

A study of administration of drug de-addiction and rehabilitation centres in Manipur, India

Dr. Avakuo Vemai

Former Research Scholar in Political Science, SunRise University Campus, Bagar Rajput, Alwar, Rajasthan
301028

Corresponding author Email: avakuovemai312@gmail.com

Abstract: Drug addiction is one of the phenomenons of human pollution in society, which is an alarming situation in the state of Manipur. Not only the young boys and girls, many matured and distinguish persons of social status groups in the adult members of the society had also been found addicted day by day. Due to drug addiction and alcoholism, many precious life of the young and adult have been killed during last three decades and also the victims of HIV/AIDS have increasing in an alarming rate in the state. Many wives, children and persons have been becoming living death. Drug addiction is one of the phenomenons of human pollution in society, which is an alarming situation in the state of Manipur. Not only the young boys and girls, many matured and distinguish persons of social status groups in the adult members of the society had also been found addicted day by day. Due to drug addiction and alcoholism, many precious life of the young and adult have been killed during last three decades and also the victims of HIV/AIDS have increasing in an alarming rate in the state. Many wives, children and persons have been becoming living death. For controlling these situations many social activists, social reformers and ONGs have made various attempts to eradicate the problems. They also establish many de-addiction centers for drug addition in the state under the funding of central government. Here, the investigator tried to find out strong and weak points of the different de-addiction centers that how far these centers tried to normalize the lives of addicted persons. And it also tried to find out some of the remedial measures to improve the functions of the said centers for the welfare of the state as well as nation

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Introduction:

Drug addiction or abuse is a global problem. No Country is free it Hundreds and Thousands of young men and girls are today victims of the evils and curs of drugs addiction. The worst form of drug addiction or abuse is Heroin addiction. There are innumerable causes for drug addiction". Some of them are Socio-economic condition and environment, psycho physical behavior problem including frustration, indiscipline acts, personality disintegration, low mentality, handicapped, anxiety, tension, conflicts, psycho neuroses etc. Using of drugs after starts out of Curiosity or to have pleasant enjoyment. People are generally induced to drug addiction through their friends or peer groups. Often these are initially taken to overcome boredom, depression and fatigue. Parental negligence, frustration in life, broken family unemployment may also lead to the initial use of drugs and thereafter its easy availability makes the user dependent on its. The world Health Organization Expert committee (1969) defines, Drug addiction as a state of periodic or chronic intoxication produced by repeated consumption

of a natural or synthetic drug. Justification of the study: Drug addiction is one of the phenomenons of human pollution in society which is an alarming situation in the state of Manipur. Not only the young boys and girls, many matured persons, distinguish persons, social status groups in the adult members of the society had also been found addicted day-by-day. Due to drug addiction and alcohol many precious lives of young and adults have been killed during last three decades and the Victims of HIV/ AIDS have been increasing in an alarming rate in the state. Many innocent wives, children and persons are becoming living death. For controlling this situation many social activists, social reformers, and NGOs have made various attempts to eradicate the problem. They also established camps and Centers for drug de-addiction in the state. But it is very late to realize by the public in general that how far the drug de-addiction and rehabilitation Centers have taken steps to control, and provided treatment to drug addicts effectively or not. Considering this view points, the investigator of the proposed study would like to make a humble attempt to investigate the

situation and working nature of the drug deaddiction and rehabilitation Centers of Manipur and how far they are contributed to the reduction of drug related problems in the state. In Manipur, drug use issues emerge out since early 1980. Mass arrest of drug users and incarcerate them as the best tool in the response to drug use prevention and intervention. State is very close to drug production site i.e. Golden Triangle. Not only Manipur become a major drug routes but also a transit point that are transported to the rest of the world. Drug route associated with wide roped spread drug use. No direct supervision to the NGOs who are running centers along with non availability of drug policy as well as lack of state monitoring as cited below to bring about an understanding while imitating different steps for streamlining drug use responses and develop effective and update approaches to treatment, uniformly and consistent use of standard of services.

There are 20 Drug treatment centers in Manipur (Social Welfare Director) currently running drug treatment with the support from MOSJE. And many more NGOs are also implementing 100 programs in the state which is supported by Manipur state AIDS control society. After 19/20 years of service delivery to prevent and control drug use, still we experienced unsatisfactory results contrary to the expected outcome 13 Narcotics Anonymous meetings congregates about 250-300 manage users daily on an average to manage drug free lives through sharing personal experiences and caring among peers. Maximum number of the meeting attendees is the products from treatment centers. However, if we consider un-reach population and those drop out population, we presumably understand that there is a large gap not only in treatment slot and service provision but also the system itself. But from 2001 onwards, Regional Resource Training Centre North East was given staffs of the NGOs who are working in the drug program. Most of the rehabilitation centers working efficiently and effectively in their respective field and at one time in these 20 centers about 400 clients are given treatment. The recovery rate of this client is 45% to 50% considering the range of 3 to 4 years period. At the same time there are various self help groups formed which helps in sustaining physically mentally and financially. It is high time to look after that whether the rehabilitation centres are doing honestly or not for the welfare

of society. And to find out the strong and weak points of the two rehabilitation centres, which will help to find out the remedial measures for further improvements.

Review of Related Literature :

Some of the related studies are given below: (1) Joyce Ditzler (1976): Rehabilitation for alcoholics in New York City. The findings were: (i) Nurses played important role in finding and treating the alcoholic persons. (ii) The detoxification unit is disrupted by staff resistance and patient manipulation. (iii) The need of coordination among the nurses to identify the problem of patient. (iv) The recovery of alcoholism is ongoing process. (2) Lemercinier and Houtart (1977): Rehabilitation of prostitutes and drug Addicts. The Main findings: (i) with spread of urbanization, the problem of drug and prostitution increases in Vietnam, (ii) Drugs affected all the sections of social groups. (iii) There was a great impact in the problems of drugs in the Vietnam because of re-education to 10,000 women at 92 centers. (iii) Complete cure of drugs was possible due to professional education was given to them, which help them to normalize. (iv) Lastly due the success of reeducation centres, there was great demand of such education in Vietnam. (v) Women were able to manage their family from the money that they earn from the centers. (3) Farrell and Gerada (1997): Drug Misusers: Whose business it is ?. shared care work well, but, Drug misusers still need specialist services. The findings: (i) There was increasing of illicit drug dependence in Britain, but, Britain manages to contain HIV through provision of community services and promotion of needle exchanges. (ii) Britain has maintained one the lowest HIV sero-prevalence rate among the injecting drug users globally. (iii) There is also importance of primary care services for those who uses the drugs wrongly. (iv) There is also importance of motivational interviewing, relapse prevention, detoxification, health promotion and residential rehabilitation. (4) Fleming (1998): Providing services for drug misusers: What lessons from America. The findings (1) New York has the largest number of intravenous drug users in the USA. (ii) There is high prevalence of infection from human immune deficiency virus (HIV) among the group. (iii) The increase of adolescent drug users in USA and there is need for services for tackling the problems. (iv) The behavioral therapy was so

helpful to control the problem. (v) The drug users were no mixed with drug users and they have promise not use the drug again in front of children. (v) There is also significance of community service for the controlling the problems of drug addiction. The above related studies were helpful to develop the methodology of the present study. Such topic was not conducted by any one before as it is new areas of study in Manipur. The study tried to find out the causes of drug addiction and remedy with help of rehabilitation centres in Manipur. The study tries to find out that whether the rehabilitation centres are doing nice services and they achieved a great success.

Annual Report of Shine de-Addiction cum rehabilitation centre-2012.

The new life rehabilitation centre, Churachandpur started functioning in 4th, April 1993 under the wide supervision of P. Lokendra Singh, President, Centre for Mental Hygiene, with the financial assistance from the Ministry of Social Justice and Empowerment, Govt. of India, New Delhi, under the Department of Social Welfare, Government of Manipur. It had registered with the societies registration act XXI of 1860 in the year 1993. The Centre is a multi-disciplinary comprehensive service to create a social awareness to fight against the evils of abuse of alcohol and chemical substances by giving health care. Detoxification, Individual counseling, Group Counseling, Input session, Family re-integration, Group therapy etc. during rehabilitation period and followed by after care services for maintaining close contact with individuals and family so as to prevent from relapse by encouraging forming a Self Help Group under the principles of Narcotics Anonymous.

Overview of drug abuse issues in Manipur

Manipur has long been at the epicenter of the drug abuse crisis in the northeastern region of India. The state's proximity to the Golden Triangle, a region notorious for the production and trafficking of illicit drugs, has contributed significantly to the proliferation of drug abuse in the region. The easy availability of various narcotic substances, such as heroin, methamphetamine, and pharmaceutical opioids, has fueled the drug abuse crisis in Manipur. The drug abuse problem in Manipur has had far-reaching consequences, both at the individual and

societal levels. The widespread use of injectable drugs has led to the rapid spread of infectious diseases like HIV/AIDS, hepatitis, and tuberculosis among the drug-using population. This, in turn, has placed a significant burden on the state's healthcare system, which is already strained by limited resources and infrastructure. The drug abuse crisis has also had a profound impact on the social and economic fabric of Manipur. Increased crime rates, family breakdown, and social instability have been some of the key consequences of the drug abuse problem. The economic implications are equally alarming, with the state incurring substantial costs in terms of healthcare, law enforcement, and lost productivity. The issue of drug abuse in Manipur has become a complex and multifaceted challenge, requiring a comprehensive and coordinated response from various stakeholders, including the government, healthcare professionals, law enforcement agencies, and civil society organizations. Despite the efforts made by the state and central governments to address the problem, the drug abuse crisis in Manipur continues to persist, posing a significant threat to the wellbeing and development of the youth population.

Global scenario of drug abuse among youth

Drug abuse among the youth population has become a global concern, with far-reaching consequences on individual and societal wellbeing. According to the United Nations Office on Drugs and Crime (UNODC), the number of people aged 15-64 who used drugs at least once in 2020 is estimated to be around 275 million, with a significant proportion being young people (UNODC, 2022). The global drug abuse crisis has been driven by several factors, including the availability and accessibility of various psychoactive substances, economic and social vulnerabilities, and the influence of peer networks and media. The World Health Organization (WHO) has identified the youth population as particularly susceptible to drug abuse, with factors such as academic pressure, mental health issues, and experimentation with risky behaviors contributing to the problem (WHO, 2018). The impact of drug abuse on the youth is multifaceted, ranging from physical and mental health consequences to social and economic challenges. The use of certain drugs, such as opioids and stimulants, can lead to the development of substance use disorders, which

can significantly impair an individual's cognitive and psychosocial functioning. Additionally, the long-term effects of drug abuse, including the potential for overdose and the transmission of infectious diseases, can have devastating consequences on the lives of young people and their communities (UNODC, 2020). To address the global drug abuse crisis among the youth, governments, international organizations, and civil society have implemented various strategies, including prevention programs, treatment and rehabilitation services, and harm reduction initiatives. However, the effectiveness of these interventions varies widely, and the need for more comprehensive and evidence-based approaches remains critical (WHO, 2018).

Conclusion :

Considering the present Scenario of the issues relating drugs, it is the high time that we have a state drug policy and for the sustainability of the program. We need to look after the programmes again run by the centres under the funding of central Government through the concerned department of state. At the same time, the people from various sectors should involve to reduce the problems relating to drugs. It is not only the duties and responsibilities of the various NGOs who are responding in the issues. The main goal of rehabilitation centres - "A sustainable whole person recovery for a good society".

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