

**GOVERNMENT OF INDIA
MINISTRY OF HEALTH & FAMILY WELFARE
DEPARTMENT OF HEALTH AND FAMILY WELFARE**

**LOK SABHA
ADMITTED UNSTARRED QUESTION NO. 616
TO BE ANSWERED ON 09.12.2022**

DRUG ADDICTION

**616. SHRI NARANBHAI KACHHADIYA:
SHRI PARBATBHAI SAVABHAI PATEL:**

Will the Minister of **HEALTH AND FAMILY WELFARE** be pleased to state:

(a) whether the Government is aware of the fact that the drug addiction cases have been increasing in the country, if so, the details thereof and the reasons therefor; and

(b) the details of the effective steps taken/being taken by the Government to check the increasing cases of drug addiction?

**ANSWER
THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND
FAMILY WELFARE
(DR. BHARATI PRAVIN PAWAR)**

(a) As informed by Ministry of Social Justice & Empowerment there has been a change in the pattern of substance abuse as reflected in the National survey on Extent, Pattern and Trends of Substance Use done in 2004, and in the Comprehensive National Survey on Extent and Pattern of Substance Use in India conducted in 2018.

As per the Comprehensive National Survey on Extent and Pattern of Substance Use in India conducted in 2018, the details of drug abuse are as under:

S.No.	Name of the Substance	Estimated no. of users (age 10-17 years)	Estimated no. of users (age 18-75 years)
1.	Alcohol	30,00,000	15,01,16,000
2.	Cannabis	20,00,000	2,90,18,000
3.	Opioids	40,00,000	1,86,44,000
4.	Sedatives	20,00,000	1,05,80,000
5.	Inhalants	30,00,000	51,25,000
6.	Cocaine	2,00,000	9,40,000
7.	Amphetamines Type Stimulants (ATS)	4,00,000	15,47,000
8.	Hallucinogens	2,00,000	11,01,000

(b) (A) National Action Plan for Drug Demand Reduction (NAPDDR) is an umbrella scheme under which financial assistance is provided to (i) 'State Governments/ Union Territory (UT) Administrations for Preventive Education and Awareness Generation, Capacity Building, Skill development, vocational training and livelihood support of ex-drug addicts, Programmes for Drug Demand Reduction by States/UTs etc. and (ii) 'NGOs/VOs for running and maintenance of Integrated Rehabilitation Centres for Addicts (IRCA), Community based peer Led Intervention (CPLI) for early Drug Use Prevention among Adolescents, Outreach and Drop In Centres (ODIC) and District De-Addiction Centres (DDACs)'.

Following Activities have been undertaken under NAPDDR scheme:

i. Launched NashaMukt Bharat Abhiyaan (NMBA) in 372 most vulnerable districts under which a massive community outreach is done through more than 8000 youth volunteers.

ii. 340 Integrated Rehabilitation Centres for Addicts (IRCAs) are supported by the Ministry. These IRCAs not only provide for treating the drug victims, but also give services of preventive education, awareness generation, motivational counselling, detoxification/de-addiction, after care and re-integration into the social mainstream.

iii. 49 Community based Peer led Intervention (CPLI) Centres are supported by the Ministry. These CPLIs focus on vulnerable and at risk children and adolescents. Under this, peer educators engage children for awareness generation and life skill activities.

iv. 73 Outreach and Drop In Centres (ODICs) are supported by the Ministry. These ODICs provide safe and secure space of treatment and rehabilitation for substance users, with provision of screening, assessment and counselling and thereafter provide referral and linkage to treatment and rehabilitation services for substance dependence.

v. Ministry also supports setting up of 41 Addiction Treatment Facilities (ATFs) in some Government hospitals, which is implemented through AIIMS, New Delhi.

vi. A Toll-free Helpline for de-addiction, 14446 is maintained by the Ministry for providing primary counseling and immediate referral services to the persons seeking help through this helpline.

vii. Ministry through its autonomous body National Institute of Social Defence (NISD) and other collaborating agencies like SCERTs, Kendriya Vidyalaya Sangathan etc. provides for regular awareness generation and sensitization sessions for all stakeholders including students, teachers, parents etc.

(B) Ministry of Health & Family Welfare is running a National 'Drug De-Addiction Programme (DDAP)' which came into force in 1987-88 with the objectives to provide affordable, easily accessible and evidence-based treatment for all substance

use disorders through the government health care facilities and to build the capacities of health care staff in recognition and management of substance use disorders. The programme is implemented through the health institutions under the MoH&FW viz. AIIMS, New Delhi; PGIMER, Chandigarh; NIMHANS, Bengaluru; RML Hospital, New Delhi; AIIMS, Bhubaneswar; and CIP, Ranchi. Out of these six, the centre at AIIMS, New Delhi (NDDTC) is functioning as the National / Nodal centre and coordinating another major component of the DDAP, the “DTC Scheme”. Under this scheme, 27 drug treatment clinics are functional in District/Civil Hospital across the country in which OPD Services are provided.

Ministry of Health & Family Welfare has released the “Standard Treatment Guidelines for the Management of Substance Use Disorders and Behavioral Addictions”. Available in the Ministry’s website [www,mohfw.nic.in](http://www.mohfw.nic.in). A “Pocket Book” and an Addiction-Rx mobile App (android and iOS) for Physicians for assisting physicians to provide quality care for substance use disorders was released under Drug De-Addiction Programme.