SECOND READING

THE NATIONAL AGENCY FOR THE TREATMENT AND REHABILITATION OF SUBSTANCE ABUSERS (REPEAL) BILL (NO. III OF 2016)

Madam Speaker,

I move that the National Agency for the Treatment and Rehabilitation of Substance Abusers (Repeal) Bill (No. III of 2016) be read a second time.

Madam Speaker,

The purpose of the Bill that we have before the House today concerns the repeal of the National Agency for the Treatment and Rehabilitation of Substance Abusers (NATReSA) Act 1996.

I wish to inform the House, at the very outset, Madam Speaker, that it is certainly not ‘de gaiété de coeur ’ that I am introducing this Bill in the Parliament this afternoon. The decision to wind up the NATReSA has been taken ‘après mûre reflexion’ whilst considering its 'parcours' over the past few years and after an objective assessment of its work.
For members of the House who are not familiar with the history of the NATReSA, it would be good to remember that the NATReSA was set up in September 1996, as a body corporate under the Ministry of Social Security and National Solidarity, following the restructure of the defunct Trust Fund for the Treatment and Rehabilitation of Drug Addicts.

At that time, substance abuse, drug trafficking and the country's degrading social situation were a matter of serious concern to Government. The idea behind the setting up of the NATReSA was to complement Government’s action in having a drug/substance free society by the prevention of substance abuse, treatment and rehabilitation of substance abusers and facilitating their integration in the mainstream society through a multi-disciplinary approach.

In line with this purpose, the NATReSA was entrusted with the following responsibilities:

(i) coordinate and facilitate efforts at national level towards the implementation of programmes for the prevention of substance
abuse and the treatment and rehabilitation of substance abusers;

(ii) complement existing facilities for –

(a) the prevention of substance abuse;
(b) the treatment and rehabilitation of substance abusers;

(iii) mobilise resources locally and overseas for the treatment and rehabilitation of substance abusers; and

(iv) set up and manage institutions for the treatment and rehabilitation of substance abusers;

(v) provide after-care services for the rehabilitation of substance abusers; and

(vi) advise, guide and help voluntary social organisations engaged in the prevention of substance abuse and in the treatment and rehabilitation of substance abusers.
Twelve years later, that is, in September 2008, the NATReSA migrated to the Ministry of Health and Quality of Life, as it was felt that this Ministry was better suited to deal with issues pertaining to substance abuse, be it alcohol, tobacco or dangerous drugs.

Irrespective of whether it was under the Ministry of Social Security and National Solidarity or under that of the Ministry of Health and Quality of Life, the NATReSA was always provided with all the necessary support, including financial and human resources, and the required legal framework and autonomy to enable it to fulfill its role effectively and safely with a view to obtaining tangible and measurable results.

For instance, the management of the NATReSA was entrusted to a Board, with a view to keeping it far from bureaucratic hurdles and constraints and enabling it to respond rapidly to emerging drug related challenges.

It was also provided with the necessary personnel, some of whom were redeployed from the ex-Trust Fund I mentioned earlier. These officers
had the necessary knowledge and experience in the field of substance abuse.

In terms of funding, although section 9(a) of the NATReSA Act provides for the NATReSA to 'receive funds from the Government and raise funds from other sources for the prevention of substance abuse, treatment and rehabilitation of substance abusers', however, its source of funding up to now has been exclusively from Government grants.

What I want to highlight, Madam Speaker, is that 'toutes les conditions étaient réunies' to allow the NATReSA to be successful in its mandate and fulfill its mission. Unfortunately, this did not happen. I am sure the whole House would agree with me that the NATReSA has been a major disappointment in the realm of prevention, treatment and rehabilitation of substance abuse in the country. With a few prevention campaigns here and there from time to time, the NATReSA has neither been able to be in the frontline nor play a leading role in curbing the drug scourge. It has failed to rise to the occasion and it has unfortunately not been pro-active when its primary role was to deal with substance abuse at the national level.
Shortly after I took office as Minister of Health and Quality of Life, I initiated a cost effectiveness assessment of all parastatal bodies falling under my Ministry. NATReSA was one of them.

In the course of the assessment, the following came to light:

(i) NATReSA was not fulfilling most of the objectives as set out at section 4 of the Act;

(ii) NATReSA has become a body responsible for grants. Its operation is limited essentially to the allocation of a monthly grant to 10 NGOs in Mauritius and 2 in Rodrigues, presumably involved in the prevention of substance abuse, treatment and rehabilitation of substance abusers. The details thereof are as follows:

<table>
<thead>
<tr>
<th>SN</th>
<th>Name of NGOs</th>
<th>Monthly Grant</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Centre de Solidarité pout une Nouvelle Vie</td>
<td>Rs 370,000</td>
</tr>
<tr>
<td>2</td>
<td>Centre d'Acceuil de Terre Rouge</td>
<td>Rs 215,000</td>
</tr>
<tr>
<td>3</td>
<td>Sangram Sewa Sadan</td>
<td>Rs 120,000</td>
</tr>
<tr>
<td>SN</td>
<td>Name of NGOs</td>
<td>Monthly Grant</td>
</tr>
<tr>
<td>----</td>
<td>--------------------------------------------------</td>
<td>---------------</td>
</tr>
<tr>
<td>4</td>
<td>HELP De Addition Centre</td>
<td>Rs 110,000</td>
</tr>
<tr>
<td>5</td>
<td>Dr. I. Goomany Treatment Centre</td>
<td>Rs 165,000</td>
</tr>
<tr>
<td>6</td>
<td>Chrysalide Centre</td>
<td>Rs 40,000</td>
</tr>
<tr>
<td>7</td>
<td>Groupe Renaissance de Mahebourg</td>
<td>Rs 10,000</td>
</tr>
<tr>
<td>8</td>
<td>ACTReSA- Human Service Trust (Ayurveda)</td>
<td>Rs 70,000</td>
</tr>
<tr>
<td>9</td>
<td>Etoile D’esperance – Association Alcool</td>
<td>Rs 140,000</td>
</tr>
<tr>
<td>10</td>
<td>LACAZ A</td>
<td>Rs 30,000</td>
</tr>
<tr>
<td>11</td>
<td>Centre d’Accueil et de Réhabilitation de St Gabriel Rodrigues</td>
<td>Rs 70,000</td>
</tr>
<tr>
<td>12</td>
<td>Centre Alcoologie, Rodrigues</td>
<td>Rs 70,000</td>
</tr>
<tr>
<td></td>
<td>TOTAL</td>
<td>Rs 1,410,000</td>
</tr>
</tbody>
</table>

It is to be pointed out that apart from the allocation of grants to the 2 NGOs in Rodrigues, NATReSA has not carried out any prevention, treatment and rehabilitation programmes for substance abusers in Rodrigues.

The House may wish to note that the NATReSA costs Government over Rs 40 M annually. For the financial year 2015 – 2016, the grant allocated to the NATReSA is to the tune of Rs
41,175,000, out of which Rs 23.175 M is to meet the cost of its annual recurrent expenditure including fees payable to its Board and Rs 18 M is to be allocated to the 12 NGOs, under its Rehabilitation Programme for Alcoholics and Drug Addicts;

(iii) the Harm Reduction Unit of my Ministry had worked out a Strategic Plan for NATReSA in 2014, which it has not implemented. In fact it should have been NATReSA working out a Strategic Plan for the Harm Reduction Unit.

(iv) since its inception, NATReSA has been focusing on prevention programmes, which have not evolved over the years to meet the ever changing environment for substance abuse;

(v) NATReSA has not had the expected impact given that the number of substance abusers among students, youth and the community at large has not shown any decline;

(vi) NATReSA does not have its own treatment and rehabilitation programme. Its role has been limited to allocating monthly
grants to NGOs providing codeine and methadone based treatment and operating as rehabilitation centres;

(vii) NATReSA does not exercise adequate monitoring and follow up to ensure that the funds allocated to the NGOs are used for the purpose for which they are actually meant and on the outcome thereof i.e the number of beneficiaries being treated and rehabilitated;

(viii) two of the NGOs receiving a grant from NATReSA also derive an annual grant from my Ministry;

(ix) although NATReSA is expected to keep abreast of latest information on all issues relating to its mandate, it has not been vigilant enough to detect the emergence of synthetic drugs among youngsters or to take timely actions to prevent their proliferation; and

(x) there is much overlap in the programmes of the Harm Reduction Unit of my Ministry and that of NATReSA. This calls for urgent synchronization of actions so as to avoid duplication of efforts and wastage of public funds.
Madam Speaker,

NATReSA could have played the role of an apex body harmonising the work of the NGOs with the resources at my Ministry to really curb the prevalence of dangerous drugs and substance abuse.

Following these observations, I had consultations with the staff of the NATReSA in mid-2015 to explore avenues for better governance and a results-oriented approach and attitude. I regret to have to admit that the NATReSA did not improve. There are inherent weaknesses and dysfunctioning at all levels of NATReSA.

As a follow up, in December 2015, I had a further assessment carried out which confirmed the findings I mentioned earlier and that of a previous assessment carried out in 2012 by officers of my Ministry on the activities of NATReSA.

Madam Speaker,
The House would surely understand how distressing it is to note that despite such negative findings since 2012, the NATReSA, as an institution, did not improve.

These shortcomings of the NATReSA called for urgent action and a paradigm shift in our strategies to be able to respond in a more dynamic and proactive manner to the challenges posed by substance/drug abuse. It is in the light of the circumstances, and also with a view to improving efficiency, effectiveness and ensuring judicious use of public funds, that the decision to wind up the NATReSA was taken.

The House may wish to note that the repeal of the NATReSA Act will not affect the ongoing programmes on prevention, treatment and rehabilitation of substance abusers as same are already being carried out by the Harm Reduction Unit of my Ministry. Instead, my Ministry proposes set up a comprehensive Substance Abuse Unit and will insist on the need for NGOs benefitting from grants from the Government for the 'Rehabilitation Programme for alcoholics and drug addicts' to provide all necessary information as and when requested and to ensure that those in
need of help are effectively given the support and social accompaniment by the NGO.

As regards the personnel of the NATReSA which presently consists of 16 officers, holding permanent and pensionable posts, following consultations I have had with them, they have all expressed, in writing, their willingness to be absorbed in my Ministry. The modalities for their redeployment are being finalised with the relevant authorities in accordance with the prevailing legislation. It is to be highlighted that the terms and conditions of their employment in my Ministry will not be less favourable than those of their present employment.

If, for any reason, any of them is no more interested to join my Ministry, they will be given the possibility to retire on grounds of abolition of office and be paid their pension benefits. The system that will be applicable is as follows:

(a) Total fund balance in the NATReSA Pension Fund is transferred to Government;

(b) NATReSA is removed from the schedule to the Statutory Bodies Pension Funds Act;
(c) NATReSA Repeal Act to clearly mention that notwithstanding the provisions of the Pensions Act, the existing pensioners of NATReSA be deemed to be pensioners of the Government; and

(d) Once the above are done, Government to take responsibility for the payment of pensions to present and future pensioners of defunct NATReSA.

With regard to the 12 NGOs benefitting from a grant from the NATReSA, arrangements have been made for them to receive their monthly funding from my Ministry. The NGOs would have to comply with the conditions of the financial regulations as set out in the respective grant memorandum and which concern essentially the need for transparency, accountability and the absolute necessity to show results.

Action will also be taken to review the grant to the NGOs which are receiving double grants, that is, from both my Ministry and the NATReSA.
The merging of the Staff of the NATReSA with my Ministry will bring efficiency gains and a more coordinated and effective response to the challenges of drug abuse and the rehabilitation of its victims.

Madam Speaker,

The decision to wind up the NATReSA should have been taken a long time back. Having gone into the history of the NATReSA and having made a very fair and honest assessment of what it ought to have done but did not do, I believe this Bill is the best option that we could have.

I wish to reassure the House that this issue of substance abuse will be kept under constant review at my Ministry.

The history of NATReSA is one of a catalogue of missed opportunities. On a more general note, once an institution which is designed to be ‘sur le terrain’ becomes ‘bureaucratised’, then it loses focus and its mission is derailed. That is the legacy of NATReSA and I will ensure that the Harm Reduction Unit of my Ministry – which will be further restructured and strengthened by bringing under one ‘leader’ all the
programmes that deal directly or indirectly with the vexed issue of Substance Abuse. The officers will no longer be desk-bound, they will be where the action is and where the target people are.

In fact had NATReSA lived up to its priority mandate, the drug scene in our country would have been different. It would not have been necessary for Government in 2015 to set up a Commission of Inquiry on Dangerous Drugs chaired by former Justice Lam Shang Leen with very wide terms of reference.

I am confident that with my Ministry in the driving seat for dealing with substance abuse, we will be able to meet the challenges posed by this scourge.

Madam Speaker,

With these words, I now commend the Bill to the House.