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# **DRUG ABUSE CRISIS IN INDIA: A SOCIO-LEGAL STUDY**

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## **ABSTRACT:**

In India, drug addiction is a very serious issue that is having a negative impact on many facets of society. Due to the growing severity of the issue and shifting patterns in drug use, particularly among young people, it has recently drawn more attention. The use of drugs has given rise to a distinct subculture with its own standards, beliefs, and symbols. The health and happiness of an individual, their family, their neighborhood, and their society are all negatively impacted by this issue. The Narcotic Drugs and Psychotropic Substances Act (NDPS) of 1985 in India made drug trafficking, storage, and consumption crimes, making drug users criminal offenders as well as victims of the drugs they are abusing. This essay aims to address both the costs associated with criminalizing drug users and the burdens associated with reviewing them as drug misuse survivors. Additionally, it intends to focus on the rehabilitation of victims of drug abuse as a means of "requesting decrease" of medications with the aid of law enforcement agencies like the police, as also envisioned by the NDPS demonstration. The article shifts criminological theories from mental to deliberate decision-making, and it supports its claim with a continuous intercession model of the legal approval entities with network, victims, and guilty parties. The current study intends to investigate the varied implications of the drug addiction problem, which affects the masses physically, psychologically, economically, and socially. It also shows some potential remedies that family, community, friends, and society could use to eliminate this problem.

**KEYWORDS:** Drug addiction, drug abuse, psychotropic substance, jurisdiction, impact of drugs.

## INTRODUCTION:

Drug misuse is a major issue in India, impacting millions of people, particularly young people. According to a countrywide survey done by the countrywide Drug Dependence Treatment Centre, approximately 15.8 million adolescents aged 10 to 17 years in India are addicted to substances. According to the report, alcohol is the most often used psychoactive substance in India, after cannabis and opioids. The incidence of opioid misuse in India (2.06%) is more than four times that of Asia (0.46%) and more than three times that of the world (0.7%). According to the poll, three out of every four drug addicts do not obtain treatment<sup>1</sup>, showing a lack of sufficient policies and procedures to forestall and treat substance misuse problems. The poll also discovered a shift in psychoactive substance demand from traditional, low-potency plant-based goods like opium to more lethal and manufactured products like heroin. Individuals', families', and society's health, well-being, and productivity suffer as a result of drug usage. Physical and mental illnesses, diseases that are transmissible, criminal activity, assault, and social stigma can all result. Other issues, including as terrorist activity, revolt, and drug trafficking, can be exacerbated by drug misuse. Therefore, it is important to raise awareness and educate people about the harmful effects of drug abuse and provide them with effective prevention and treatment options. These drugs are being abused and sold illegally at alarming rates. If the sale of these chemicals, which provide addiction, isn't stopped, it will have catastrophic effects on both the people who use them now and those who will use them in the future. In the case of State of Punjab versus Baldev Singh, the Supreme Court observed that the misuse of medications is a social ill that highlights the negative effects of dealing in and abusing narcotics.

There is no doubt that the administration, exchange, and use of pharmaceuticals, which is a marvel and has become a plague, affects the State's financial strategies, taints the system, and jeopardizes a nation's potential future. It damages society and conveys a message of a cleared-out society. A social value that is hostile to cure value is illegal. One of the first global attempts to address the issue of medicine management across national borders was the United Nations Conventions Against Illicit Trafficking in Narcotic Drugs and Psychotropic Substances, which took place in Vienna, Austria in 1988. This Convention has the endorsement of the Indian Government".

## CAUSES BEHIND THE DRUG ABUSE IN INDIA:

There are several causes of drug abuse in India, which can be classified into biological, psychological, social, and environmental factors. Some of the causes are:

1. **Biological factors:** These comprise early drug use, mental health conditions, and a familial or genetic history of addiction. Certain individuals may be more susceptible to drug dependence because of their brain chemistry or hereditary characteristics. Bipolar illness, depression, anxiety, and post-traumatic stress disorder are among the mental health conditions that can make a person more susceptible to drug misuse. Early drug use can disrupt the brain's natural development and increase the risk of addiction in later life.
2. **Psychological factors:** These encompass low self-esteem, stress, absence of family engagement, peer pressure, and curiosity. Teenagers and young adults who use drugs often do so to fit in with their peers or try out new experiences. Peer pressure plays a big role in this. People who feel abandoned or alone and who turn to drugs for solace or escape may also suffer from a lack of family support or engagement. Since many turn to drugs as a coping mechanism for their feelings or difficulties, stress can either cause or exacerbate drug dependence. Drugs can provide persons with low self-esteem the confidence or reassurance they need when they feel insecure or undeserving. People who are exposed to media portrayals or glamorization of drug usage may become curious and decide to use drugs for the first time.
3. **Social factors:** These consist of cultural norms, violence, crime, unemployment, and illiteracy. People who are desperate or despondent due to poverty or unemployment may turn to drugs as a coping mechanism or means of survival. The availability of treatment choices and knowledge of the negative effects of drug usage might be impeded by illiteracy. People who have experienced trauma or terror as a result of violence and criminality may turn to drugs as a form of retaliation or defense. The acceptability or rejection of drug usage in certain societies or groups can be influenced by cultural norms. For instance, drug usage may be encouraged or made easier by certain religions or traditions, while it may be forbidden or discouraged by others.
4. **Environmental factors:** These comprise the drugs' quality, accessibility, and availability. The ease of access to drugs in a certain location or circumstance is referred to as availability. The affordability of medications for potential users is referred to as accessibility. Potency or purity of a substance is referred to as quality. These elements may have an impact on drug availability and demand as well as the risk of addiction. For

instance, drugs that are cheap, easily accessible, and potent may draw more users and lead to greater rates of addiction than those that are rare, costly, and weak.

These are some of the causes of drug abuse in India. However, it is important to note that drug abuse is a complex phenomenon that cannot be attributed to a single cause. Rather, it is the result of a combination of multiple factors that vary from person to person and from situation to situation. Therefore, it is essential to understand the individual and contextual factors that contribute to drug abuse in order to prevent and treat it effectively.

The 8 different types of substance abuse which are Alcohol, Cannabis, Opioids, Sedatives, Inhalants, Cocaine, Amphetamine Stimulants, Hallucinogens.

Drug misuse can have either short-term or long-term negative repercussions. It could have an effect that is direct or indirect. The kind of medications taken also affects the results. This is a list of the immediate impacts.

- a. Alteration in heart rate
- b. Variation in the blood pressure
- c. cardiac arrest
- d. Headache Psychosis
- e. shift in hunger

The long-term impacts are Heart conditions, Lung illness, Cancer, Hepatitis, AIDS.

### **REASON OF DRUG ABUSE IN INDIA:**

India is situated between the two major opium-producing regions of the world, the Golden Triangle (Burma, Thailand, Laos, and Vietnam) and the Golden Crescent (Iran, Afghanistan, and Pakistan). Adolescents and students use drugs as an escape from the stress of their jobs or schoolwork. It is common knowledge that a young person without a job becomes frustrated and turns to drugs. Peer pressure and other psychological elements, such as the allure and sheer enjoyment of it, can push teenagers to participate in risky behaviors that ultimately result in substance misuse. People in the lower socioeconomic category who cannot have an acceptable amount of food, took medicine to sleep or relax. The ISI, which is the main source of drugs, together with criminal organizations and drug cartels are the root causes of the drug problem. Drugs are being smuggled into the nation through the South Asian and African routes.

## IMPACT OF DRUG ABUSE:

Drug abuse is a serious and widespread problem that affects millions of people and society in many ways. Some of the major impacts of drug abuse are:

- **Health effects:** Drug abuse can cause various physical and mental health problems, such as organ damage, infections, overdose, and death. Drug abuse can also worsen existing mental health conditions or trigger new ones, such as depression, anxiety, psychosis, and suicidal thoughts. Drug abuse can also lead to dependence and withdrawal symptoms, which can be painful and dangerous.
- **Social effects:** Drug abuse can harm the relationships and well-being of individuals, families, and communities. Drug abuse can cause people to neglect their responsibilities, lose their jobs, drop out of school, or engage in criminal activities. Drug abuse can also increase the risk of violence, accidents, and injuries. Drug abuse can also create stigma and discrimination for people who use drugs and their loved ones.
- **Economic effects:** Drug abuse can impose a huge financial burden on society, as well as on individuals and families. Drug abuse can reduce the productivity and income of people who use drugs, as well as increase their health care and legal costs. Drug abuse can also affect the economy by reducing the labor force, increasing crime rates, and diverting resources from other sectors. According to a study by the United Nations Office on Drugs and Crime (UNODC), the global economic impact of drug abuse was estimated at \$1.4 trillion in 2015.

These are some of the major impacts of drug abuse on society. However, drug abuse is not an inevitable or hopeless situation. There are effective prevention and treatment options available for people who struggle with drug addiction.

## IMPACT ON FAMILIES:

Substance misuse may cause families to experience mental anguish, legal issues, relationship breakdown, and financial hardship. To escape the shame associated with their drug usage, addicts may withdraw from friends and family. They are more inclined to hang out with other drug or alcohol addicts, which spares them from having to address or explain their problems or any unfavorable opinions about their behavior.

Some people who struggle with addiction focus only on getting the money they need to feed their addiction and go out and get drugs or alcohol. This may make it more difficult for them to raise

their kids, could even lead to the loss of their parental rights, or cause them to break up connections with their parents, siblings, or partners. Above all, the effects of drug addiction on families mean that treating an addicted family member must be the first concern for those who love them.

## **DRUG ABUSE IN INDIA AND LAWS RELATED TO IT:**

As its very obvious to everyone that over the past few years drugs has been one of the biggest problems and limelight topic in the country which is definitely a worry about issue for India. the top two instances that are currently in front of us Two notable cases included the Bollywood actor Sushant Singh Rajput and his girlfriend Rhea Chakraborty. In the former, allegations of drugging were made, while in the latter, Aryan Khan, the son of Shah Rukh Khan, is charged with drug possession, consumption, and distribution. I mention this as an example because, unfortunately, there are countless cases like this where children are being abused by drugs and no one is even slightly aware of it. These issues are only brought to light due to the reputation of these characters. According to the definition provided by the World Health Organization, a drug is any substance, product, or item that is intended to be used to treat or explore physiological systems or heal illnesses for the benefit of the user.

The Drugs and Cosmetics Act of 1940 defined all medicines for internal or external use in humans or animals, as well as all substances intended to be used for or in the diagnosis, treatment, mitigation, or prevention of any disease or disorder in humans or animals, including preparations applied topically on humans to ward off insects like mosquitoes. Any substance that harms your body is considered a poison. It can be applied topically, ingested, inhaled, or absorbed via the skin. The World Health Organization (WHO) defines poison as "a chemical that, when introduced into or in contact with any part of a living human being, results in adverse consequence or fatality by impacting the system as a whole or the action or two together".

## **INDIAN LAWS THAT RELATE TO DRUGS AND POISONS:**

- 1. The Poison Act, 1919:** It was amended in 1958 and repealed in 1960. It controls the distribution of poisons both wholesale and retail, as well as the issuing of licenses. It covers all of India and regulates the import, sale, and possession of any particular poisons.
- 2. The Drugs Act, 1940**

3. **The Drugs and Cosmetics Act, 1940:** The 1964 and most current amendments to this Act were made in 2008. The import, manufacturing, distribution, and sale of cosmetics and other pharmaceuticals (allopathic, ayurveda, unani, siddha, etc.) are its areas of expertise. Pursuant to the Act, "every proprietary or patented medicinal preparation shall bear on the container label, an exact formula or an ingredient list." The amended Act has toughened the penalties for a number of offenses, such as selling fake prescription drugs, adulterating drugs and cosmetics, causing hazardous contamination, and more.
4. **The Drugs and Cosmetics Rules, 1945:** The primary focus of this legislation, which is an addition to the 1940 Drugs and Cosmetics Act, is the standard quality of drugs. It also retains authority over the "manufacture, sale, and distribution, of Drugs and Cosmetics." The Central Drugs Laboratory was founded in 1962 to aid in the advancement of the declaration of results from the inspection or experiment of drug samples to evaluate their features. Drug Control Laboratories have been established by individual states. If pharmaceuticals are produced, stocked, or sold, there are severe consequences for subpar or fraudulent products. There are now stricter guidelines for carrying out clinical trials for newer medications. Further, it was classified into 11 schedules.
5. **The Pharmacy Act, 1948:** The Pharmacy Council of India, which oversees regulating pharmacy education nationwide, was established by this legislation, which also provides for the regulation of the pharmacy profession. The pharmacy councils in each state oversee enrolling pharmacists. This act's goals are to guarantee that every state has a State Pharmacy Council for the registration of pharmacists and to restrict the compounding, manufacturing, and dispensing of medicines to registered pharmacists only—that is, pharmacists who have been duly registered and schooled in medical science.
6. **The Drugs Control Act, 1950:** This Act guides the manufacturer or business owner in setting the maximum price for each drug in addition to controlling the supply and disposition of drugs.
7. **The Drugs and Magic Remedies Act, 1954:** A piece of law known as the Drugs Magic Remedies (Objectionable Advertisements) Act of 1954 was passed. It became operative on April 1st, 1955. This Act regulates drug ads in India. It forbids and makes it illegal to advertise medications and treatments that claim to have magical properties.
8. **The Narcotics Drugs and Psychotropic Substance Act, 1985:** In order to "provide rigorous standards for the oversight and regulation of Narcotic Drugs and Psychotropic Substances events, as well as to bring together and reform legislation concerning narcotic drugs," the Narcotics Drugs and Psychotropic Substances (NDPS) Act was passed. "To

generate manufacture, grow, own, sell, transfer, purchase, or consume any Narcotic Drugs and Psychotropic Substances" is prohibited by law. The word "narcotic," which refers to a sleep aid in medicine, is not the same as "narcotic" in the legal meaning. Legally speaking, narcotic drugs include stimulants like cocaine, which is the exact opposite of a narcotic and is considered an opiate; cannabis, on the other hand, is not considered a narcotic. "Psychotropic substances" (MDMA, DMT, etc.) are drugs that alter consciousness, including LSD, phencyclidine, amphetamines, barbiturates, methaqualone, benzodiazepines, mescaline, psilocybin, and designer compounds. Special Courts were not established at first, but thanks to an amendment in 1989, the Government is now able to do so. ... the authority to consider all offenses under the NDPS Act will be vested in a single judge. The NDPS Act provides for a number of procedural protections, including Panchnama, Seizure reports, Seal reports, Proper arrest reports, etc. One of the main points of the NDPS Act is that it makes it illegal to possess narcotics in addition to consuming them. That means that even if you don't use the illegal narcotics that you have kept in your home, you could still face consequences under certain NDPS Act provisions. Drug use is illegal according to "Section 27 of the NDPS Act". The number of drugs involved in the case will determine how much of a punishment you receive under the NDPS Act. This is another crucial concept to grasp. There are two categories for drug quantities under the NDPS Act. There are two types of quantities: little and commercial. Your sentence will be harsher if you possess drugs in small quantities and harsher if you possess drugs in large quantities. To know what Small Quantity and Commercial Quantity is, NDPS Act itself provides details of the Quantity of each drug.

The length of the sentence might vary from six months to twenty years of hard labor.

Section 31A of the NDPS Act, which stipulates the death sentence in some rare circumstances or for repeat offenses, is another aspect of the law. Additionally, the NDPS Act prescribes certain unique provisions for those who are addicted. As previously mentioned, Section 27 of the NDPS Act makes drug use illegal. On the other hand, the accused will not face consequences if he declares his intention to participate in a de-addiction program and expresses his desire to do so. Addicts who volunteer for treatment are granted exemption from prosecution under Section 64A of the NDPS Act.

The following are the three major important laws that specifically deals with the criminalization and procedure for the usage of drugs and poisons wrongly.

9. **The Indian Penal Code (IPC), 1860:** following are the sections that deals accordingly-
- a. Section 176: Failure to provide notice or information to a public servant by a person who is legally obligated to do so. Doctors are required to report all cases of homicidal poisoning to the police; if they do not, they will be prosecuted.
  - b. Section 193: False evidence is punishable. False information about a poisoning instance is penalized by law.
  - c. Section 201: It is a capital offence to cause the deletion of evidence of an offence or to provide false information to a screen offender.
  - d. Section 202: Intentional failure to report an offence by a person who is obligated to do so. Intentional concealment of facts concerning a poisoning case treated by him is punishable.
  - e. Section 272: Adulteration of food or drink intended for sale.
  - f. Section 273: Sale of noxious food or drink.
  - g. Section 274: Adulteration of drugs.
  - h. Section 275: Sale of adulterated drugs.
  - i. Section 276: Sale of drug as a different drug or preparation.
  - j. Section 284: Negligent conduct with respect to poisonous substances.
  - k. Section 299: Culpable homicide that was caused through the consumption of poisonous substances.
  - l. Section 300: murder caused by using poisonous substances.
  - m. Section 302: Punishment for murder.
  - n. Section 306: Abetment of suicide.
  - o. Section 307: Attempt to murder.
  - p. Section 309: Attempt to commit suicide.
  - q. Section 304 A: Causing death by negligence.
  - r. Section 324: Voluntarily causing hurt by dangerous weapons or means.
  - s. Section 326: Voluntarily bring about severe hurt by dangerous weapons or other resources.
  - t. Section 326 A: Causing grievous hurt by the use of acid.
  - u. Section 326 B: Throwing or attempting to throw acid.
  - v. Section 328: Causing harm to others using poison, etc., with the aim to commit an offence.
10. **The Criminal Procedure Code (CrPC), 1973:** Section 39 asks the public to report specific offenses. Anyone who knows of an offense being committed or plans to commit one should notify the closest magistrate or police station. Section 40 describes the

obligation to prepare a specific report for any law enforcement official involved in village-related affairs. Section 175 explains authority to Call People: The police officer in charge of the station or other law enforcement officers are authorized to call the offender.

11. **The Indian Evidence Act (IEA), 1872:** "When the patient's death is imminent and the magistrate's arrival is delayed," a doctor may record a dying declaration under the Indian Evidence Act (IEA), Section 32, Clause 1.
12. **Hemp drug commission 1894:** In response to a request made in the corridor regarding the methodology of a Commission to investigate the age and use of hemp-sedates in India, the Secretary of State for India expended his energy in asking the Government of India to form a Commission to investigate the development of the hemp plant in Bengal, the procurement of drugs derived from it, the trade of those drugs, the impact of their use on the general well-being and social conditions of all people, and the longing limit of prohibiting the advancement of the plant and the freedom of ganja and cooperated drugs. The Indian government established a commission on hemp drugs in 1893, as needs. In their report, the Hemp Drug Commission stated that hemp plants were spreading uncontrollably over the Himalayas, from Kashmir to the remarkable region of Assam's east. It joins a narrow division by going down the southern slopes of the mountains and into the fields of the Ganges and Punjab.

### **NARCOTIC CONTROL BUREAU:**

The Narcotics Control Bureau is the highest authority in India for regulating drug trafficking; it was founded in 1986 in accordance with the NDPS Act. The NCB has its headquarters in New Delhi, while its zonal offices are located in Varanasi, Mumbai, Kolkata, and Chennai.

The following legal authorities also control drug abuse:

- Drug Enforcement Bureau.
- The Central Bureau of Drugs.
- Bureau of Narcotic Control.
- The Revenue Intelligence Directorate.
- The FBI's central office.
- Commission on Customs.
- Force for Border Security.
- Police officers.

## **DRUGS PRICE CONTROL ORDER (DCPO):**

In order to control drug costs in accordance with Section 3 of the Essential Commodities Act, 1955, the Indian government issued the Drugs Price Control Order, 1995. Among other things, the order contains a list of drugs that are subject to price controls, protocols for setting medication prices, strategies for putting government-set prices into effect, fines for violating DCPO clauses, and powers granted under the NPPA. Later, there was notification of the Drugs Price Control Order (DCPO) 2013.

## **JUDICIAL APPROACH:**

In India, the court is crucial to the fight against drug misuse. By interpreting and applying the law as it is contained in statutory enactments, judges help to prevent drug usage. Drug courts seek to reduce drug-related illegal conduct and prevent the abuse of alcohol and other drugs. Sobriety and accountability are the two key themes of the drug court legal system. Drug courts are a subset of problem-solving courts that provide drug offenders with an alternative to jail time. With regard to court monitoring, treatment, testing, incentives, sanctions, and social services, they offer a thorough and integrated strategy. Drug courts have been shown to enhance public health and safety while lowering drug usage, recidivism, and criminal justice expenses.

Although the Narcotic Drugs and Psychotropic Substances Act (NDPS Act) of 1985 does not have a separate drug court system in India, certain of its provisions permit the creation of special courts for the swift trial of offenses covered by the Act. Additionally, the NDPS Act shields drug addicts who willingly seek treatment and recovery from legal action. However, due to a number of issues including a lack of infrastructure, resources, coordination, and monitoring, these provisions are not exploited or implemented widely in India. In order to deal with people who are struggling with drug abuse and give them with the proper therapy while also holding them accountable for their acts, drug courts must be established in India. This would necessitate a mindset change toward drug abuse and addiction from one of punishment to therapy. Additionally, tight cooperation between the legislative, the executive branch, the judiciary, civil society, and the international community would be necessary.

According to the latest data published by the National Crime Records Bureau (NCRB), the number of cases registered under the Narcotic Drugs and Psychotropic Substances (NDPS) Act in India during 2019-2021 are as follows:

- 2019: 74,620 cases
- 2020: 67,214 cases (provisional)
- 2021: 43,179 cases (provisional, till September)

Several noteworthy instances of drug abuse in India include:

1. The drug case in Bollywood: The Narcotics Control Bureau (NCB) is now looking into claims that a number of Bollywood celebrities and personalities have been involved in drug use and acquisition. Actor Sushant Singh Rajput's death in June 2020 set off the legal action, since it resulted in the discovery of drug-related WhatsApp conversations between his colleagues. In relation to this case, the NCB has detained and questioned a number of people, including actors Sara Ali Khan, Arjun Rampal, Deepika Padukone, Rhea Chakraborty, and Shraddha Kapoor.
2. The Punjab drug case: It refers to a sequence of inquiries conducted by several entities about the widespread drug misuse and smuggling in Punjab, a state that is seen as severely impacted by the drug epidemic in India. The case has revealed the connections that enable and benefit from the illegal drug trade between law enforcement, legislators, bureaucrats, and drug dealers. The case has also brought attention to the negative social and health effects that drug addiction has on Punjab's youth and populace as a whole.
3. The allegation of the smuggling of gold worth over Rs 100 crore through diplomatic channels at the Thiruvananthapuram airport in Kerala is known as the Kerala gold smuggling case. Following the discovery of the case by the Customs department in July 2020, a number of individuals, including former staff members of the UAE consulate in Kerala, were taken into custody. Due to the involvement of some of the accused in both drug trafficking and gold smuggling, the investigation has also exposed connections between the two illegal operations.

Some other leading cases are:

1. In the case of **State of Punjab v. Balbir Singh**: The case was decided by the Supreme Court of India on March 1, 1994. The primary legislation in India addressing drug misuse and illicit trafficking is the Narcotic Drugs and Psychotropic Substances Act, 1985 (NDPS Act), which was interpreted and used in this instance. The primary question was whether any search or arrest conducted in violation of the NDPS Act's requirements becomes unlawful and, as a result, invalidates the conviction. The court ruled that all cases involving drug offenses must adhere to the necessary requirements of the NDPS Act. The

court also observed that the NDPS Act is a special and stringent law that requires strict compliance and interpretation, as it deals with a serious social problem that affects the health and welfare of the people and the nation.

2. In the case of **E. Michael Raj v. Officer of Intelligence**: The Indian Supreme Court rendered a decision in this matter on May 8, 2008. In order to determine the appropriate sentence, the case concerned the interpretation and implementation of Section 2 (viiiia) of the NDPS Act, which defines "small quantity" and "commercial quantity" of drugs. The court decided that only the actual content or percentage of purity of the offending drug should be taken into account when deciding whether a certain quantity of drug is small or commercial, rather than the weight of the complete mixture or substance containing such drug.
3. In the case of **State of Uttarakhand v. Arif Khan @ Agha Khan**: On September 5, 2019, the Indian Supreme Court rendered a decision in this case. The case concerned the application and interpretation of Section 37 of the NDPS Act, which places strict requirements on the granting of bail to an individual charged with a narcotics offense involving a commercial quantity. The court determined that, given the serious threat that drug misuse and trafficking pose to society, Section 37 is a justifiable restriction on the right to personal liberty and does not violate either Article 21 or Article 14 of the Constitution. The court further found that Section 37 just raises the bar for persuading the judge that there are good reasons to believe the accused is innocent and unlikely to commit any crimes while out on bond, not that it forbids bail entirely.
4. The Supreme Court of India rendered a decision in the case of **Tofan Singh v. State of Tamil Nadu** on October 29, 2020. The case concerned the meaning and implementation of Section 67 of the NDPS Act, which gives any officer authorized by the federal or state government the right to request information from anyone in order to confirm that the Act's provisions have not been broken. The court ruled that confessions made by someone accused of a crime under the NDPS Act cannot be recorded by an officer under Section 67, and that these statements cannot be used as evidence in an Act-governed trial. The court further decided that any statement made under Section 67 is not considered a statement made to a police official for the purposes of Section 25 of the Evidence Act and is not subject to the Code of Criminal Procedure's Section 162 bar.
5. In the case of **Union of India v. Rajendra Nair**: On March 5, 2019, the Indian Supreme Court rendered a decision in this matter. In this instance, Section 32A of the NDPS Act—which states that no sentence granted under this Act may be suspended, remitted, or

commuted—was to be interpreted and applied. According to the court, Section 32A does not prevent the President or the Governor from exercising their authority under Article 72 or Article 161 of the Constitution to pardon, reprieve, respite, or remit penalty for any individual found guilty under this Act. The court further declared that Section 32A does not impair the appellate or revisional courts' authority to lawfully suspend, remit, or commute a sentence imposed under this Act.

6. In the case of **State v. Kishan Lal**: On July 31, 2018, the Delhi High Court rendered a decision in this matter. Section 42 of the NDPS Act, which mandates that any officer who gets information about an offence under this Act record it in writing and send a copy thereof to his immediate official superior within such time as may be prescribed, was interpreted and applied in this case. The court decided that because Section 42 is required, breaking it would invalidate the conviction and punishment and make the prosecution unconstitutional as a whole. The court further decided that Section 42 covers all Act violations, regardless of whether they take place in public or private spaces.

## **CRITICISMS OF THE NDPS ACT AND ITS IMPLEMENTATION**

There are some criticisms of the NDPS Act and its implementation. Some of them are:

- The NDPS Act does not distinguish between hard and soft drugs and imposes the same penalties for both kinds of drugs. This may encourage the drug dealers to move towards supplying hard drugs, which have a higher profit margin and a higher potential for harm.
- The NDPS Act does not provide adequate provisions for harm reduction, drug substitution, and needle exchange programs, which are essential for preventing the spread of HIV/AIDS and other infections among drug users.
- The NDPS Act does not recognize the medical and scientific use of cannabis, which has been proven to have therapeutic benefits for various conditions such as chronic pain, epilepsy, glaucoma, and cancer. The ban on cannabis also affects the livelihood of farmers who cultivate it for industrial and religious purposes.
- The NDPS Act does not address the root causes of drug abuse, such as poverty, unemployment, illiteracy, violence, and social stigma. It also does not provide adequate rehabilitation and treatment facilities for drug addicts, who are often treated as criminals rather than patients.

- The implementation of the NDPS Act is marred by corruption, inefficiency, and human rights violations. There have been many cases of false arrests, illegal searches, custodial torture, extrajudicial killings, and tampering of evidence by the police and other authorities involved in drug enforcement. There have also been instances of harassment and discrimination against drug users by society and the judiciary.

## **THE WAR AGAINST DRUG ABUSE IN INDIA: CONTEMPORARY PROGRESS**

Launched on August 15, 2020, the Nasha Mukta Bharat Abhiyaan (NMBA) is a flagship program of the Ministry of Social Justice & Empowerment in India. It seeks to raise awareness of the detrimental impacts of juvenile substance usage, with a particular emphasis on colleges, universities, schools, and community outreach. The program, which operates in 372 districts across the nation, entails a range of initiatives, including capacity building programs for service providers, counseling and treatment services in hospitals and rehabilitation centers, and more.

The NMBA concentrates on 272 districts spread over 32 States and Union Territories that have been determined to be the most susceptible to drug use nationwide. The Narcotics Control Bureau (NCB) and the results of the Comprehensive National Survey were used to identify these vulnerable districts. Over 500 volunteer organizations nationwide are involved in the initiative, which is run by the National Action Plan for Drug Demand Reduction (NAPDDR) scheme and receives financial support.

The Nasha Mukta Bharat Abhiyaan website offers comprehensive details about the program and its undertakings, as well as glimpses through photo and video galleries, IEC resource material, and details on the institutions established by the Ministry to curb drug demand. Through a variety of initiatives, including awareness-raising campaigns, a focus on higher education, outreach to the community, identification of dependent populations, a concentration on counseling and treatment facilities in geotagged hospitals and rehabilitation centers, and capacity-building programs for service providers, the program aims to raise public awareness of substance abuse. Below are the three-pronged strategies and key elements of Nasha Mukta Bharat.

The three main strategies that Nasha Mukta Bharat will concentrate on are as follows.

- Care provided by the Health Departments.

- Outreach and Education by the Social Justice Drug Bureau
- The primary elements of the Action Plan 2020–21 for Nasha Mukta Bharat

Programs for raising awareness are offered by universities, colleges, and educational organizations.

- Increasing service providers' capability
- Pay attention to the treatment facilities found in hospitals.
- Determining the dependent population and engaging the community.

The following are a few other steps the government has made to combat drug usage in India:

- Under the "Assistance to States for Narcotics Control" program, the Ministry of Home Affairs is offering financial support to states and union territories so they can bolster their law enforcement capacities and fight the illegal trafficking of psychotropic and narcotic narcotics.
- "National Programme for Prevention and Control of Cancer, Diabetes, Cardiovascular Diseases and Stroke (NPCDCS)" is a program that the Ministry of Health and Family Welfare launched to offer preventive, promotive, curative, and rehabilitative services for non-communicable diseases, including drug abuse disorders, at different levels of health care.
- The National Initiative for School Heads' and Teachers' Holistic Advancement (NISHTHA) program was introduced by the Ministry of Education to give training and capacity building for school heads and teachers on a range of topics related to school education, such as prevention of substance abuse, guidance and counseling, and life skills education.
- The "National Programme for Youth and Adolescent Development (NPYAD)" program was introduced by the Ministry of Youth Affairs and Sports with the aim of preventing youth and adolescents from engaging in anti-social behaviors like drug abuse and giving them opportunities to grow as individuals and as leaders.
- With the help of various interventions like child welfare committees, child protection units, childcare institutions, etc., the Ministry of Women and Child Development has launched the "Integrated Child Protection Scheme (ICPS)" to give children in need of care and protection—including those impacted by drug abuse—a safe and secure environment.

## **NASHA MukT BHARAT ABHIYAAN EFFICTIVENESS SO FAR:**

According to the official website of the NMBA, the program has been effective in reaching out to the masses and spreading awareness about substance abuse through various activities. Some of the achievements of the NMBA are-

- Till now, through the various activities undertaken for the Abhiyaan, 1.4+ crore people have been reached out so far in the identified districts.
- Over forty-five thousand young people have actively engaged in Abhiyaan2's activities.
- The invaluable support of over 29.5 lakh women has enabled the Anganwadi & ASHA Workers, ANMs, Mahila Mandals, and Women SHGs to reach out to a wider community.
- Events, competitions, and workshops have been held at over 55,000 educational institutions, including schools and colleges, reaching over 30 lakh students nationwide thus far.
- The Abhiyaan2 has a robust network of over 8,000 Master Volunteers that are actively involved.
- The Ministry launched a mobile application for the Nasha MukT Bharat Abhiyaan in order to collect information about the activities taking place on the ground.
- Numerous online events, including expert panel discussions, panel discussions with DCs and DMs, online competitions, and more, have been planned with the support of the Ministry's top officials, the States and Districts, subject matter and domain experts from various fields, professionals dealing with substance abuse, and young people in general.

Thus, it can be concluded from these data and facts that the Nasha MukT Bharat Abhiyaan has been successful in curbing drug consumption in India thus far. To ensure better coordination and monitoring of the operations, as well as to include new districts and areas, there is still a great deal of room for development and program growth. The core reasons of drug misuse, which include violence, illiteracy, poverty, unemployment, and social stigma, must also be addressed by the program. Addicts on drugs, who are frequently treated more like criminals than like patients, must also have access to proper rehabilitation and treatment facilities through the program. Additional NGOs, media outlets, international agencies, and civil society organizations must be involved in the program's execution and assessment.

## CONCLUSION:

To combat the threat, it is underlined that preventive, punitive, and curative actions are required. The complexity of the issue, which has broad social, economic, and political ramifications, must be understood immediately. Since punitive measures alone will not be sufficient to eradicate the drug problem in the region, it is imperative that all of the contributing elements be addressed. The nation's drug epicenters are now large cities. We should all ask ourselves how we can stop this rather than why people are becoming addicted or why India is turning into a drug hub. We have several laws and acts to combat the drug problem. Recognizing the medications that doctors prescribe is important for everyone, not just physicians and pharmacists. Being aware of it can help us avoid being careless because we are unaware of these regulations and also identify sensible medico-legal perspectives related to medications and poisons. Everybody is obliged to abide by the guidelines that legislation and laws offer for us. Let's stop drug and poison misuse before it totally destroys us, as we are all aware of the saying, "Prevention is Better than Cure". Some recommendations on the part of the author are:

1. The proposals in the NDPS Act that propose punishments must be reexamined in light of the opposing strategy. A statement that is open-minded does not always address matters of importance.
2. The state is under guarded orders to assure early starters in order to quickly build unparalleled courts in each state. In this approach, the required steps should be combined to create an adequate number of historically significant courts in every state across the nation as soon as possible.
3. To use various media channels and campaigns to raise awareness and educate the public on the detrimental impacts of alcoholism and drug abuse on the individual, the family, the workplace, and society in general.
4. To offer a comprehensive range of community-based services for addicts undergoing Whole Person Recovery (WPR), including identification, motivation, counseling, de-addiction, aftercare, and rehabilitation.
5. To mitigate the effects of drug and alcohol dependence on the individual, the family, and society at large by implementing social welfare schemes and programs.
6. To support evidence-based policymaking and implementation by facilitating research, training, documentation, and the gathering of pertinent data.
7. To improve the ability and cooperation of the enforcement authorities in order to guarantee the correct application of the NDPS Act and other relevant legislation.

8. to differentiate between soft and strong drugs and apply distinct punishments for each type of drug.
9. To adequately fund programs for drug substitution, harm reduction, and needle exchanges; these measures are critical to stopping the spread of HIV/AIDS and other diseases among drug users.
10. To acknowledge the scientific and medicinal applications of cannabis, which has been shown to provide relief from a number of ailments, including cancer, glaucoma, epilepsy, and chronic pain.
11. To increase the number of media outlets, international organizations, NGOs, and civil society groups involved in India's efforts to combat and prevent drug usage

In India, drug misuse is a severe and pervasive issue that affects millions of people, particularly the younger generation. It has significant effects on people's productivity, well-being, and general health as well as that of families and society as a whole. Additionally, it can exacerbate existing issues like trafficking, terrorism, and insurgencies.

The Narcotic Drugs and Psychotropic Substances Act, 1985 (NDPS Act) is the primary legislation pertaining to drug abuse and illicit trafficking in India. It governs the import, export, transit, manufacturing, possession, sale, purchase, transportation, storage, and consumption of narcotic drugs and psychotropic substances within the country. Additionally, it specifies the punishments for a number of offenses pertaining to drug misuse and trafficking. The availability of medical services and the need for therapy, however, differ significantly. The urgent need is a therapy program at the federal level. Additionally, we require additional government-funded inpatient treatment facilities for addiction as well as outpatient clinics with appropriate access to medications, physicians, and psychiatrists.

One of the helpful things is to involve more people on this issue by: -

1. Using various media channels and campaigns, one method to involve more people is to raise awareness and educate them about the negative impacts of substance misuse and alcoholism on the person, the family, the workplace, and society at large. This can aid in the understanding of drug abuse's risk factors, effects, and preventative measures. Additionally, it might inspire individuals to look for support or assistance from those who are battling addiction.

2. Offering the full spectrum of community-based services for addicts' identification, motivation, counseling, de-addiction, aftercare, and rehabilitation for Whole Person Recovery (WPR) is another strategy to include more people. This can make it easier for consumers to get access to high-quality, reasonably priced care and treatment services that are customized to meet their requirements. It can also assist them in leading fruitful lives and reintegrating into society.
3. Facilitating research, training, documentation, and the gathering of pertinent data to support the development and application of evidence-based policy is a third strategy to involve more people. By doing this, people may contribute to the creation and sharing of best practices and knowledge regarding the prevention and treatment of drug abuse. They can use it to track and assess the results and efficiency of different programs and interventions.
4. Adequate funding for harm reduction, drug substitution, and needle exchange programs—all crucial for stopping the spread of HIV/AIDS and other diseases among drug users—is a fourth strategy to engage more people. This can lessen the risks drug use poses to one's health. Additionally, it can facilitate their access to additional social and medical assistance.
5. Differentiating between hard and soft drugs and enforcing different sanctions for each is a fifth strategy to involve more people. This can assist people in identifying the varying degrees of harm and risk for addiction associated with different drugs. It can also assist them in taking a more logical and compassionate stance on drug laws and policies.

Henceforth, Pharmaceutical abuse and management of medications, once a common marvel, have turned into a pandemic that threatens humankind's future, the State's budget, and the system itself. The overuse and illegal management of these drugs is spreading at an alarming rate. If the man's addiction to these drugs isn't curbed, it will bring about an unparalleled disaster for both the current and the future selves. Abuse has become the most significant problem for individuals, families, and society as a whole. Fear mongering is fueled by the illegal money generated by medication management. The money was used by the Dread Monger Social Affairs to fund mental activist operations and buy firearms. It has a devastating effect on the nation's future in addition to the State's financial decisions.