Administrative Secretary, Law, Manipur	- Member
		xi.	Administrative Secretary, Agriculture, Manipur	- Member
	e si	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
	7	XV.	Representative of Narcotics Control Bureau, Government of India	- Member
	7.	xvi.	Representative of State Mental Health Authority	- Member
		xvii.	Three representatives of reputed NGOs working in the field of Psychoactive Substances in Manipur, at least one should be from the Psychoactive	zik Elitec Like - cini
	75	xviii.	Substance User Community Three renowned academicians/medical practitioners working in the related field	- Member
	1	ix.	Administrative Secretary, Social Welfare, Manipur	- Convener
				The second second

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

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

- 5.2 The MaPSCA shall meet at least once in a year.
- 5.3 The MaPSCA shall approve annual plan and programmes.
- 5.4 The MaPSCA 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 psychoactive substance.
- 5.5 The MaPSCA may form/constitute, if necessary, specific committees to facilitate the functioning of State Technical Committee.
- 5.6 The MaPSCA shall mobilize, manage, allocate fund from various agencies/agents/
 - 5.7 The MaPSCA may frame Bye-Laws and Rules & Regulation to be followed by STC for attainment of the objectives of the Policy
 - 5.8 The MaPSCA 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.

6. State Technical Committee (STC)

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

10041111			
i.,	Administrative Secretary, Social Welfare, Manipur	•	Chairman
eii.	Director, Social Welfare, Manipur	-	Convener
e iii.	ADGP/ IGP nominated by DGP		Member
iv.	Director, Education-S, Manipur		Member
€ V.712	Director, Education -U, Manipur	1	Member
vi.	Director, Health, Manipur	- 1	Member
vii.	Project Director, MACS	. 7	Member
viii.	State Mission Director, National Health Mission	Lil I	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	-5	Member
xii.	Director, Youth Affairs &Sports, Manipur	- 1	Member
xiii.	Joint Director, Social Welfare, Manipur	1	Member
xiv.	Deputy Director, Social Welfare, Manipur	•	Member
xv.	Three representatives of reputed NGOs working in the field of Psychoactive Substances in Manipur, at least one should	l d	7 jihak
evec:	be from the Psychoactive Substance User Community.	•	Member
xvi.	Two renowned academicians/medical practitioners working		es arte

The Members listed in Sl.No. i, ii, iv,vi, vii, xiii and xiv are members of the said society(SSOPSAM).

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

6.2 The STC shall:

in the related field.

- 5.2.1 Meet at least once in six months.
- 5.2.2 Implement and monitor the programmes adopted/approved by MaPSCA.
- 5.2.3 Constitute District Technical Committee.
- 5.2.4 Develop training modules, calendar and mobilize a pool of resource persons.
- 5.2.5 Mobilize resources for carrying out activities in consultation with MaPSCA and keep separate accounts.
 - 5.2.6 Coordinate Training activities.
 - 5.2.7 Conduct regular monitoring and evaluation in different programmes relating to prevention, treatment and supply.

- 6.3 The STC may co-opt other members such as persons having necessary expertise and knowledge from time to time.
- 6.4 The STC shall constitute necessary committees to look into the activities of District Technical Committee (DTC) from time to time by considering the nature and population of psychoactive substance use, local needs and situation.
- 6.5 The STC shall provide technical input to the MaPSCA and DTCs.
- 6.6 The STC shall submit periodical report to the MaPSCA.
- 6.7 The Executive Committee for State Society for Prevention of Substance Abuse, Manipur shall be office bearers who shall be responsible for regular functioning of the STC.
- 6.8 The Bank Account of the STC shall be jointly operated by the Chairman and Member Secretary of the SSOPSAM.

7. District Technical Committee (DTC)

7.1 In every district, there shall be a District Technical Committee consisting of the following members:

i. **Deputy Commissioner** Chairman Convener ii. District Social Welfare Officer (DSWO) iii. Zonal Education Officer (ZEO) Member iv. Chief Medical Officer (CMO) Member District AIDS Control Officer FIGURE V. Member vi. Superintendent of Police (SP) Member **District Youth Officer** vii. Member Two representatives of reputed NGOs working in the viii. field of Psychoactive Substance in Manipur, at least one

field of Psychoactive Substance in Manipur, at least one from the Psychoactive Substance User Community - Member

ix. One renowned academicians/medical practitioners

ix. One renowned academicians/medical practitioners

working in the related field - Member

1

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

- 7.2 The DTC may co-opt any other 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 pool of resource persons 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 committee to speed up activities.
- 7.3.7 Submit quarterly report to STC.

8. Programmes

- 8.1 The programmes under the policy shall be developed by State Technical Committee (STC) in order to achieve the objectives and STC should obtain the concurrence of MaPSCA.
- 8.2 Any proposal of programme, initiated by any agencies/agents under 8.1shall be submitted to STC for examination and subsequently for obtaining approval of the MaPSCA.
 - 8.3 The programmes should be related with prevention, treatment, and harm reduction, supply reduction, training of trainers in different fields of psychoactive substance, awareness and any other activities which are likely to benefit adolescents, general public, psychoactive harmful users, and psychoactive 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 similar Aims and Objectives / Memorandum of Association as that of the policy.
- 9.2 The eligible organizations as defined in Para 9.1 should
 - 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 also get registered with Social Welfare Department, Government of Manipur.

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

- 10.1 There shall be a State Level Academy of Research and Training (SLART) on Psychoactive Substance 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 psychoactive 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 supply of psychoactive substances, magnitude and nature of the psychoactive 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 problems of psychoactive substance use 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

- Special attention shall be given to primary prevention for control of youth and children so as to make them free from psychoactive substance use. Information on harms of psychoactive substance use in terms of its effect on physical, mental, 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.
- Vocational career counselling, entrepreneurship consultation and technical input will be provided through information/youth centres of YAS, NYKS, NSS, CBOs, NGOs, Student bodies and government agencies, etc.
- There shall be interaction, workshop with family members of vulnerable groups, students, school teachers, members of school management, individuals, groups or agencies dealing with youths and children, sport and health clubs, Local clubs, Meira Paibis, etc. on youth motivation, and on ways to deal with young psychoactive substance users.
 - 11.5 CoHSEM, BoSEM and SCERT shall focus on inclusion of one chapter on harmful effects of psychoactive 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 and 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 psychoactive 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 shall be psychoactive substances counselling units in all Government/Private educational institutions, boarding and hostels, etc.
- 11.8 There shall be a special guideline both for dealing with adolescent psychoactive substance users and their support system.
- 11.9 Peer led intervention programme shall be given emphasis as a focused preventive measures to curb the menace of psychoactive substance use.
- 11.10 The State shall adopt stringent methods to check the use of psychoactive 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 or strengthened as the case may to ensure proper detoxification and treatment of psychoactive substance users in adequate number.
- 11.12 There shall be a standardized treatment protocol laid down by the Government for proper functioning of private establishment, functioning of de-addiction and rehabilitation centres and also for physicians dealing with psychoactive 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, and hence at least 10% of the total capacity for one month (for non-funded centres) should be reserved for clients belonging to EWS. Government funded IRCA's are to provide free treatment as per guidelines.
 - 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 psychoactive 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 psychoactive substance use disorder.
 - 11.16 Separate programme should also be mandated for family members of the individuals to how they can support towards their 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 psychoactive substance use disorder in the State.
 - 11.17 The State shall create welfare opportunities for recovering 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 psychoactive substance users.
- 11.19 Opioid Substitution Therapy shall be used as an option for treatment.
- 11.20 Overdose management and detoxification facilities shall be available at all strategic centres or outlets duly authorised by the State Government including hospitals.
- 11.21 Paramedical, Law Enforcement Agencies and volunteers shall be trained on psychoactive substance overdose management.
- 11.22 The toxicological laboratory at hospitals, medical colleges, and Forensic laboratory shall be strengthened to detect and identify the specific psychoactive substances.

12. Harm Reduction

- 12.1 The Policy envisages harm reduction principle as a public health approach.
- 12.2 There shall be special provisions for treatment, detoxification and Opioid Substitution Therapy of psychoactive substance use disorder including those who are in prison.
- 12.3 Treatment protocols in Para 11.12 to Para 11.21 shall also be followed.
 - 12.4 Harm reduction measures shall be made available by integrating Opioid Substitution Therapy and other on-going programmes under NACO, etc.

13. Supply Reduction of Illicit Narcotic and Psychotropic Substances

- 13.1 The State shall provide all the facilities, opportunity to improve general livelihood pattern.
- 13.2 The illicit crops cultivation such as poppy, ganja (marijuana), etc shall be dealt with expeditiously under the provisions of existing laws/Acts.
- 13.3 Manufacturing, trafficking, sale and consumption of alcohol and other illegal psychoactive substances shall be dealt strictly under the provisions of the existing laws/Acts.
- 13.4 The State shall provide socio- economic rehabilitation programmes for cultivators of illicit crops and manufacturers of illicit liquor.
- 13.5 The State shall adopt stringent method to check the inflow of illicit psychoactive substances along the various routes including air, road, transport, etc. and also diversion of prescription drugs for misuse.
 - 13.6 The State shall adopt all the available methods for effective checking in the flow of precursor chemicals used in manufacture of illegal psychoactive substances.
 - 13.7 MaPSCA 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.

- 13.8 There is a State Advisory Board for detention of habitual offenders under (PIT)

 NDPS Act, 1988 and 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 adequate number of Fast Track Courts to prosecute the substance traffickers in time and punish them in accordance with law.
 - 13.9 The MaPSCA may urge upon the State Government to 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.
- 13.10 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 psychoactive substance use through various media to facilitate their return to the social mainstream society.
- 14.2 Intended messages shall be communicated to the target groups 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 psychoactive substances, services available etc. shall be published specifically for psychoactive substance users, health workers, relevant agencies, NSS,NYKS, Youth centres, local clubs, NGOs, CBOs, CSOs and general population.
- 14.4 The materials shall be published in Manipuri, English and different dialects of the State to ensure better publicity, understanding and acceptability 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 psychoactive substance users in the society.
- 15.2 No psychoactive substance user shall be denied of any service or opportunity including admission in educational institutions, hospitals, treatment, blood donation, delivery, medical investigation and employment.

- 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 psychoactive substance use shall be ensured in treatment facilities. Any information, without anonymity, shall not be shared about a patient without his/her written consent or a directive from a competent authority. Breach of confidentiality by any treatment personal shall be treated as a disciplinary matter.
- 15.5 The treatment of psychoactive substance users shall only be done with his/her informed consent; in case of children, the informed consent of parents or legal
- 15.6 The State shall safeguard security and rights of agencies/personnel who are on duty and individuals or CSOs helping the State Authority in controlling psychoactive CHINCH!
 - 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 psychoactive substance use problem.
 - 15.8 Employees both in Government and private sectors shall be allowed to avail special leave on medical ground for undergoing treatment of psychoactive substance addiction.

16.Inter-Sectoral Coordination

- 16.1 The State Technical Committee shall co-ordinate with Social Welfare Department, Health Department, MACS, Home Department, Law Enforcement Agencies, other relevant departments, and NGOs/CSOs working in any field of psychoactive substance use, and the general community for effective enforcement of strategies, programmes including proper treatment of harmful psychoactive substance users and psychoactive substance dependents, dissemination of information on physical, social and psychological harms of the psychoactive use, HIV/AIDS, Hepatitis, other blood borne diseases.
- 16.2 The State Technical Committee shall co-ordinate with the Health Department, MACS and medical colleges for referral of clients who needs detoxification and referring back for rehabilitation to IRCAs, NGOs and privately run authorized treatment centres 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 psychoactive substance use disorder and specially those who are having other complexity of physical and/or mental disorder.
 - 16.4 The 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 psychoactive 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 other syndromes. At the same time, concerned authorities in co-ordination with DTCs shall also ensure the right to education of these students.
- 16.5 The 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 chemist and pharmacists shall be prosecuted under existing laws.
- 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 psychoactive 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, other relevant departments as well as with universities to develop alternative model of livelihood for poppy and other illegal crop cultivators, manufacturers of illicit liquor etc.
 - 16.9 The State Technical Committee shall co-ordinate with the Home Department to sensitize the police personnel on the issue of psychoactive substance 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 College, 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 MaPSCA 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 psychoactive substance use effectively as stated in Para 6.8.
- 17.3 The Social Welfare Department shall consider earmarking 5% of its annual budgetary outlay for implementation of the Policy. 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 psychoactive 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 MaPSCA for various activities relating to Prevention, Intervention, Aftercare, IEC, Research, Training, etc.

- 17.5 Other State Government Departments which are directly or indirectly related with psychoactive substance use such as Education, Health, Youth Affair, Home Department, Forest, Horticulture, Agriculture, Tribal & Hills, Veterinary& Animal Husbandry, 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 State 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 Convener of the Executive Committee of SSPOSAM. STC shall utilize the fund as per work programmes approved by MaPSCA.
- 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

18. Monitoring and Evaluation

- 18.1 The STC, the DTC and State Level Academy of Research and Training (SLART) on Psychoactive Substance shall monitor and evaluate the on-going programmes to assess the progress, impact, gap and challenges in the implementation. State Academy of Training and Research on Psychoactive Substance may outsource the research and documentary works, if situation demands.
- 18.2 The programme implemented under the policy shall be opened for social audit under appropriate mechanism devised by the Nodal Department.

19. Review of the Policy

19.1 The MaPSCA may review the Manipur State Policy on Psychoactive Substances 2019, with necessary modifications, amendments and introduction of innovative programmes, from time to time, as and when required.

DRAFFING COMMITTEE

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ACKNOWLEDGMENT

The Department of Social Welfare is thankful to the immense contribution made by the distinguished Core Committee Members, Drafting Committee Members and the well informed citizens who gave their valuable feedback in the successful framing of 'The Manipur State Policy on Psychoactive Substances, 2019'.

CORE COMMITTEE

Charles on the Convener of

£1, %	Shri V. Vunlunmang (IAS), Principal Secretary (SW), Manipur & Shri H. Gyan Prakash Singh, Commissioner cum Secretary (SW), Manipur	ηε γ== υ	Chairman
2.	Administrative Secretary, Health Department, Manipur	de 6	Member
3.	Administrative Secretary, Education Department, Manipur	Q.C.F.	Member
4.	Administrative Secretary, Youth Affairs and Sports, Manipur	117	Member
5.	Administrative Secretary, Law Department, Manipur	-	Member
6.	Shri Watham Basu, Superintendent of Police, Narcotic Control Bureau	B_120	Member
7 800 m	Federation of All India NGOs on Drug and Alcohol Prevention (FINGODAP) - Manipur Chapter (Convenor/Co-Convenor)	13 a 50 P 586 s	Member
8. 9	Shri H. Dinesh Singh, President/Secretary, Kripa Society, Regd. Office Keishampat Thokchom Leikai, Imphal West	10116 - 33	Member
9.	Shri R.K. Tiken, President/Secretary, Social Awareness Service Organisation (SASO), Thangmeiband Khongdram Selungba, Imphal West	-119 -119	Member
10.	Shri M.C. Arun, Dean, School of Human and Environmental Sciences, Manipur University, Canchipur	and h	Member
11.	Dr. A. Jayanta Kumar Singh, Director, RRTC NE-I	ura e Viter	Member
12.	Shri Ngangom Uttam Singh, Director (Social Welfare), Manipur	nžiti.	Convenor

DRAFTING COMMITTEE

1.	Shri Ngangom Uttam Singh, Director (Social Welfare), Manipur	-	Chairman
2.	Shri Watham Basu, Superintendent of Police, Narcotic Control Bureau	-	Member
3.	Shri Abhiram Mongjam, Joint Director, MACS	-	Member
4.	Under Secretary, Law Department, Manipur	-	Member
5.	Shri MC Arun, Professor, Department of Anthropology, Manipur University	-	Member
6.	Dr. RK. Lenin Singh, Professor & Head of Department of Psychiatry, RIMS	_	Member
7.	Dr. A. Jayanta Kumar Singh, Director, RRTC NE-1	-	Member

8.	Smt. Ksh. Jibanmala, Project Director, Kripa Foundation			
7.	District Strip 1 ICSIGENT Value		Member	
10.	Shri R.K. Tiken, General Secretary Social S		Member	
11.	Shri R.K Tiken, General Secretary, Social Service Awareness Service Organization. Shri M. Yogesh Singh, Secretary USER Manipur	•	Member	
12.	Shri K. Maharabi Singh, Convenor, FINGODAP		Member	
13.	Shri Nongpoknganba, Convenor Ellicon		Member	
14.	Dr. A. Kanika Devi SNO Ni gra		Member	
15.	Smt. Sobhana Sorokhaibam, Secretary, MACS Partner NGO's Forum		Member	
16.	Shri Geetchandra Mangang, Secretary General (CADA).		Member	
17.	Smt. Nutan Nongthombam, Secretary General (CADA).	•	Member	
18.	Smt. Nutan Nongthombam, Secretary, Youth Initiatives Forum.		Member	
	Smt. Konsam Saroja, Deputy Director (CP), Social Welfare, Manipur	-	Convenor	

FEEDBACK

- Prof N. Mohendro, Former Member, Steering Committee, NER Vision, 2020. DoNER, Govt. of India.
- N. Somorendro, President, Saiyon Drug De-addiction and Research Centre, Meitei Langol, Imphal West.
- 3. Kh. Shrikanta, President, Anouba Mnagal Rehabilitation Centre Khuningthek, Imphal East
- H. Sanahal, Project In-charge, Bedrock of Recovery Substance Use Disorder, treatment Facility, Langol, Imphal West.
- K. Rosy, Centre In-charge, Punshi Rehabilitation Centre, Ishikha Yumnam Khunou, Imphal East.
- 6. Yogesh Maibam, President USER, Manipur
- 7. Babloo Loitongbam, Executive Director, Human Rights Alert.
- 8. FINGODAP Manipur
- 9. Community Network for Empowerment (CONE), Manipur
- 10. Makers Foundation, Manipur
- 11. USERS, Manipur
- 12. Harm Reduction Network (HRNM)
- 13. All Manipur Bar Association (AMBA)
- 14. All Manipur Student Union (AMSU)
- 15. Apunba Manipur Kanba Ima Lup (AMKIL)
- 16. Apunba Ireipaki Maheiroi Sinpanglup (AIMS)
- 17. Coalition Against Drugs and Alcohol (CADA)
- 18. Democratic Students' Alliance of Manipur (DESAM).
- 19. Eramdam Kanba Apunba Lup (EKAL)
- 20. Extra-judicial Execution Victim Families Association, Manipur (EEVFAM)

- 21. League of Indigenous People's Up-Liftment (LIPUL)
- 22. Loumi Sinmi Apun Lup (LOUSAL), Manipur
- 23. Students' Union of Kangleipak, (SUK).
- 24. Women Association for Sociao-Economic Development (WASEDEV)
- 25. All Manipur Social Reformation and Development Samaj (AMSRDS).
- 26. United Voluntary Youth Council. (UVYC)
- 27. Bridging Sustainable Development (BSD).
- 28. Rajkumar Panthoiren
- 29. All Lilong Anti- Drug Association (ALADA), Lilong Thoubal
- 30. Manipur Student's Federation (MSF)
- 31. Kanglepak Student's Association (KSA)
- 32. Premjit Thokchom, Sangai Youth Tobacco Free & Educational Organization.

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L. Someonidro, Provident, Latera Drow Desidention and Research Centry, Metry Langol

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K. Rossy Co. at Land Procedure Residentialism Confront Inhibital American Kromen Implicat

33. Sanoujam Dhiren Meetei, Ph. D. Pettigrew College.