

श्री राजू धिंगान द्वारा तारांकित प्रश्न संख्या -72 का उत्तर:-

क्रम सं०	प्रश्न	उत्तर
क	क्या विभाग द्वारा मादक द्रव्यों के शिकार बच्चों की संख्या का पता लगाने हेतु कोई सर्वेक्षण किया गया है;	विभाग ने दिल्ली में ऑल इंडिया इंस्टीट्यूट ऑफ मेडिकल साइंसेज (एम्स) के जरिए 2016 में ड्रग्स का इस्तेमाल करने वाले बेघर बच्चों पर सर्वेक्षण कराया है। इस संबंध में वित्तीय सहायता, सामाजिक न्याय और अधिकारिता मंत्रालय, भारत सरकार द्वारा प्रदान की गई थी।
ख	यदि हाँ, तो उन सर्वेक्षणों का पिछले सर्वेक्षण सहित पूर्ण विवरण क्या है;	विभाग ने केवल यही सर्वेक्षण प्रमुख तकनीकी एजेंसी यानी नेशनल ड्रग डिपेंडेंस ट्रिटमेंट सेंटर, एम्स के द्वारा कराया है। सर्वेक्षण रिपोर्ट को दिसंबर 2016 के दौरान विभाग में प्रस्तुत किया था।
ग	उन सर्वेक्षणों की फाइंडिंग्स का विवरण क्या है;	निष्कर्षों पर संक्षिप्त रिपोर्ट संलग्नक 'ए' के रूप में संलग्न हैं।
घ	मादक द्रव्यों के शिकार बच्चों का पुर्नवास करने हेतु क्या कदम उठाए जा रहे हैं;	अनुलग्नक "बी" के अनुसार
ङ	मादक द्रव्यों की सप्लाई में कटौती करने हेतु क्या कदम उठाए जा रहे हैं;	<ul style="list-style-type: none"> दिल्ली स्टेट एड्स कंट्रोल सोसाइटी राष्ट्रीय राजधानी क्षेत्र दिल्ली सरकार के द्वारा उपलब्ध कराई गई सूचना के अनुसार 31 जुलाई, 2017 को राजपत्र अधिसूचना के माध्यम से स्वास्थ्य और परिवार कल्याण विभाग द्वारा बच्चों को correction fluid, Thinner, Diluters and vulcanized solution/ sulochans की बिक्री पर प्रतिबंध लगाने के लिए एक अधिसूचना जारी की गई है (दिल्ली गजट अधिसूचना की प्रतिलिपि अनुलग्नक "सी" संलग्न है)। स्वास्थ्य और परिवार कल्याण विभाग द्वारा दिल्ली सरकार के 7 अस्पतालों में जुवेनाइल के लिए 60 बेड आरक्षित किये गए हैं जिनमें दीप चंद बंधू अस्पताल में 30 बेड और 5 बेड प्रत्येक अस्पताल; मदन मोहन मालवीय अस्पताल, लाल बहादुर अस्पताल, डॉ बाबा साहब अम्बेडकर अस्पताल, जीबी पंत हॉस्पिटल, आईएचबीएस और डीन दयाल उपाध्याय अस्पताल आरक्षित है उपर्युक्त अस्पताल में समर्पित ओपीडी सेवाएं जुवेनाइल के लिए सप्ताह में एक बार प्रस्तावित की जा रही हैं मादक द्रव्यों का सेवन करने वाले बच्चों के लिए चार जिला मानसिक स्वास्थ्य सुविधाएं ओपीडी के माध्यम से सेवाएं प्रदान की जा रही हैं। औषधि नियंत्रक विभाग द्वारा नियमित समयानुसार खास निरीक्षण कार्यक्रमों का आयोजन किया जाता है व मादक औषधियों को नियमानुसार ना बेचने वाले केमिस्टों पर

		कार्यवाही की जाती है। ऐसे २० दवाई की दुकानों का लाइसेंसों को रद्द किया गया है। विभाग अपने कार्यालय पालिसी के अनुसार जिन इलाकों में मादक औषधियों का दुरुूपयोग पाया गया है वहां नई दुकानों के लाइसेंस नहीं देता है। जागरूकता अभियानों का नियोजन किया गया है ताकि दवा दुकानदार व समाजसेवी संस्थाएं इस विषय पर जागरूक हो।
च	विभिन्न प्रकार के व्यसनकारी एवं मनः प्रभावी प्रदार्थों की बढ़ती हुई सप्लाई एवं मांग पर नियंत्रण करने हेतु डीसीपी ;काइमद्व के साथ हुई बैठकों का विवरण क्या है ; और	दिल्ली स्टेट एड्स कंट्रोल सोसाइटी राष्ट्रीय राजधानी क्षेत्र दिल्ली सरकार के द्वारा उपलब्ध कराई गई सूचना के अनुसार दिल्ली पुलिस के अधिकारी अंतर-क्षेत्रीय समिति के सदस्यों में से एक के रूप में मनोनीत हैं। दिल्ली पुलिस का यह प्रतिनिधि बैठकों में भाग ले रहा है
छ	चीफ सैक्रेटरी के समापतित्व में वर्ष 2016 से हुई इन्टर सेक्टरल मीटिंग्स का उनके मिनट्स सहित पूर्ण विवरण क्या है ?	दिल्ली स्टेट एड्स कंट्रोल सोसाइटी राष्ट्रीय राजधानी क्षेत्र दिल्ली सरकार के द्वारा उपलब्ध कराई गई सूचना के अनुसार दिल्ली में नशीली दवाओं की रोकथाम और नशीली दवाओं के नशे की लत के व्यापक उत्तरदायित्व के समन्वय के लिए अंतरक्षेत्रीय समन्वय समिति का गठन 19 जनवरी 2017 को माननीय लेफ्टिनेंट गवर्नर ए जीएनसीटीडी के अनुमोदन से किया गया था। तब से मुख्य सचिव दिल्ली सरकार की अध्यक्षता में 4 अंतर क्षेत्रीय समन्वय समिति की बैठकें आयोजित की गई हैं जिनकी तिथियां निम्न प्रकार है 1. 22 फरवरी 2017 2. 5 मई 2017 3. 15 सितंबर 2017 4. 11 अक्टूबर 2011 उपर्युक्त उल्लेख बैठकों के मिनट्स अनुलग्नक " डी " के रूप में संलग्न हैं।

पूरक सामग्री

विभाग ने दिल्ली में ऑल इंडिया इंस्टीट्यूट ऑफ मेडिकल साइंसेज (एम्स) के जरिए ड्रग्स का इस्तेमाल करने वाले बच्चे पर सर्वेक्षण किया है। इस संबंध में वित्तीय सहायता, सामाजिक न्याय और अधिकारिता मंत्रालय, भारत सरकार द्वारा प्रदान की गई थी।

विभाग ने केवल यही सर्वेक्षण प्रमुख तकनीकी एजेंसी यानी नेशनल ड्रग डिपेंडेंस ट्रीटमेंट सेंटर, एम्स के द्वारा है। सर्वेक्षण रिपोर्ट को दिसंबर 2016 के दौरान प्रस्तुत किया था।

एनडीडीटीसी की तकनीकी टीम में शामिल थे :-

प्रधान अन्वेषक: डॉ अंजू धवन, प्रोफेसर, राष्ट्रीय औषध निर्भरता उपचार केंद्र (एनडीडीटीसी)

सह-जांचकर्ता: डॉ अतुल अंबेकर, अतिरिक्त प्रोफेसर, एनडीडीटीसी डॉ बिस्वादीप चटर्जी, सहायक प्रोफेसर, एनडीडीटीसी डॉ अश्विनी मिश्रा, सहायक प्रोफेसर, एनडीडीटीसी डॉ रचना भार्गव, सहायक प्रोफेसर, एनडीडीटीसी डॉ आलोक अग्रवाल, सहायक प्रोफेसर, एनडीडीटीसी श्रीमती अनिता चोपड़ा, वैज्ञानिक (पूर्व), एनडीडीटीसी

निष्कर्ष 3 वर्गों में प्रस्तुत किए गए हैं। खंड I में, सभी बेघर बच्चों का प्रोफाइल प्रस्तुत किया गया है। खंड II नशीले पदार्थ के उपयोग से संबंधित है। खंड द्वितीय (ए) दिल्ली के बेघर बच्चों के बीच पदार्थों के उपयोग की व्यापकता, कारकों का अनुमान लगाया है। उपरोक्त दोनों वर्गों में, आरडीएस विश्लेषण किया गया है।

आपूर्ति में कमी का अंश प्रवर्तन एजेंसियों द्वारा किया जाता है, जैसे नारकोटिक्स कंट्रोल ब्यूरो और दिल्ली पुलिस। नारकोटिक्स कंट्रोल ब्यूरो और दिल्ली पुलिस के अधिकारियों को "इंटरसेक्टरल को-ऑर्डिनेशन कमेटी" में चुना गया है। हर बैठक में नियमित रूप से नशीले पदार्थ की आपूर्ति को रोकने के लिए रणनीति पर चर्चा की जाती है। इस तरह के प्रयासों का ब्यौरा "अंतर्कशिला समन्वय समिति" की बैठक के मिनटों में उल्लिखित अनुलग्नक "D" के रूप में किया गया है।

सर्वेक्षण की फाइंडिंग्स

अध्ययन के प्रमुख निष्कर्ष

निष्कर्ष निम्न विवरण के अनुसार 3 अनुभागों में प्रस्तुत किए गए हैं: -

खंड I: दिल्ली की आबादी के बेघर बच्चों का प्रोफाइल

दिल्ली में बेघर अधिकांश बच्चे पुरुष हैं (78.8%) और शुरुआती किशोरावस्था (67%) में हैं। उनमें से लगभग 14.5% 7-10 साल और 18.5% के बीच 15-18 वर्ष के बीच है। कुल जनसंख्या में महिलाओं का पांचवां हिस्सा (19.6%) है। वर्तमान में 80% से अधिक अपने परिवार / रिश्तेदारों के साथ रह रहे हैं। उनमें से लगभग आधे के पास समुचित आश्रय (41.5%) नहीं है या अपर्याप्त आश्रय (8%) है। दिन के अधिकांश समय के दौरान वे डंपिंग ग्राउंड (36.5%), बाजार स्थान (35.4%), रेलवे और बस टर्मिनल (26.3%) में समय बिताते हैं।

खंड II (ए): नशीले पदार्थ प्रयोग का प्रचलन और आकार का आकलन

जीवनकाल (34.6%), पिछले एक वर्ष (33.2%) और वर्तमान उपयोग (पिछले 30 दिनों के भीतर: 31.7%) नशीले पदार्थों का उपयोग दिल्ली के बेघर बच्चों के बीच समान है। यह अनुमान लगाया गया है कि 15,470 बेघर बच्चे, अर्थात् दिल्ली के एनसीटी के सभी बेघर बच्चों के 22.1% ने पिछले एक वर्ष में तंबाकू को छोड़कर किसी भी पदार्थ का इस्तेमाल किया है। पिछले एक वर्ष में इस्तेमाल किए गए विभिन्न पदार्थों का उपयोग करने वाले बच्चों की संख्या का अनुमान है- तंबाकू- 21770, शराब- 9450, इन्हेलेंट- 7910, कैनिबिस- 5600, हेरोइन- 840, अफीम -420, फार्मास्यूटिकल ओपिऑइड्स -102 सैडेटिव- 210 और नशीली दवाओं के उपयोग-इंजेक्शन -210।

खंड द्वितीय बी - नशीले पदार्थ उपयोग संबंधी सूचना

नशीली दवाओं के उपयोग की शुरुआत की औसत आयु 9.5 साल तंबाकू के लिए 12.5 वर्ष हेरोइन के लिए, सैडेटिव के लिए 13 साल और इंजेक्शन के जरिये 11.5 साल तक। नशीले पदार्थ के उपयोग की शुरुआत के लिए सामान्य कारण पीयर समूह का हिस्सा बनने के लिए 29.2% जिज्ञासा (19%), (15.7%) अनुभव करने के लिए, जीवन में विभिन्न तनाव और कठिनाई से निपटने के लिए जैसे गुस्सा / उदासी (9.3%), कठोर मौसम (6.4%), भूख (5.9%) या परिवार के बारे में भूल जाने (1.8%) हैं। जबकि तंबाकू और इन्हेलेंट का इस्तेमाल (24.5 / 30 दिन और 24/30 दिन), अन्य पदार्थ का उपयोग 9 से 19 दिन प्रति माह के बीच था।

नशीली दवाओं के इस्तेमाल की वजह से बच्चों को समस्याये महसूस करने की संख्या 79.3% थी। सामान्य समस्याएं में मनोवैज्ञानिक समस्याएं हैं 64.4%, लड़ाई झगड़ा (53.2%), गिरना / चोट / दुर्घटना (13%) और यौन व्यवहार (11.5%) शारीरिक समस्यायें (46%), कानूनी समस्याएं (27.4%) यौन पक्षों या नशीले पदार्थों की खरीद / प्राप्त करने या पैसों लेने के लिए 12% बच्चों में यौन दुर्व्यवहार शामिल है।

खंड III- नशीले पदार्थ उपयोगकर्ताओं और गैर-उपयोगकर्ताओं की तुलना

जब 76 (49.1%) नशीले पदार्थ के उपयोगकर्ताओं (पिछले एक वर्ष में किसी भी पदार्थ का उपयोग) की तुलना 390 (50.9%) गैर-उपयोगकर्ताओं (जिनके द्वारा पिछले वर्ष किसी भी पदार्थ का इस्तेमाल नहीं किया गया था) के साथ किया गया तो कई महत्वपूर्ण अंतर पाये गये। नशीले पदार्थ इस्तेमाल करने वाले बच्चे काफी बड़े थे (7-10 वर्ष आयु वर्ग में 18.4%, 33.3% बनाम और 15-18 वर्ष आयु वर्ग में 37.8% बनाम 15.4%)। नशीले पदार्थ उपयोगकर्ताओं में काफी अधिक पुरुष थे (93.4% बनाम 75.6%)। बेघर बच्चों में नशीले पदार्थ उपयोग करने वाले ज्यादातर बच्चे पर्याप्त आश्रय से वंचित थे और खुले में (44.9% बनाम 31%) रह रहे थे और अकेले या साथियों (37.5% बनाम 7.9%) के साथ रह रहे थे।

बेघर बच्चों में नशा करने का प्रमुख कारण सहकर्मी प्रभाव (31.1% बनाम 12.3%), पारिवारिक अपमान (22.3% बनाम 8.7%), के कारण सड़कों पर अपना समय व्यतीत कर रहे (43.4% vs. 34.9%) और रेलवे प्लेटफॉर्म / बस टर्मिनलों (40.7% बनाम 20.5%) पर थे। पारिवारिक (51.1% बनाम 18%), परिवार के सदस्यों (68.6% विरुद्ध 57.2% अल्कोहल के लिए) और साथियों (97.9% बनाम 45.4%), हिंसा और दुर्व्यवहार की घटनाएं (75%) बनाम मूलभूत आवश्यकताओं की उपेक्षा (53.3%) गैर उपयोगकर्ताओं के मुकाबले पदार्थ उपयोगकर्ताओं के बीच अधिक सामान्य थे। गैर-उपयोगकर्ताओं के मुकाबले कई पदार्थ उपभोक्ता के पास दिल्ली (16.5% बनाम 5.9%) के बाहर रहने वाले परिवार थे और हाल ही में उनके परिवार के संपर्क में नहीं थे (15.2% बनाम 4.1%)।

नशीले पदार्थ उपयोगकर्ताओं की महत्वपूर्ण संख्या कुछ कम रहे थे (7.2% बनाम 23.2%): सामान्य कूड़ा बीनना (64.4% बनाम 36.7%), भीख माँग (29.8 वी। 16.2%), और अन्य अकुशल काम (7.4% बनाम 7.4%)। ड्रग्स के अलावा (76.3% बनाम 2.6%), इन लोगों द्वारा बड़ी संख्या में कपड़े और सौंदर्य प्रसाधन (62% बनाम 40.5%) पर पैसा खर्च करते हैं और परिवार पर कम खर्च करते हैं (29.3% बनाम 49.5%)।

अध्ययन का मुख्य निष्कर्ष

दिल्ली के पूरे एनसीटी में कुल 192 'हॉटस्पॉट' (यानी जहां स्थानों पर कम से कम 25 बेघर बच्चे थे) की पहचान की गई।

अधिकांश हॉटस्पॉट्स में बच्चे काम कर (79.7%) या भीख मांगने से (68.2%) अपनी आजीविका चला रहे थे। हालांकि, अवैध गतिविधियों (49%) और जुआ (71.4%) भी आम है। वहां करीब 20 हॉटस्पॉट (10%) थे जहां बच्चे विशेष रूप से मध्य और नई दिल्ली में स्थित हॉटस्पॉट्स में यौन कार्य में शामिल थे। ये महिला बेघर बच्चों के उच्च अनुपात वाले क्षेत्रों (जैसा कि पहले उल्लेख किया गया है) हैं।

43 हॉटस्पॉट पर बच्चों के बीच नशीले पदार्थ का उपयोग किया जा रहा था। बड़ी संख्या में हॉटस्पॉट्स में बुनियादी सुविधाओं जैसे खाद्य (44.8%), आश्रय (19.3%) और कपड़ों (40.6%) की कमी थी। सभी स्थानों में 50% से कम हॉटस्पॉट में सामान्य चिकित्सा देखभाल उपलब्ध है।

सेवा उपलब्धता के बारे में प्रमुख निष्कर्ष

दिल्ली के एनसीटी में, केवल 13 पंजीकृत ओपन शेल्टर तथा 59 बच्चों के होम हैं जो देखभाल और संरक्षण (सीएनसीपी) की आवश्यकता के बच्चों के लिये है।

मादक द्रव्यों के सेवन के शिकार लोगों के पुनर्वसन के लिए उठाये गये कदम :-

दिल्ली सरकार 07 अस्पतालों में नशीली दवा / पदार्थों के प्रबंधन के लिए विशेष रूप से 60 बिस्तर रखे हैं। नेशनल ड्रग ट्रिटमेंट डिपेंडेंस सेंटर (एनडीटीडीसी) द्वारा विकसित न्यूनतम मानक के अनुसार इन केंद्र को चलाने के लिए, दिल्ली सरकार ने (मनोचिकित्सक -06, नैदानिक मनोचिकित्सक -06, सोशल वर्कर्स -07, पीयर अटेंडेंट -23) और 28 पद पहले ही भरे गए हैं और बाकी प्रक्रिया प्रक्रिया में हैं। अस्पताल के बिस्तरों का वितरण निम्नानुसार है: -

- (i) लाल बहादुर शास्त्री अस्पताल, -5 बिस्तर
- (ii) डा। बाबा साहेब अम्बेडकर अस्पताल, रोहिणी - 05 बिस्तर
- (iii) पं। मदन मोहन मालवीय अस्पताल, मालवीय नगर - 05 बिस्तर
- (iv) जीबी पंत अस्पताल, दिल्ली गेट- 05 बिस्तर
- (v) दीन दयाल उपाध्याय अस्पताल, हरि नगर - 05 बिस्तर
- (vi) आईएचबीएस - 05
- (vii) दीप चंद बंधु अस्पताल, अशोक विहार- 30 बिस्तर
(सूचना स्वास्थ्य विभाग द्वारा प्रदान की गई है।)

1. तीन केंद्रीय सरकारी संगठनों: एम्स, सफदरजंग अस्पताल और डॉ। आरएमएल हॉस्पिटल में सभी आयु वर्गों को नशा-मुक्ति सेवाएं भी प्रदान की जाती हैं।
2. दिल्ली राज्य एड्स नियंत्रण सोसाइटी, राष्ट्रीय एड्स नियंत्रण संगठन के तहत सूचीबद्ध एनजीओ के माध्यम से लगभग 9 000 हार्ड कोर इंजेक्शन लगाने वाले नशीली दवाओं की रोकथाम के कार्यक्रम का क्रियान्वयन किया है और मुफ्त ओएसटी, काउंसिलिंग और टेस्टिंग और ट्रिटमेंट सर्विसेज प्रदान की जा रही है। (सूचना DSACS द्वारा)
3. आईएचबीएस जीएनसीटीडी का सर्वोच्च संगठन है जो सभी आयु वर्गों के लिए व्यसन मैनेजमेंट सेवाएं प्रदान करता है और जटिल मामलों के प्रबंधन के लिए प्रशिक्षण और रेफरल सेंटर के रूप में कार्य करता है।
4. महिला एवं बाल विकास विभाग ने शैक्षिक / अध्ययन खिलौने, कपड़े / जूते और अन्य संबंधित वस्तुओं जैसे उपयोगी चीजें दीप चंद बंधु अस्पताल को प्रदान की है।
5. स्कूल स्वास्थ्य सेवाओं को मजबूत बनाना
"स्कूलों में चिकित्सा संकट प्रबंधन" के तहत एचएडएफडब्ल्यूडी और शिक्षा निदेशालय (डीओई), ने स्टाफ नर्सों के 1300 पदों और मल्टीटास्क कार्यकर्ताओं के 1300 पदों पर 1 प्रति स्कूल और 120 मेडिकल ऑफिसर को भरने के लिए कदम उठाए हैं।
6. डिटोक्स और पुनर्वास सुविधाएं: -

महिला एवं बाल विकास विभाग ने सेवा कुटीर किंग्सवे कैम्प, दिल्ली में डिटॉक्स सेंटर की स्थापना की है जिसमें मादक द्रव्यों के सेवन की समस्याओं के साथ किशोरों के लिए औषध उपचार और पुनर्वास प्रदान किया गया

है। केंद्र वर्तमान में एक एनजीओ के सहयोग से चलाया जाता है। युवाओं को इस केंद्र को किशोर न्याय बोर्ड द्वारा भेजा जाता है।

केंद्र कठिन परिस्थितियों में बच्चों के सफल पुनर्वास में सहायता प्रदान करता है। उद्देश्य यह है कि प्रत्येक बच्चे को सकारात्मक दृष्टिकोण प्राप्त हो। बच्चों को रोजगार योग्य कौशल प्राप्त करने और रचनात्मक गतिविधियों में संलग्न होने के लिए प्रोत्साहित किया जाता है। केंद्र की औसत ताकत 80 है

7. एकीकृत पुनर्वास केंद्र (आईआरसीए):

देश में नशीले पदार्थों की मांग कम करने के कार्यक्रमों के लिए सामाजिक न्याय और अधिकारिता मंत्रालय, मदिरा और मादक द्रव्यों के सेवन की रोकथाम के लिए सहायता के लिए एक केंद्रीय योजना को लागू कर रहा है। इस योजना के तहत स्वैच्छिक संगठन परामर्श और पुनर्वास सेवाएं प्रदान करने के लिए वित्तीय सहायता प्रदान की जाती है। वर्तमान में इस तरह के 11 ऐसे केंद्र दिल्ली में डिटोक्स एंव पुनर्वास सेवाएं प्रदान कर रहे हैं।

8. मादक पदार्थों के दुरुपयोग से संबंधित मुद्दों को हल करने के लिए विभाग ने आंगनवाड़ी केंद्रों को शामिल किया है। सूचना और प्रसारण मंत्रालय, के गाने और ड्रामा डिवीजन के पैनलों की मंडली दिल्ली के सभी हिस्सों में जागरूकता गतिविधियों में शामिल है। आंगनवाड़ी केंद्र क्षेत्र में नोडल एजेंसी के रूप में कार्य करते हैं और निम्नलिखित कर्तव्यों को पूरा करते हैं: -

- I. उस विशेष क्षेत्र में कार्यक्रम के प्रदर्शन के बारे में जनता को सूचित करना
- II. लोगों को आगे आने के लिए और शिक्षाप्रद कार्यक्रमों की जानकारी लेने के लिए अनुरोध करना।
- III. सूचना ब्रोशर का वितरण
- IV. इस संबंध में निवासियों द्वारा आवश्यक कोई अन्य मार्गदर्शन / सेवाएं।

हेल्प लाइन: यह सहायता लाइन (टेलीफोन नंबर: 1800-11-0031) सामाजिक न्याय और अधिकारिता मंत्रालय भारत सरकार द्वारा कार्यान्वित किया गया है। काउंसलर्स परामर्श और मार्गदर्शन सेवायें प्रदान करते हैं।

1. महिला एवं बाल विकास विभाग, सरकार दिल्ली की एनसीटी दिल्ली में मादक द्रव्यों के सेवन के खतरे से निपटने के लिए सक्रिय रूप से जागरूकता पैदा करने, पुनर्वास और सामुदायिक जुटाने के लिए काम कर रही है। विभिन्न पदार्थों की लत सीधे किसी दवा / शराब के उपयोगकर्ता के जीवन को शारीरिक रूप, मानसिक रूप, सामाजिक रूप, आर्थिक रूप और मनोवैज्ञानिक रूप से प्रभावित करते हैं।

इस अभियान के तहत, विभाग दिल्ली के विभिन्न क्षेत्रों में नशीले पदार्थों के दुरुपयोग की रोकथाम के लिये आउटरीच गतिविधियों को संचालित करने के लिए महाविद्यालय के छात्रों के नाटकीय मंडली को शामिल किया है।

Annexure 'e'

रजिस्ट्री सं. डी.एल.-33002/99

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GOVERNMENT OF INDIA

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भाग—IV

PART—IV

राष्ट्रीय राजधानी राज्य क्षेत्र दिल्ली सरकार

GOVERNMENT OF THE NATIONAL CAPITAL TERRITORY OF DELHI

स्वास्थ्य एवं परिवार कल्याण विभाग

अधिसूचना

दिल्ली, 28 जुलाई, 2017

सं. फा. 7(15)/2012/वि./डीएचएस/एसएचएस/पार्ट फा.—III/1229-1239.—। जबकि स्वास्थ्य एवं परिवार कल्याण मंत्रालय, भारत सरकार की दिनांक 17 जुलाई, 2012 की अधिसूचना सं. X.11029/6/2010-डीडीएपी के द्वारा बोटल बंद करेक्शन फ्लयूड तथा किसी प्रकार के रसायन सम्मिश्रण वाले बोटल बंद थिनर के जो मिटाने के तथा नाखुन पॉलिस रिमुवर के रूप में तथा इस प्रकार के अन्य कार्यों के लिए उत्पादन तथा बच्चों को खुदरा बिक्री पर प्रतिबंध लगाया है। ये ऐसा रसायनिक पदार्थ है जो प्रायः कार्यालयों में इस्तेमाल होते हैं, परन्तु बच्चे/बेघर बच्चे इसको सुघकर इसका नशा करके नशीले पदार्थ/ड्रग के रूप में इसका दुरुपयोग कर रहे हैं।

2. जबकि माननीय किशोर न्याय बोर्ड ने एफआईआर नं. 422/16 यू/एस 397/411 आईपीसी के आदेश के अनुसार दिल्ली सरकार को किसी अधिसूचना, परिपत्र या अन्यथा रूप में करेक्शन फ्लयूड/वाइटनर, थिनर/डाइल्यूट तथा पल्कनाजड सलुशन/सुलोचनको 18 वर्ष की आयु से कम के बच्चे को बेचने के लिए निषेध करने हेतु निर्देश दिया गया था, जब तक कि बच्चा अपने माता-पिता के साथ न ही या स्कूल अधिकारियों की ओर से इस पदार्थ की खरीद की आवश्यकता संबंधी कोई पत्र न हो। -

3. इसलिए, अब राष्ट्रीय राजधानी क्षेत्र दिल्ली सरकार-तत्काल निम्नलिखित उपायों के क्रियान्वयन संबंधी एतद्वारा आदेश करती है :-

- बोटल बंद करेक्शन फ्लयूड तथा किसी प्रकार के रसायन सम्मिश्रण वाले बोटल बंद थिनर के जो मिटाने के तथा नाखुन पॉलिस रिमुवर के रूप में तथा इस प्रकार के अन्य कार्यों के लिए खुदरा बिक्री हेतु उत्पादित किये जाते हैं, की खुदरा बिक्री पर प्रतिबंध लगाना।
- स्याही मिटाने वाले तथा नेल पॉलिस हटाने वाले या ऐसे ही अन्य प्रयोगों में इस्तेमाल होने वाले बोटल बंद करेक्शन फ्लयूड तथा किसी प्रकार के रसायन सम्मिश्रण वाले बोटल बंद थिनर की बिक्री पर प्रतिबंध लगाना।

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- (iii) करेक्शन फ्लयूड तथा किसी प्रकार के रसायन सम्मिश्रण वाले थिनर जो स्याही मिटाने के तथा नाखून पॉलिस रिमुवर के रूप में तथा पैन या इस प्रकार के अन्य सामान जिनमें प्रयोग में रसायन की मात्रा सीमित है, की बिक्री को अनुमत करना।
- (iv) करेक्टिंग फ्लयूड, थिनर/वल्कनाइज्ड सोलुशन/सुलोचन से तैयार किए गए प्रयोग में आने वाले सामान पैन या अन्य वस्तुओं पर इनकी भांप को सूंधने/रसायन के उपभोग से स्वास्थ्य पर पड़ने वाले दुष्प्रभाव के विषय में चेतावनी दिया जाना अनिवार्य है।
- (v) करेक्शन फ्लयूड/वाइटनर, थिनर/डाइल्यूटर तथा वल्कनाइज्ड सोलुशन/सुलोचन का 18 वर्ष की आयु से कम के बच्चे को बचने के लिए निषेध, जब तक कि बच्चा अपने माता-पिता के साथ न हो या स्कूल अधिकारियों की ओर से इस पदार्थ की खरीद की आवश्यकता संबंधी कोई पत्र न हो।
4. आदेश दिए जाते हैं कि इन उपायों का क्रियान्वयन राजस्व विभाग द्वारा पुलिस करेगी तथा उपायों की निगरानी जिला टास्क फोर्स करेगी जिसने उपायुक्त (राजस्व) तथा उपायुक्त पुलिस शामिल होंगे और अपने अधिकार क्षेत्र के जिलों में मासिक आधार पर इसकी निगरानी करेंगे।
5. इस अधिसूचना को किशारे न्याय (बच्चों की देखभाल एवं संरक्षण) अधिनियम, 2015 की धारा 77 के साथ पठित भारतीय दंड संहिता की धारा 188 के प्रावधानों के अनुसार जारी किया जाता है।

राष्ट्रीय राजधानी क्षेत्र दिल्ली के उपराज्यपाल
के आदेश से तथा उनके नाम पर,

डा. मृणालिनी दर्सवाल, विशेष सचिव (स्वा. एवं परि. कल्याण)

DEPARTMENT OF HEALTH AND FAMILY WELFARE

NOTIFICATION

Delhi, the 28th July, 2017

F. No. 7(15)/2012/Misc/DHS/SHS/Pt.file-III/1229-1239.—1. Whereas Ministry of Health and Family Welfare, Govt of India vide Notification F. No. X. 11029/6/2010-DDAP Dated 17th July, 2012 has imposed certain ban with regards to production and sale of Bottled Correction Fluids as well as Bottled Thinners, of any chemical composition, both for erasing purposes as well as for use as Nail Polish removers and similar other purposes for retail sale which are chemical substances generally used in offices but reportedly being widely misused by children/street children as intoxicating substance/drug by inhaling them to get stimulating effects like drugs:

2. Whereas as per Orders of Hon'ble Juvenile Justice Board in FIR No 422/16 U/s 379/411 IPC, Government of NCT of Delhi has been directed to issue appropriate instructions by way of Notification, circular or otherwise, banning the sale of correction fluids/whiteners, thinners/diluters and vulcanized solution/sulochans to children below the age of 18 years unless the child is accompanied by parent guardian or has a letter from the school authorities signifying their assent to purchase the same;

3. Now, therefore, Government of NCT of Delhi hereby orders the implementation of the following measure with immediate effect:-

- (i) Banning of production of Bottled Correction Fluids as well as Bottled Thinners, of any chemical composition, both for erasing purposes as well as for use as Nail Polish removers and similar other purposes for retail sale.
- (ii) Banning of sale of Bottled Correction Fluids as well as Bottled Thinners, of any chemical composition, both for ink erasing purposes as well as for use as Nail Polish removers and similar other purposes.
- (iii) Permitting sale of Correction Fluids as well as Thinners, of any chemical composition, both for ink erasing purposes as well as for use as Nail Polish removers and similar other purposes in the form of pens or similar devices which allow limited amounts of the chemicals to come out of those devices when used.
- (iv) Mandatory warning should be made on the application devices (pens or otherwise) of correcting fluids/thinners and vulcanized solution/sulochans regarding the effects on health on inhalation of vapor/consumption of the chemicals contained therein.

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- (v) Ban on the sale of correction fluids/whiteners, thinners/diluters and vulcanized solution/sulochans to children below the age of 18 years unless the child is accompanied by parent guardian or has a letter from the school authorities signifying their assent to purchase the same.
4. Ordered that these measures are to be enforced by the revenue department and police. The measures shall be monitored by District Task Force comprising of the Deputy Commissioner (Revenue) and Deputy Commissioner of Police in their respective districts in their respective jurisdictions on a monthly basis.
5. This Notification issues in accordance to the provisions of section 188 of Indian Penal Code, read with section 77 of Juvenile Justice (Care and Protection of Children) Act, 2015.

By Order and in the Name of Lt. Governor
of the National Capital Territory of Delhi,
Dr. MRINALINI DARSWAL, Spel. Secy. (H&FW)

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RAKESH SUKUL

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SUKUL
Date: 2017.08.04 20:11:24 +05'30'

DELHI STATE AIDS CONTROL SOCIETY
 (GOVT. OF NATIONAL CAPITAL TERRITORY OF DELHI)
DIHARAMSHALA BLOCK, DR. BSA HOSPITAL, ROHINI, DELHI - 110 085

No. F. No. 8(221)/DSACS/DAP/2016/Part I/ 3489-3504 Date: 8/8/17

MINUTES OF THE MEETING

Meeting of the 'Intersectoral Co-ordination Committee' for coordination of comprehensive response for drug abuse prevention and de-addiction services was convened on 22nd February 2017 at 5:30 PM in Delhi Secretariat under Chairmanship of Chief Secretary, Govt of NCT of Delhi.

The meeting was attended by committee members as per list of attendees attached. The meeting started with welcoming of all committee members by the chairperson and a presentation was made by Project Director, DSACS. The following was discussed and decided in the meeting:

S No.	Agenda/Issues	Status	Decisions Taken/Action
1.	Presentation on the overall current situation and detailed proposal for future action	It was emphasized by PD, DSACS that substance abuse is Medical-Psycho-Social Problem with grave Economic Dimension requiring inter-sectoral coordinated response. It was informed that as per household survey (2001) Prevalence of Illicit drug use was 3.6% (Cannabis 3%, opiates 0.7% , Heroin 0.2%) with IDUs ('ever') - 0.1% among 15+ males. The role of various departments and suggested activities was also presented to the committee.	
ISSUES PERTAINING TO DEPARTMENT OF HEALTH AND FAMILY WELFARE/DSACS			
2.	<u>Status of setting up of deaddiction centres</u> : Creation of posts for 5 Deaddiction centres	It was informed that Outpatient Child Guidance/ Deaddiction Clinics were in operation in 4 hospitals (BSAH DDUH, GBPH, LBSH) in the Psychiatry OPD run by Psychiatrists and Tilak Vihar Polyclinic. A total of 30 Beds in 6 hospitals (BSAH DDUH, GBPH, LBSH, MMMH and IHBAS) have been earmarked exclusively for juveniles but the usage has not been good and there is lack of staff for running these centres. The Chairperson stressed to run the	File for creation of posts in 5 Deaddiction centres being established in various Delhi Govt Hospitals be resubmitted to AR dept with revised proposal to enhance posts of attendants from presently 1 recommended to 3 per centre i.e total 15 for 5 hospitals for round the clock inpatient care. The post of Attendants may be offered to 'peers' i.e. the former drug addicts who are now eligible

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 Asstt. Director
 Directorate of Prohibition
 Govt. of Delhi
 K.G. Marg, New Delhi-67

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S No.	Agenda/Issues	Status	Decisions Taken/Action
		<p>facilities efficiently and to sort out the operational and other issues. It was informed that proposal has been initiated for creation of posts for these 5 Deaddiction centres. The posts are required to provide round the clock services to the inpatients at these centres. Presently proposal is with FD. It was suggested by Dr Rajesh from SPYM that 3 attendants with recovery background shall be required for round the clock services. It was desired that a meeting be held under the chairmanship of CS with the MS of 5 hospitals to ensure smooth functioning of the beds for indoor deaddiction facilities in these hospital to sort out the issues.</p> <p>This will help in improving the services in these hospitals.</p>	<p>for this responsibility. Inputs from Director IHBAS be taken who will also consider inputs from NGOs/SPYM for preparing the proposal.</p> <p>(Action: HFWD, Director IHBAS)</p> <p>Medical Superintendents of 5 Delhi Govt Hospitals are being established may be called for a meeting under Chairmanship of Chief Secretary to direct them to not use beds earmarked for juvenile drug addicts for other purpose and ensure that they are isolated from other patients.</p> <p>(Action: DSACS, MS of Hospitals Concerned)</p> <p>The process for finalisation of RRs of Clinical Psychologist /other posts may be expedited.</p> <p>(Action: HI&FW department)</p>
3.	<p><u>Status of setting up of deaddiction centres : Setting up of Tilak Vihar deaddiction Centres</u></p>	<p>A proposal was moved by HI&FW Deptt, to set up a deaddiction centre at Community Centre Building, Tilak Vihar, a highly vulnerable area with large number of drug addicts. The said two storied building is under DUSIB and has an FAR of 1000 sq m. which is sufficient to set up a 30 bedded facility. The first floor of building is vacant and at GF only small portion is being used by Food & Civil Supply Dept. DUSIB has agreed to allot only ground floor of the building.</p>	<p>DUSIB to take immediate action on the proposal of HI&FW Deptt., to set up a 30 bedded Deaddiction centre at Community centre building Tilak Vihar as per decision taken in last meeting held under Chairmanship of Hon'ble CM on 13.7.16.</p> <p>(Action: DUSIB)</p>

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S No.	Agenda/Issues	Status	Decisions Taken/Action
		DGHS has requested DUSIB to allot whole building; however no confirmation has yet been received from DUSIB. The whole building is required by H&FW Department to set up the centre.	
4.	Strengthening of School Health Services	The chair desired to have an insight into the School Health Services in Delhi being run by SHS and previously through NGOs. The proposal of Directorate of Education to appoint a nurse, multitask workers for all govt and aided schools and a MO over a cluster of approx 10 schools as per direction of Hon'ble High Court be re-examined for necessary action. It was suggested by Secretary Education that issues related to cadre control of nurses/doctors be looked after by H&FW department.	Old files where decision has been taken to empanel Private doctors be traced for necessary action. The DHS may examine the functioning of school health services and identify the gaps and suggest measures to improve the performance of scheme and role of NGOs in achieving the objectives. (Action: SHS(DGHS))
5.	Activities related to Substance Abuse at DSACS	A presentation regarding the activities to be taken by DSACS in respect of substance abuse in population with specific focus on most at risk population was made indicating starting up of following activities : i. Establishment of additional OST Centres : (other than those covered under AIDS Controls programme) ii. Outreach /Community Specialised Counselling Centres/Targeted interventions iii. Targeted interventions (TI) for street children (at risk) iv. Special TI for women v. Admin/Capacity Building/Training Support vi. IEC - activities It was informed that the budgetary requirement shall be around Rs 10 crore per annum for above activities. It was also presented that there shall be a need to establish a mechanism	Budget provisions to be made by DSACS for activities related to Deaddiction programme for street children and setting up centres as a new scheme. (Action: DSACS, H&FW department) Proposal for creation of posts in DSACS may be put up for approval of competent authority. (Action: DSACS)

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S No.	Agenda/Issues	Status	Decisions Taken/Action
		to co-ordinate and manage the assigned activities related to comprehensive response for drug abuse prevention and de-addiction services in Delhi and 8 posts with financial liability of approximately 24 lakhs per annum as per DSACS/DSHM require to be created in DSACS to co-ordinate the response/implement the activities.	
6.	De-addiction beds in RML and SJH	It was informed that despite availability of beds earmarked for drug deaddiction in RML hospital and SJ Hospital, the beds were not being used for drug deaddiction activities purpose and were being used as routine psychiatry beds.	It was desired that a DO letter be sent to Secretary (Health), Govt of India to activate the beds for deaddiction treatment in these hospitals. (Action : H&FW department)
ISSUES PERTAINING TO SOCIAL WELFARE DEPARTMENT/WCD DEPARTMENT			
7.	Status of Private deaddiction facilities	It was informed that currently there are 5 stand alone deaddiction centres in Delhi funded by Ministry of Social Justice & Empowerment, Govt of India. MoSJE and DSW(GNCT) monitor these facilities. Some other private centres are also working and the conditions of working of these hospitals require to be monitored including for violation of human rights. No such regulatory monitoring mechanism exists for other facilities. It was informed that H&FW department is also preparing a Cabinet note regarding regulation of all Deaddiction centres of Delhi whether run by Pvt. organizations/NGOs or Govt on pattern of Haryana Govt.	The cabinet note on regulation of deaddiction centres facilities may be prepared by Social Welfare department for approval of Cabinet. (Action : Social Welfare department, GNCTD)
8.	WCD-AIIMS study report on substance abuse on street children	The draft findings of the WCD-AIIMS 2016 study were presented by PD, DSACS to the committee which estimates that 20,000+ street children are using tobacco, 9450 are using	It was decided Women and Child Development department shall submit the WCD-AIIMS study report on substance abuse on street

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Secretary
Department of Rehabilitation
Government of Delhi
Sector 14, Connaught Place
New Delhi-110001

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S No.	Agenda/Issues	Status	Decisions Taken/Action
		<p>alcohol, 7,910 are using inhalants, 5,600 using Cannabis, 840 are using Heroin and 210 are using Pharmaceutical opioids and sedatives amongst estimated 70000 street children.</p> <p>The study has reported injecting drug use amongst young children, with age of initiation of drugs as early as 9 years and heroin or opium use starting at 12-13 years.</p>	<p>children on file to Chief Secretary with recommendations.</p> <p>(Action: WCD)</p>
9.	<p>Comprehensive cabinet note for policy issues related to addressal of substance abuse</p>	<p>It was informed that a comprehensive cabinet note may be put up for policy issues related to addressing substance abuse including survey for identifying the extent and pattern of substance abuse, Prevention activities, Early Identification, treatment facilities and Community based (Mohalla based) centres, addiction treatment clinics, Rehabilitation centres, deaddiction centres, Mobile Dispensing Units, Capacity Building, and referral linkages.</p> <p>The committee of Secretaries of Health, Education and Social Welfare Department with inputs from with DGHS and NGO SPYM may sort out integration issues and suggest road map.</p> <p>It was informed by OSD to Hon'ble Min of Social welfare that the issue is also being monitored by CM office also.</p>	<p>The note be finalised by the Secretary Social welfare, with inputs from Education and Health Department on priority to resolve integration issues. The department was advised to pursue the note for approval of Council of Ministers for further logical conclusion.</p> <p>(Action : Social Welfare Department)</p>
10.	<p>Special facility for Juvenile</p>	<p>It was informed that currently there are only few standalone deaddiction centres in Delhi funded by Ministry of Social Justice & Empowerment, Govt of India. These centers are run by NGO with GIA provided by MSJ&E and include :</p> <p>(i) Manav Paropkari Sanstha (Khanpur & Mahipalpur)- South & South West Districts</p>	<p>It was decided that possibility of setting a facility for children with minimum 50 bed may be explored in Government or NGO sector. The economics and sustainability of such project in Government and NGO sector may be worked out.</p>

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S No.	Agenda/Issues	Status	Decisions Taken/Action
		<p>(2 centres (15+15 beds)</p> <p>(ii) Samaj Sewa Sangh (Dilshad Colony)- North East District - 15</p> <p>(iii) Bharatiya Parivaradhan Sanstha (Nand Nagri)- North East District -30</p> <p>(iv) Society for the promotion of Youth and Masses (Vasant Kunj) - South & South West Districts.</p> <p>It was felt that the existing facilities are inadequate and may be expanded. It was decided that Delhi Government may start a scheme to cater to the drug deaddiction centre needs of Delhi by funding NGOs.</p> <p>Possibility of creation of extra beds for juveniles with substance abuse at MSJE supported NGO run 5 Deaddiction centres of Delhi be explored. Additional expense if any, may be borne by GNCTD</p> <p>The feasibility of treating a minimum of 50 children/Adolescents with substance abuse with detox/Deaddiction either in Govt or Pvt/NGO may be explored. This shall be based on comparing the financial implications and sustainability of running these centres by the Government or NGO.</p>	<p>(Action: Social Welfare Department)</p> <p>Delhi government, Social welfare department may formulate a scheme for funding of NGOs for augmentation of bed capacity.</p> <p>(Action: Social Welfare Department)</p>
ISSUES PERTAINING TO DEPARTMENT OF EDUCATION			
11.	Survey of School Children	Survey of 1240 schools and 13.5 lakhs students from class 6-12 every 6 months would be difficult with limited manpower of SHS. It was suggested by H&FW department that the survey should be undertaken by Department of Education through Teachers using the technique of Polling Method.	Education department may identify a mechanism /adopt series of measures to ensure screening of all school children for identification of children falling to substance abuse and linking them to deaddiction centre. (Action: Education department)

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S.No.	Agenda/Issues	Status	Decisions Taken/Action
		<p>However, it was desired that a definitive mechanism be devised to identify the substance abuse amongst children and to link identified children with substance abuse to deaddiction.</p> <p>The Secretary Education informed about the creation/filling of posts of Education and Vocational Counsellors in their schools.</p> <p>It was informed by Addl. Director (SHS) that Mohalla Clinics situated in Schools shall also be screening students for substance abuse as identified activity and linking them to deaddiction centres if required.</p> <p>Representative from EDMC/SDMC informed that they have trained their School health workers at IFBAS and these may be used for screening of students.</p>	<p>The post creation and recruitment of Education and vocation Counsellors in education department to be expedited.</p> <p>(Action: Directorate of Education)</p> <p>Chief Secretary desired that effective screening and linking of identified children with substance abuse may be undertaken by all MCD Schools.</p> <p>(Action : All Municipal Corporations)</p>
ISSUES PERTAINING TO OTHER DEPARTMENTS			
12.	Supply reduction	<p>It was informed that Delhi Police, Narcotics Bureau and Drug Control Department were the main agencies involved in regulation/ supply reduction of drugs of abuse. Drug Control Department has cancelled 18 drug licenses of pharmacies during previous year to curb illegitimate drug abuse.</p> <p>Representative from NCB informed that Government has to notify designated centres for deaddiction under NDPS Act 1985.</p>	<p>Status note on drug seizures/arrest done by Delhi police may be sent to CS for perusal.</p> <p>(Action : Delhi Police)</p>

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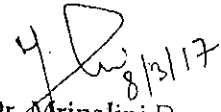
S No.	Agenda/Issues	Status	Decisions Taken /Action
13.	Next meeting of the Committee		The Chairperson desired that meetings of the committee may be held on quarterly basis for close monitoring of the decisions taken in the meeting. (Action : Member Secretary, Intersectoral Committee)

Secretary (Health &FW) and Project Director (DSACS) shall review the progress of action taken on the decisions taken at the meeting on a regular basis.

The meeting ended with vote of thanks to the chair.

This issues with the prior approval of Chief Secretary.

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(Dr. Mrinalini Darswal)
Project Director (DSACS)

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**List of attendance of the Meeting of Inter-sectoral Co-ordination Committee
on 22nd Feb. 2017 at 5:30 PM**

S. No.	Name & Designation	Department	Email_id
1.	Dr. M. M. Kutty Chief Secretary, GNCTD		In Chair
2.	Mr. Madhup Vyas Secy. (H&FW)	Health Department, GNCTD	pshealth@nic.in
3.	Sh. A. K. Singh Secy. & Commissioner	Labour Department, GNCTD	labcomn@nic.in
4.	Smt. Punia. Srivastava Secy. (Education)	Education Department, GNCTD	secyedu@nic.in
5.	Dr. Dilraj Kaur Secy. Social Welfare/WCD	Social Welfare & WCD, GNCTD	pssw@nic.in
6.	Dr. Mrinalini Darswal, Project Director/Member Secy.	DSACS	delhisacs@gmail.com
7.	Dr. Kirti Bhushan Director General Health Services	DGHS, GNCTD	dirdhs@nic.in
8.	Dr. N. G. Desai Director	IHBAS	directorihbas@vsnl.net
9.	Mr. Osama Tawil, Country Director	UNAIDS	Tabilo@unaid.org
10.	Dr. Neeraj Dhingra DDG NACO	On behalf H&FW, GOI	dhingradr@hotmail.com
11.	Mr. Sanjay Kumar Saxena Director	Deptt. of WCD	wcd@nic.in
12.	Mr. Khagesh Garg Director	Ministry of social Justice	Khajesh.g@gov.in
13.	Dr. Santosh Saha, Psychiatrist	Prison HQ, Tihar	drsantoshkumarsah@gmail.com
14.	Smt. Usha Saini DDE(Schools)	Education	schbranch@hotmail.com
15.	Dr. Sumit Kumar Gupta Assistant Professor	IHBAS	Sk Gupta.43@gov.in
16.	Mr. D. Boken Drug inspector	Drug Control	dineshboken@gmail.com
17.	Mr. Sanjeev Tyagi ACP Crime Branch	Delhi Police	satvinde@yahoo.com
18.	Mr. Rajiv Shaw Project Director	Sharan, NGO	Rajivshaw1@gmail.com
19.	Mr. M. Sunil Kumar Deputy Director	NISD	Sunil_masala@yahoo.com
20.	Dr. Ravindra Rao, NDDTC	AIIMS, NDDTC	dravrao@gmail.com
21.	Mr. Kunal Kishore UNODC	UNODC	Kamalkishore@unodc.org
22.	Mr. Shaleen Mitra OSD to Minister SW/WCD	SW/WCD	Shaleen.mitra@gmail.com
23.	Mr. Manoj Kumar Singh	Salam Balak Trust, NGO	
24.	Mr. A.K Tiwari	Salam Balak Trust, NGO	
25.	Mr. Avinash K Singh	Save the Children, NGO	s.avinash@savethechildren.in
26.	Dr. Sita Bhagi	SDMC	dydhasssdmc@gmail.com
27.	Dr. R. Chandravalli	NDMC	dydhenorth@gmail.com

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S. No.	Name & Designation	Department	Email_id
28.	Mr. Atul Nasa	Drug Control Deptt.	atulnasa@gmail.com
29.	Dr. Rajesh Kumar	SPYM	rajesh@sypm.org
30.	Dr. A. K. Gupta Addl. Director SHS	DGHS	schoolhealthscheme@gmail.com
31.	Chanchal Yadav	NDMC	secretary@ndmc.gov.in
32.	Ms. Geetanjali Goel Secy. (Admn)	DLSA	GeetanjaliGoel@yao.com
33.	Sh. S. C. Vats	WCD	Scvats.delhi@gmail.com
34.	Ms. Nandani Kapoor Senior Advisor	UNAIDS	kapoor@uniads.org
35.	Sh. S. K. Sharma Addl. Director Education	SDMC	Sksharma18762@gmail.com
36.	Ms. Anita Naudiyal Add. Director Education	SDMC	adeplansdmc@gmail.com
37.	Mr. Madho Singh Zonal Director	Narcotic Bureau	Zddzu_ncb@nic.in
38.	Dr. Ajay Lekhi CAMO EDMC	Deptt. Of Helath EDMC	Dr_lekhi@yao.co.in
39.	Mr. Ambuj Kumar Asstt. Director	EDMC	Ambuj.kumar1966@gmail.com
40.	Dr. Parveen Kumar Addl. PD	DSACS	barwala@rediffmail.com
41.	Mr. Mohit Ahuja Prog. Manager Health	Plan India	Mohit.ahuja@planindia.org
42.	Mr. R. S. Meena Addl. Commissioner	EDMC	
43.	Ms. Pankaj Asthana Member	DUSIB	

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SECRETARY
STATE OF BIHAR
DEPT. OF HEALTH
G.P.O. BAHAR, BIHAR

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DELHI STATE AIDS CONTROL SOCIETY
(GOVT. OF NATIONAL CAPITAL TERRITORY OF DELHI)
DHARAMSHALA BLOCK, DR. BSA HOSPITAL, ROHINI, DELHI - 110 085

No. F. No. 8(221)/DSACS/DAP/2016/Part1/787-824

Date: 2/6/17

MINUTES OF THE MEETING

Second meeting of the 'Intersectoral Co-ordination Committee' for coordination of comprehensive response for drug abuse prevention and de-addiction services was convened on 5th May 2017 at 4:00 PM in Delhi Secretariat under Chairmanship of Chief Secretary, Govt of NCT of Delhi.

The meeting was attended by committee members as per list of attendees attached. The following issues were discussed and decided in the meeting:

S.No.	Agenda/Issues	Status/discussion	Decisions Taken /Action
1	Minutes of the previous meeting	The minutes of the previous meeting held on 22 nd February 2017 were placed before the committee.	The minutes of the previous meeting held on 22 nd February 2017 were accepted.
ISSUES PERTAINING TO H&FW DEPARTMENT & DSACS			
2	Status of setting up of deaddiction centres Status of deaddiction centre at DCBH Recruitment Status for earmarked hospitals	It was informed that 60 beds have been earmarked for inpatient management of Children & Adolescents with Substance Abuse in 6 Delhi Govt Hospitals including a new 30-bedded Model Deaddiction Centre in DCB Hospital. 45 new contractual posts are sanctioned by Competent Authority for 6 Govt. Deaddiction centres [SR Psychiatry.-9, Clinical Psychologist-6, Social Workers-7, Attendants (peers)-23] for a period of one year. The Recruitment Process has been initiated. IHBAS conducted and selected 5 candidates [SR-2, Clinical Psychological -1, Social Workers-2] through walk-in-interviews and the proposal has been submitted for approval of competent authority. Interviews for remaining 40 posts	The Chairperson decided that these posts need to continue and may be created on regular basis by the department. After creation, the posts may be sent to concerned selection authority (DSSB/UPSC) for recruitment. (Action: H&FW department, AR department, MS of Hospitals concerned) It was recommended that the Juvenile Deaddiction ward at DCBH may be well ventilated. Useful aids such as educational aids/ sturdy toys etc. may be made available through Juvenile Justice fund for the juvenile inmates. (Action: MS DCBH, WCD Department)

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S No.	Agenda/Issues	Status/discussion	Decisions Taken / Action
	<p>Deaddiction centers Juveniles- Status</p>	<p>have been conducted at GIPMER on 5.5.17</p> <p>Secretary Health has instructed concerned hospitals not to use beds earmarked for juvenile drug/substance addicts for any other purpose.</p> <p>The Status of juveniles treated at the deaddiction centre at 6 hospitals was presented to the committee.</p> <p>It was also informed that the OST centre in Tihar Jail has been restarted for Jail inmates. OST shall also be provided to inmates at DCB Hospital deaddiction centre for juveniles.</p>	<p>It was desired that the centres be made fully functional and actions to that effect may be expedited.</p> <p>(Action: H&FW department, MS of Hospitals Concerned)</p>
3	<p>Strengthening of School Health Services</p>	<p>A meeting was held under the Chairmanship of Hon'ble Dy. CM on 15.3.17 on the subject "Medical crisis management in schools". H&FWD agreed to the proposal of Directorate of Education (DOE), GNCT of Delhi for creation of 1300 posts of Staff nurses & 1300 posts of Multitask workers @ 1 per school and 120 MOs @ 1 M.O. over 20000 students in DOE in compliance to Delhi School Education Act and directions of Hon'ble High Court to strengthen medical crisis management in schools. Subsequently, Addl. Director SHS attended meeting at Directorate of Education to finalize Draft Cabinet Note incorporating suggestions of Health Dept.</p>	<p>Directorate of Education may take further necessary action in this regard.</p> <p>(Action: Directorate of Education)</p>

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Directorate of Education
GNCT of Delhi

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S.No.	Agenda/Issues	Status/discussion	Decisions Taken /Action
4	Progress made in setting up of Mohalla Clinics, attached with the schools	Proposal for setting up of Mohalla Clinics attached with the Schools has been approved by Hon'ble LG of Delhi. The approval is subject to certain conditions such as ensuring safety and security of the students, clearly delineated with separate entry and exit, the clinics not having any adverse impact on the infrastructural requirements of the schools concerned, no violation of the Delhi School Education Act and Rules or any other judicial pronouncement on the subject, portion of the land to be given on 'right to use only' basis, conditions laid down by DDA/land owning agencies for construction of any temporary structure/porta cabin be strictly followed and all statutory permissions/no objection certificates be obtained from the local bodies concerned.	This was decided that this may be clearly indicated that the Mohalla Clinic in Schools are for the general public and not specifically for school children. Action as per approval of LG may be taken. (Action : DSHM, DGHS,GNCT)
5	Issuance of notification of ban on sale of correction fluids/whiteners, thinners/ diluters and vulcanized solution/ sulochans to children	The committee was informed that Government of NCT of Delhi has been directed to issue appropriate instructions by way of notification circular or otherwise, banning the sale of correction fluids/whiteners, thinners/ diluters and vulcanized solution/ sulochans to children as per orders dated 20/3/2017 of Hon'ble Juvenile Justice Board in FIR No 422/16. It was also informed that one notification issued by H&FW department vide notification F. No. X. 11029/6/2010-DDAP Dated 17 th July,	The Committee consented for issuance of the notification. The notification may be sent for approval of competent authority after vetting by law department. (Action: H&FW Department, Law department) It was decided that while revenue and police department may enforce the ban, the taskforce comprising of Deputy Commissioner (Revenue) and DCP of district concerned may monitor the implementation of

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S No.	Agenda/ Issues	Status/discussion	Decisions Taken / Action
		2012 is also operational in Delhi. It was informed that the ambit of the present notification was broader covering rubber solutions/sulochans and banning to sale of these items to children. It was informed that the notification is being issued in accordance to the provisions of Section 188 of Indian Penal Code read with section 77 of Juvenile Justice (Care and Protection of Children) Act, 2015 and shall be issued by H&FW department.	ban in their district on a monthly basis. (Action: Deputy Commissioner (Revenue) and DCP of district concerned)
6	De-addiction beds in RML and SJH	It was informed that DO letter was sent to Secretary (Health), Govt of India to activate the beds for deaddiction treatment in RML and SJH hospitals. RML hospital has replied that out of 24 deaddiction beds, 5 are for children. But hospital is not maintaining separate in-patient record for children. SJH has replied that they have 10 Psychiatry beds which they use for deaddiction purpose if needed.	
7	Budget provisions for activities related to Deaddiction programme At DSACS	This was informed that DSACS has submitted budgetary requirement to H&FW department for Rs. 9.85 Crores for FY 2017-18. But the same has not been budgeted in the allocation for 2017-18. The proposal is being resubmitted.	DSACS may resubmit the proposal to H&FW department for needful. (Action: DSACS, H&FW Department, Planning department)
8	Creation of a De-addiction Cell at DSACS and posting of Dr. A.K.	Proposal has been moved by DSACS for creation of 8 posts. It was proposed to set up a De-addiction cell at DSACS with Dr. A.K. Gupta CMO	Secretary Health was requested to examine the issue of posting of Dr. A.K. Gupta, Addl.

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S No.	Agenda/ Issues	Status/ discussion	Decisions Taken / Action
	Gupta, Addl. Director (DGHS) on diverted capacity as its Technical Head	(SAG), Additional Director (DGI IS) as its Technical Head to be posted on diverted capacity from H&FW Department and report to PD DSACS cum Spl. Secy. Health & Member Secretary (ISCC). It was informed by Secretary Health that Dr A.K. Gupta was looking after several other responsibilities also and may not be possible to spare him.	Director (DGHS) on diverted capacity as its Technical Head. (Action: H&FW Department)
ISSUES PERTAINING TO SOCIAL WELFARE DEPARTMENT/WCD DEPARTMENT			
9	Special facility for Juvenile	It was informed that meetings have been convened under chairmanship of Secy. Social Welfare Department on 10/4/2017 and 2/5/2017 to discuss the issue. In the meeting it has been agreed to propose for formation of society to undertake further activities and pilot for setting up a deaddiction/ rehabilitation centre be undertaken at Lampur Beggar Home. Draft MoA/ Rules and Regulations of society discussed in the meeting on 2/5/2017. It was informed that a comprehensive proposal/ cabinet note being prepared.	Social Welfare Department may expedite and put up proposal for approval of competent authority. (Action : Department of Social Welfare and WCD)
10	Utilisation and Operationalisation of Juvenile Justice Funds by WCD, GNCTD	It was informed that a JJF has already been notified by WCD department in 2016 with an initial allocation of Rs 5 lakhs.	It was decided that the funds may be operationalised and also used for providing useful items such as educational aids/ sturdy toys etc. for the juvenile inmates at the proposed Juvenile Deaddiction Centre at Deep Chand Bandhu Hospital and other facilities hosting such juveniles. (Action : Department of Social Welfare and WCD, MS, DCBH)

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S No.	Agenda/Issues	Status/discussion	Decisions Taken /Action
11	Issue of spreading awareness by WCD, GNCTD about National Drug Addiction Helpline No 1800-11-0031	It was informed that regular publicity about National Drug Addiction Helpline operated by Ministry of Social Justice and Social Empowerment (MSJE), Govt of India is being carried out by WCD/ Social Welfare Department through its activities. The matter regarding possibility to launch 3 to 4 digit helpline can only be taken up by MSJE.	MSJE may be requested to explore possibility to launch 3 to 4 digit helpline. (Action: Department of WCD)
ISSUES PERTAINING TO DEPARTMENT OF EDUCATION			
12	Survey of School Children	This was informed that Directorate of Education has initiated action to strengthen School Health Scheme which will facilitate screening. In Oct 2016, Directorate of Education shared a list of 4073 children identified with Substance abuse out of 16 lakh children surveyed by all Local Bodies. SHS has issued an order to all SHCs, & Hospitals of GNCTD & Municipal bodies to refer children identified with Drug/substance abuse to any of the deaddiction centers set up in 6 Hospitals of GNCTD (including IHBAS) or District Mental Health facilities of IHBAS. In the year 2016-17, SHS (DGHS), GNCT of Delhi carried out an intensive survey of 6530 school children & identified 1069 children with substance abuse. The identified children were counselled by trained MOs and PHNs of SHS while 62 were referred to a designated Government	Directorate of Education/MCD may do needful for referring such students to juvenile deaddiction as per need for appropriate addressal of their problems. (Action: Directorate of Education, Local Bodies)

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S No.	Agenda/Issues	Status/discussion	Decisions Taken /Action
		Deaddiction Centers or District Mental Health Facility.	

The meeting ended with vote of thanks to the chair.

This issues with the prior approval of Chief Secretary.

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Dr. Mrinalini Darwal
30/5/18
(Dr. Mrinalini Darwal)
Project Director (DSACS)

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**List of attendees: Meeting of Inter-sectoral Co-ordination Committee convened on
05-05-2017 at 4.00 PM**

1. Dr M .M. Kuty, Chief Secretary , GNCTD (In Chair)
2. Sh. Anil Kr. Singh, Secy. Social Welfare and WCD, GNCTD
3. Sh. Madhup Vyas, Secy. (H&FW), Health Department, GNCTD
4. Sh. Sanjay Kr. Saxena, Secretary cum Commissioner (Labour), GNCTD
5. Dr. Mrinalini Darwal, Project Director/Member Secy., DSACS
6. Dr. Kirti Bhushan, Director General Health Services, GNCTD
7. Dr. R.K. Gupta, Medical Superintendent, Deep Chand Bandhu Hospital,
8. Sh. Praveen Gupta, Commissioner, North Delhi Municipal Corporation
9. Ms. Saumya Gupta, Director (Education), GNCTD
10. Sh. Manoj Kumar, Director (TTE), GNCTD
11. Ms. Garima Gupta, Director, Higher Education, GNCTD
12. Sh. Shaleen Mitra, OSD to Minister SW/WCD, GNCTD
13. Sh. Chanchal Yadav, Secretary, New Delhi Municipal Council
14. Sh. R. S. Meena, Addl. Commissioner, East Delhi Municipal Corporation
15. Ms. Meeta Singh, Addl. Commissioner, South Municipal Corporation
16. Sh. Naveen Gupta, Addl. Secretary, Delhi State Legal Services Authority
17. Sh. Madhu Singh, Zonal Director, Narcotics Control Bureau
18. Dr. A.K Gupta, Addl. Director (SHS), DGHS, GNCTD
19. Sh. E Raja Babu, SPD (SSA), Edu.Dept., GNCTD
20. Sh. Tapeshwer Jugran, DDE Schools, Dir. of Education
21. Dr. Sunita S Kaushik, Addl. Director Education, GNCTD
22. Sh. Ravinder Kumar, ADE (EVGC), DDE(SSA/RMSA), Education Deptt., GNCTD
23. Sh. Atul Nasa, Asstt. Drugs Controller, Drug Control Department, GNCTD
24. Sh. D. Boken , Drug Inspector, Drug Control Department
25. Sh. S.K. Singh, JD (Admn.), IHBAS
26. Dr. Sumit Kr. Gupta, Assistant Professor , IHBAS,
27. Sh. Krishan Kumar, Director Education, North Delhi Municipal Corporation
28. Dr. Ajay Lekhi, CAMO& DHO (School), Department of Health, East Delhi Municipal Corporation
29. Sh. Mukesh Yadav, Addl. Director Education, South Delhi Municipal Corporation
30. Ms. Anita Naudiyal, Add. Director Education, South Delhi Municipal Corporation
31. Dr. R.Chandravalli , Dy.DHA , North Delhi Municipal Corporation
32. Dr. Sita Bhagi , Dy.DHA , South Delhi Municipal Corporation
33. Dr Parveen Kumar, APD, DSACS
34. Dr. J. K. Mishra, JD(TI), DSACS
35. Sh. S. C. Vats, Assistant Director, WCD, GNCTD
36. Sh. Kunal Kishore, UNODC
37. Sh. Samresh Kumar, TL -Ti, TSU-DSACS
38. Sh. Mohit Ahuja, Prog. Manager, Health Plan India
39. Ms. Neha Sabharwal, Save the Children
40. Sh. Luke Samson, Sharan NGO
41. Sh. Rajeev Shaw, Project Director, Sharan NGO
42. Dr. Rajesh Kumar, Director, SPYM

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DELHI STATE AIDS CONTROL SOCIETY
(GOVT. OF NATIONAL CAPITAL TERRITORY OF DELHI)
Dharamshala Block, Dr. BSA Hospital, Rohini, Delhi – 110 085

No. F. No. 8(221)/DSACS/DAP/2016/Part1/

Date:

MINUTES OF THE THIRD MEETING OF THE 'INTERSECTORAL CO-ORDINATION COMMITTEE'
FOR COORDINATION OF COMPREHENSIVE RESPONSE AGAINST DRUG ABUSE

Third meeting of the 'Intersectoral Co-ordination Committee' for coordination of comprehensive response for drug abuse prevention and de-addiction services was convened on 15th September 2017 at 11:30 AM in Delhi Secretariat under Chairmanship of Chief Secretary, Govt of NCT of Delhi. The meeting was attended by committee members as per list of attendees attached. The following issues were discussed and decided in the meeting:

S No.	Agenda/Issues	Status/discussion	Decisions Taken /Action
1	Minutes of the previous meeting	The minutes of the previous meeting held on 5 th May 2017 were placed before the committee.	The minutes of the previous meeting held on 5 th May 2017 were accepted.
ISSUES PERTAINING TO H&FW DEPARTMENT			
2	Status of Deaddiction facilities at Delhi Government Hospitals	i. It was informed that 60 beds are available for inpatient management of Children & Adolescents with Substance Abuse in 7 Delhi Government Hospitals including 30-beds at newly established Model Deaddiction Centre at Deep Chand Bandhu Hospital (DBCH). The status of children treated at the juveniles deaddiction centre at these hospitals was presented to the committee. It was informed that Secretary (Health) had directed hospitals showing shortfall in performances of deaddiction facilities to take steps such as giving publicity and co-ordinating with NGOs. It was informed that performance of DDUH and LBSH has improved thereafter. It was informed that the low number of admissions have been due to non-availability of patients and few parents coming forward for admission of the children having substance abuse to these hospitals.	i. Medical Director, BSA Hospital alongwith Pr. Secy.(H) may apprise Chief Secretary about the steps taken by the hospital to make the juvenile deaddiction facility fully operational. (Action: MD, BSAH)
		ii. The meeting was informed about the slow progress of the work done by PWD in setting up of 30 bedded deaddiction facility on second floor of DCBH.	ii. Engineer-in-Chief, PWD was requested to expedite the work and Addl. Director, School Health Scheme (SHS) was asked to apprise Chief Secretary about the progress of work done at DCBH by PWD after a month. (Action: Dr AK Gupta, Addl. Director(SHS), PWD)

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Asstt. Director
Directorate of Prohibition
Govt. of Delhi
K.G. Marg, New Delhi-11

S No.	Agenda/Issues	Status/discussion	Decisions Taken /Action
		<p>iii. The status of manpower posted at these facilities was presented. It was desired that the efforts may be expedited to fill the vacant posts at the earliest.</p>	<p>iii. The process to fill the vacancies may be expedited at the earliest. (Action: H&FW department)</p>
		<p>iv. Dr Anuj Mittal, from DDU hospital raised concern about the consent for starting any treatment to admitted children.</p>	<p>iv. As regards the query raised by Dr Anuj Mittal from DDU hospital, it was informed that the consent for treatment of street children may be obtained through established procedure through CWC concerned or through NGO concerned in case the child has been got admitted by NGO. (Action : Hospitals concerned)</p>
		<p>v. Dr Rajesh from SPYM, appreciated the functioning of facility at DCBH. The issues related to transportation, getting investigations done on juveniles admitted through the NGO and provision of clothes/ footwear to the juveniles admitted was raised.</p>	<p>v. It was decided that it was responsibility of the hospital for the investigations of admitted child and needful may be done by hospital concerned. (Action: MS, Hospitals concerned) WCD may do the needful for incurring expenses related to transportation, and provision of clothes/footwear for the admitted juveniles with funds available with JJF. (Action: MS, Hospital concerned, WCD department)</p>
		<p>vi. It was informed by representative from IHBAS that IHBAS is a referral centre for patients with substance abuse and has never refused any referred patient.</p>	<p>vi Health department may advise the Hospitals' juvenile deaddiction centres and the NGO for Society for Promotion of Youth and Masses (SPYM) to refer patients to IHBAS. (Action : Health and Family Welfare Department, IHBAS)</p>
3	<p>Issuance of notification of ban on sale of correction fluids/whiteners, thinners/ diluters and vulcanized solution/ sulochans to</p>	<p>The committee was informed that a notification has been issued banning the sale of correction fluids/whiteners, thinners/ diluters and vulcanized solution/ sulochans to children . It was informed that the ambit of the present notification was broader covering rubber solutions/ sulochans and banning sale to children. It was informed that the notification is being issued in accordance to the provisions of Section 188 of Indian Penal Code</p>	<p>The District Task force (Dy. Commissioner (Revenue) and Dy. Commissioner (Police) may monitor the implementation of ban in their District and submit the monthly reports for perusal of the Committee. (Action : Divisional Commissioner and Delhi Police)</p>

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Asstt. Director
Directorate of Prohibition
Govt. of Delhi
K.G. Marg, New Delhi-11

S No.	Agenda/Issues	Status/discussion	Decisions Taken /Action
	children	read with section 77 of Juvenile Justice (Care and Protection of Children) Act, 2015.	
4	ARSH Clinic and linking to out of School Children	<p>It was informed that 25 Adolescent Reproductive and Sexual Health (ARSH) clinics were functioning in various health facilities of Delhi. Director SSA suggested that the services at these facilities may be useful for identifying substance abuse amongst out of school children who may also be linked to deaddiction services.</p> <p>It was informed that the training of staff at these facilities is being organised through SPYM and substance abuse related counselling/services shall be added to ARSH clinics in October 2017.</p>	<p>A meeting may be convened by DFW with representative from Director Family Welfare, DGHS, Sarv Shiksha Abhiyan (SSA) and SPYM for better coordination in respect of out of school children.</p> <p>(Action: Director, Directorate of Family Welfare)</p>
ISSUES PERTAINING TO DEPARTMENT OF EDUCATION			
5	Survey of School Children	<p>i. It was informed that Directorate of Education has initiated action to strengthen School Health Scheme which will facilitate screening of children. It was informed that SHS, DGHS has issued an order to all SHCs, & Hospitals of GNCTD & Municipal bodies to refer children identified with Drug/substance abuse to any of the deaddiction centers set up in 6 Hospitals of GNCTD (including IHBAS) or District Mental Health facilities of IHBAS. It was informed that 150 vacancies of Education and Vocational Counsellors (EVC) out of 500 vacancies have been filled up.</p> <p>ii. It was informed that Municipal Corporations have carried out survey to identify out of school children. It was felt that the details of these children identified through survey (Ward Committee Registers) may be shared with Sarv Shiksha Abhiyan and Education department</p> <p>iii. OSD to Dy CM informed the meeting about increasing trend of Hukka bars and substance abuse in private schools. He suggested to develop an SOP / mechanism to involve Private schools in identification of early substance abuse amongst these children.</p>	<p>i. Directorate of Education may take further necessary action to fill in the vacancies of the EVCs in hospitals and Secretary (Education) may apprise Chief Secretary in this regard.</p> <p>(Action: Directorate of Education)</p> <p>ii. The details of identified children may be shared with concerned agencies to take steps to get them admitted in schools. Directorate of Education/ Municipal Corporations may do needful for referring such students to juvenile deaddiction facilities as per need for appropriate addressal of their problems.</p> <p>(Action: Municipal Corporations, Directorate of Education, Sarvshiksha Abhiyan)</p> <p>iii. Directorate of Education may develop SOP in consultation with the concerned agencies to identify drug abuse in school children including private schools and also take action to</p>

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Asstt. Director
Directorate of Probation
Govt. of D.P.
A.C. Marg New Delhi

S No.	Agenda/Issues	Status/discussion	Decisions Taken /Action
			<p>identify hotspots and inform the concerned agencies.</p> <p>(Action; Directorate of Education).</p>
		<p>iv. It was discussed that teachers play very important roles in early identification of students with substance abuse. It was informed that SPYM has provided orientation training to teachers in yearly workshops/seminars of teachers organised by Municipal Corporations.</p>	<p>iv. The orientations in respect of substance abuse may be made a permanent feature of the regular and expertise available at IHBAS may be taken in this regard.</p> <p>(Action : Education Department, Municipal Corporations)</p>
ISSUES PERTAINING TO SUPPLY REDUCTION – DELHI POLICE/ NARCOTICS CONTROL BUREAU			
6	<p>Drug Supply situation in Delhi and co-operation sought from other departments</p>	<p>i. A presentation was made by Narcotics Branch Delhi Police and Narcotics Control Bureau on the drug supply situation in Delhi and seizures made by the agencies.</p> <p>It was informed that the Delhi Government departments may intimate any instance of violations of the law observed by them in relation to substance abuse where support from Delhi police is required.</p> <p>ii. It was pointed out that there has been an increase in number of seizures and quantity of Cocaine in 2017. It was informed by representative of NCB that role of Delhi Police is crucial to address the widely prevalent street peddling of drugs. A number of foreign nationals have also been found indulging in peddling of drugs in some areas. The issue need to be taken up with MEA also for appropriate action.</p> <p>iii. There is need for concerted effort to curb the availability of pharmaceutical drugs in Delhi. It was felt that there is a need for better co-ordination between Police and Drugs Controller and the issue may be followed up by Principal Secretary (Health). The representative from Delhi Police ensured to extend all help to Drugs Control Department in curbing sale of legitimate drugs.</p>	<p>i. Delhi Government departments may bring any violations of the law in relation to substance abuse or instance where support from Delhi police is required to the knowledge of Delhi Police.</p> <p>(Action: All Delhi Government departments)</p> <p>ii. The issue of foreign nationals involved in drug peddling may be taken up with MEA for appropriate action.</p> <p>(Action : Delhi Police/Narcotics Control Bureau)</p> <p>iii. The analysis on the supply situation may be shared by Police/ Narcotics Bureau with Government agencies and multi agency meetings may be regularly held with all the stake holders. Co-ordination meeting may be held monthly or as frequently as deemed necessary by the stakeholders - namely Delhi Police, Narcotics Control Bureau, Drugs Control Department, Delhi, Directorate of Revenue Intelligence, Customs and Local Municipal</p>

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S. No.	Agenda/Issues	Status/discussion	Decisions Taken /Action
			<p>Corporations under Chairmanship of Principal Secretary (Health). This Co-ordination Committee will place findings/observations before the Intersectoral Co-ordination Committee.</p> <p>(Action : Delhi Police/Narcotics Control Bureau, Drugs Control Department)</p> <p>The list of hotspots identified by AIMS/WCD study, mapping of DSACS and Director SSA may be shared with Delhi Police.</p> <p>(Action: DSACS, WCD, Director SSA)</p>
		<p>iv. It was decided that a mechanism to explore co-ordination amongst Street Vendor (Tehbazaari) controlling authorities and Police be worked out so as to identify and cancel the licences of vendors found indulging in sale of banned substances/material. It was brought to the notice that though there has been a ban on sale of tobacco/ gutkha etc. under Food Safety Act, the ban has not been effectively implemented and some of the Street Vendors have resorted to selling tobacco, khaini etc. with innovations.</p>	<p>iv. The local bodies may submit monthly reports on the Action Taken in regard of Street Vendors indulging in sale of banned substances in their jurisdiction in close co-ordination with Delhi Police.</p> <p>(Action : Municipal Corporations, Delhi (Police))</p>
		<p>v. The representative from Delhi Police stressed the need to regulate H1 category of drugs by Drugs Control Department at stockist/distributor level. The Drugs Control Department informed that actions are being taken from time to time for example action was taken in case of cough syrups recently.</p> <p>It was suggested that mandatory Barcoding of Psychotropic Drugs may help in curbing illegal supply of such drugs. It was informed by Drugs Control department that the issue need to be taken up with Drugs Controller General of India.</p> <p>The issue of regulation of Internet Pharmacies and their roles in sale of medicines prone to abuse may be taken up at the appropriate level.</p>	<p>v. Drugs Control department may advocate for appropriate changes in the Drugs and Cosmetics Act for effective monitoring at appropriate level.</p> <p>The issue of regulation of Internet Pharmacies, their role in sale of medicines prone to abuse and mandatory Barcoding of Drugs may be taken up at the appropriate forum by Drugs Control Department.</p> <p>(Action : Drugs Control Department)</p>

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Asstt. Director
 Directorate of Prohibition
 Govt. of Delhi
 K.G. Marg, New Delhi-01

S No.	Agenda/Issues	Status/discussion	Decisions Taken /Action
		vi. It was discussed that at present Police/Narcotics Control Bureau is authorised to book offenders under NDPS act and that Drugs Control Department and Excise department may be authorised to book the offenders.	The proposal may be submitted to Competent Authority to authorise Drugs Control / Excise Department to book offenders under NDPS Act due to current situation. (Action : Drugs Control Department, Department of Excise)
7 ISSUES RELATED TO SOCIAL WELFARE/WCD DEPARTMENT			
	i. Preparation of Cabinet Note for • Establishment of Special facility for Juvenile at Lampur. • Creation of Society for substance abuse and • Regulation of Private deaddiction centres	i. It was informed that the Department is preparing a proposal for establishing a model juvenile deaddiction centre at Lampur, creation of society for drug deaddiction and scheme for grant in. aid to NGOs for deaddiction/ rehabilitation of addicts.	i. The Social Welfare/WCD was requested to expedite the proposal for approval of Competent Authority in consultation with Stakeholders. Juvenile Justice Committee of Hon'ble High Court may be apprised about the draft regulations in regard of private centres providing deaddiction services. (Action: Department of Social Welfare/WCD)
	ii. Operationalisation of Juvenile Justice Fund	ii. SPYM raised issues related to transportation, and provision of clothes/footwear to the Juveniles at the deaddiction centres. It was informed that items of daily use such as clothes/ footwear and other items are being provided by WCD from Juvenile Justice fund.	ii. WCD may do the needful for incurring expenses related to transportation, and provision of clothes/footwear for the admitted juveniles from Juvenile Justice Fund. (Action: MS, Hospitals concerned, WCD department)
	iii. Declaration of centres in terms of section 71 of NDPS Act	iii. It was discussed that no centre has been established or declared in terms of section 71 of NDPS Act for identification, treatment, education, after-care, rehabilitation, social reintegration of addicts and for supply of any narcotic drugs and psychotropic substances to the addicts registered with the Government. It was felt that there is a need to declare one centre for this purpose that will facilitate law enforcing agencies to take action against individuals found with drugs in non-commercial quantities as per law. It was also suggested to explore the possibilities including NGO centres for this purpose.	iii. Department of Social Welfare/WCD in consultation with concerned may take appropriate action to identify / declare centre in terms of section 71 of NDPS Act. (Action : Department of Social Welfare/ WCD)

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S No.	Agenda/Issues	Status/discussion	Decisions Taken /Action
OTHER ISSUES			
8	ISCC related issues	i. It was observed that representative of Ministry of Social Justice and Empowerment, GOI has not been attending the ISCC meetings. The MSJE releases funds to the NGOs running the Deaddiction Centres but the funds has not been released for last two years.	i. It was desired that M/o SJE, GOI may be requested to send their representative for the meeting regularly. (Action : Member Secretary, ISCC)
		ii. It was discussed that there is a need to include the representative from Directorate of Revenue Intelligence, Customs and Excise Department as members of Intersectoral Co-ordination Committee (ISCC) so as to make the ISCC more effective.	ii. It was decided that proposal may be putup to include the representative from Directorate of Revenue Intelligence, Customs and Excise department as members of Intersectoral Co-ordination Committee (ISCC). (Action : Member Secretary, ISCC)

This issues with the approval of Chief Secretary.

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20/07/18

Asst. Director
Directorate of Prohibition
Govt. of Delhi
R.G. Marg, New Delhi

S.N. Misra
23/9/17
(S. N. Misra)
Member Secretary (ISCC)
Project Director, DSACS

**DELHI STATE AIDS CONTROL SOCIETY
(GOVT. OF NATIONAL CAPITAL TERRITORY OF DELHI)**
Dharamshala Block, Dr. BSA Hospital, Rohini, Delhi - 110 085

No. F. No. 8(221)/DSACS/DAP/2016/Part1/2341-2345 Date: 25-10-2017

**MINUTES OF THE FOURTH MEETING OF THE 'INTERSECTORAL CO-ORDINATION
COMMITTEE' FOR COORDINATION OF COMPREHENSIVE RESPONSE AGAINST
DRUG ABUSE CONVENED ON 11TH OCTOBER 2017 AT 5:15 PM IN DELHI
SECRETARIAT UNDER CHAIRMANSHIP OF CHIEF SECRETARY, GOVT OF NCT OF
DELHI**

The fourth meeting of the 'Intersectoral Co-ordination Committee' for coordination of comprehensive response for drug abuse prevention and de-addiction services was convened on 11th October 2017 at 5:15 PM in Delhi Secretariat under Chairmanship of Chief Secretary, Govt of NCT of Delhi. The meeting was attended by Members of the Committee as per list attached. The agenda for the meeting was formulation of Rules proposed as 'Delhi Substance Abuse Disorder Treatment, Counselling and Rehabilitation Centre Rules' consequent to the orders of the Hon'ble High Court of Delhi in WP(CrI) 2381/2017, Rakesh Kumar versus State of NCT of Delhi & Others and WP(C) 8217/2017, Nikhil Borwankar versus NCT of Delhi. The following discussions were held and decisions taken :

1. Directions of the Hon'ble High Court of Delhi

It was informed that Hon'ble Delhi Court, vide order dated 21st Sept 2017 in WP (CRL) 2381/2017, Rakesh Kumar versus State of NCT of Delhi & Others has held that De-addiction / Rehabilitation Centres require to be regulated. It was informed that another WP(C) 8217/2017, Nikhil Borwankar versus NCT of Delhi seeking directions to State to frame guidelines for the establishment, licensing accreditation, regular check-ups, maintenance and operation of de-addiction and rehabilitation centres in Delhi has also been clubbed with this and the same directions have been issued vide order dated 21st Sept 2017.

Hon'ble High Court of Delhi in the case of Rakesh Kumar versus GNCT Delhi has issued directions to the Chief Secretary to work out the scheme / arrangement for mapping and ensuring that no such centres under the garb of being called a de-addiction centre/rehabilitation centre, old age home, guest houses where unwanted elders are dumped without necessary permission and regulations. draw broad outlines for regulation of these centres and giving necessary publicity, to give opportunity for centres to seek registration/ NOC /license from concerned department under relevant provision of law and for framing of rules and regulations at the earliest.

*Attested
20/3/18*

Asstt. Director
Directorate of Prohibition
Govt. of Delhi
K.G. Marg, New Delhi-110011

2. Mapping Exercise

In view of the directions of the Hon'ble High Court, it is required to map all de-addiction centres/rehabilitation centres, old age homes, guest houses where unwanted elders are dumped etc. and operating in Delhi. It was informed by Secretary (Social Welfare) that rules are being framed by Social Welfare Department in respect of Old age homes as part of the Senior Citizen policy of the Delhi Government.

Regarding mapping of the centres, the Committee was of the view that it would be reasonable to hold that mapping of such centres be a product of regulation rather than a pre-regulation exercise. Each centre shall be then be bound to get registered/licensed under the proposed rules/regulations, thereby bringing all centres under the purview of the law in the time frame that would be prescribed in the Rules/Regulations.

3. Framework for formulation of Rules /Regulation and Licensing Authority

It was informed that Rules have been framed by the States of Haryana and Punjab under the NDPS Act 1985, under section 78 and sub-section (1) read with sub-section (2) of section 71 of the Act. They have established licensing authorities, comprising of Director Health Services and Director (Social Welfare/SJE) jointly. This authority has been empowered to issue licenses to the de-addiction centres that meet the prescribed standards. Further, they have notified their State Level and District Level Committees under the rules to monitor the implementation of the Rules regarding regulation of the de-addiction centres.

The Committee was apprised that in order to regulate such centres, there has to be a registering/licensing authority, like that in the states of Punjab and Haryana. These two states, in their respective regulations, have clearly notified the licensing authorities, their roles and responsibilities as well.

It was informed that State of Tamil Nadu has also promulgated Rules to regulate the de-addiction centres. Hence, the Committee was of the view that the Tamil Nadu rules may be examined.

It was pointed out by Secretary, Social Welfare that tobacco /alcohol substance abuse is quite common and is not covered by the NDPS Act, 1985. He also mentioned that the issue of regulation of de-addiction centres need to be seen in conjunction with the concerned provisions in other laws, like the Mental Health Act, Delhi Nursing Home Act wherein the jurisdiction of other Departments /Agencies, like Social Welfare/WCD Departments, local bodies and police etc. are also prescribed. These agencies play an important role in the regulation of such centres, as such activity may also require permission from these authorities as may be applicable under different rules/regulations. Besides, the role of Revenue/District Administration, Education and NGOs should be kept in mind while suggesting the outline/framing of the rules. Hence, the proposed rules must derive their strength from other existing Acts/Rules wherever required.

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20/2/18

Asstt. Director
Directorate of Rehabilitation
(Gurgaon Cell)
K.C. Bhatnagar, New Delhi-110014

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It was suggested that the decision as to who shall be registering authority should be based on the Allocation of Business Rules in the Government of NCT of Delhi and also on the Capability of that department. It was suggested by Secretary Social Welfare, that though the subject matter of de-addiction and prohibition pertains to WCD Department as per Allocation of Business Rules of GNCT of Delhi, but the licensing of the de-addiction centres should lie within Health department as the operation of de-addiction centres is more of a health/medical issue, though Social Welfare/WCD department does not have any hesitation in taking up the associated rehabilitation issues. After discussions, the Committee was of the view that H&FW department would be in a better position to handle the process of registering/licensing of de-addiction centres.

4. Formation of Committee to formulate a broad outline and rules

It was discussed and observed that framing of the rules for regulation of de-addiction centres is a multi-variance, inter-departmental interaction and, hence, time consuming. It was decided that a committee may be formed comprising of: Nominee of Health Department, GNCT Delhi, Nominee of Social Welfare/WCD Department, GNCT Delhi and one representative from NGOs working in the field of de-addiction. Member-Secretary (ISCC)/ Spl. Secy (H) may anchor the functioning of this committee. This committee may prepare the broad outline of the proposed action in next 15 days and draft rules preferably within the next 3 weeks.

(Action : Member Secretary, ISCC)

5. Power of the Delhi Government to frame the rules

An issue with regard to the power of GNCT of Delhi to notify the rules under NDPS Act, 1985 was raised. On this, the Committee felt that this needs to be examined whether requisite power is vested/delegated to GNCT of Delhi under NDPS Act 1985 or any other Act/Rule under which the rules will be framed and notified.

(Action: ISCC, Law department)

6. Other observations

It was discussed that only a few beds for de-addiction/detoxification of adults are available in Delhi. At present, such facility is available at IHBAS only. It was informed that for an addiction patient, medical care is needed in the initial phase of de-addiction viz. Detoxification, which may last for a few days or even few weeks, followed by prolonged phases of rehabilitation and social integration, wherein role of Social Welfare/family becomes important. It was suggested to explore the possibility of starting dedicated facilities in hospitals, such as SRHC, Narela and DCBH, Ashok Vihar, which are not being fully utilized and some space may be available. Non-availability of psychiatrists in the hospitals to establish/run such hospitals was also pointed out.

(Action : H&FW department)

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It was observed that while framing the rules, it may be kept in mind that Delhi does not have an administrative arrangement, like other states. It is, therefore, necessary to identify carefully the mechanism required for effective implementation of the Rules in a place like Delhi.

The rules should take into account the present conditions of the de-addiction centres the physical infrastructure, medical standards, staffing requirement and also address the inhuman conditions and poor treatment meted out to the inmates, discourage quackery, human violence in such treatment. The rules should take into account institutional capacity of the Authority to implement the rules.

The rules may have provisions like allowing existing de-addiction centres to be registered/licensed within 3 months of notification of such rules, and with an extended period of another next three months but with a penalty. The proposed rules should have synchronisation with existing legislations.

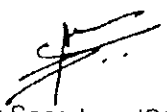
(Action : Drafting Committee)

Department of Social Welfare may also prepare a scheme for regulation of old age homes in NCT of Delhi.

(Action : Social Welfare Department)

The meeting ended with the vote of thanks to the chair.

These minutes are issued with the approval of Chief Secretary/Chairman, Inter Sectoral Co-ordination Committee.


(Member Secretary, ISCC)

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20/3/18
Asstt. Director
Department of Social Welfare
Government of NCT of Delhi

The 2nd meeting of the 'Intersectoral Co-ordination Committee' (ISCC) for coordination of comprehensive response against drug abuse convened on 11th October 2017 at 5:15 pm in Delhi Secretariat under chairmanship of Chief Secretary, Govt of NCT of Delhi

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List of attendees

1. Dr. M.M. Kuty, Chief Secretary, GNCTD (in Chair)
2. Sh. S.N. Sahai, Principal Secretary (Finance), GNCTD
3. Sh. Puneel Goel, Commissioner, South Delhi Municipal Corporation
4. Sh. Anil Kr. Singh Secy. (Social Welfare /WCD), GNTCD
5. Sh. Madhup Vyas, Commissioner, North Delhi Municipal Corporation
6. Sh. S.N. Mishra, Spl Secy. (H)/PD, DSACS, GNCTD
7. Sh. Shurbir Singh, CEO, DUSIB
8. Dr. Kirti Bhushan, Director General Health Services, GNCTD
9. Sh. Kuldeep Singh Gangar, Dir (Edn), EDMC
10. Sh. Suresh Kr. Bhandari, Addl. Commissioner, North Delhi Municipal Corporation
11. Sh. Madho Singh, Zonal Director, NCB
12. Sh. S.S. Parihar, DIG Prisons, Tihar Central Jail
13. Dr. Sushma, DHA, NDMC
14. Ms. Saroj Sain, Addl. DE (Schools), Directorate of Education, GNCTD
15. Sh. Premananda Prusthy, SO to Secy. (SW), GNCTD
16. Sh. Sanjeev Tyagi, ACP, Crime Branch, Delhi Police
17. Dr. Ajay Lekhi, Nodal Officer, EDMC
18. Dr. Arun Sahai, CMO(Med), NDMC
19. Dr. C. K. Mate, CMO/DTO, NDMC
20. Dr. R. Chandravalli, Dy.DHA, NDMC
21. Dr. Sita Bhagi, Dy.DHA, SDMC
22. Dr. Santosh Sah, Psychiatrist, Tihar Central Jail,
23. Dr. Pankaj Kumar, Asstt. Prof, IHBAS
24. Sh. Atul Nasa, Asstt. Drugs Controller, Drug Control Department, GNCTD
25. Sh. S. C. Vats, Assistant Director, WCD, GNCTD
26. Sh. D. Boken, Drug Inspector, Drug Control Department, GNCTD
27. Dr. Rajesh Kumar, SPYM
28. Dr. Parveen Kumar, Addl. Project Director, DSACS
29. Dr. J. K. Mishra, JD(TI), DSACS
30. Sh. Samresh Kumar, TL-TI, TSU-DSACS

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Asstt. Director
Directorate of Rehabilitation
Govt. of NCT of Delhi
K.G. Marg, New Delhi-01