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# SEARCHING THE CAUSES OF ORGANIZATIONAL FAILURE IN CONTROLLING DRUG ADDICTION IN THE PERSPECTIVE OF SOME RELEVANT VARIABLES IN BANGLADESH WITH SPECIAL REFERENCE TO SYLHET

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## ABSTRACT

*This paper aims to find out the tactics of drug traders in making people addicted to drug, the causes of failure of authority in deactivating their efforts and searching some imperatives to be followed to save the people. After ascertaining the reasons of constant growth of illegal drug business from the secondary data, attempts have been made to suggest implementation of certain necessary measures. The causes of failure of the authority are identified and some imperatives are suggested to remove the loophole and make the institutions more effective. By educating people where necessary and making the vulnerable group of people aware of the detriments of drugs this goal can be achieved.*

## KEYWORDS

Drug, constant growth, loopholes, vulnerable.

## 1.1 INTRODUCTION

**D**rug means a medicine or other substance which has a physiological effect when ingested or otherwise introduced into the body (www.google.com). It can be useful or detrimental to health. Among detrimental drugs the most dangerous is the psychoactive drug. A psychoactive drug or psychotropic is a chemical substance that crosses the blood-brain barrier and acts primarily upon the central nervous system where it affects brain function, resulting in alterations in perception, mood, consciousness, cognition, and behavior. Thus, many psychoactive substances are abused, that is, used excessively, despite health risks or negative consequences. With sustained use of some substances, psychological and physical dependence ("addiction") may develop, making the cycle of abuse even more difficult to interrupt (wikipedia).

Because of this potential for abuse and dependency, the ethics of drug use are debated. Many governments worldwide place restrictions on drug production and sales in an attempt to decrease drug abuse. Ethical concerns have also been raised about over-use of these drugs clinically, and about their marketing by manufacturers.

During the 20th century, many governments across the world initially responded to the use of recreational drugs by banning them and making their use, supply, or trade a criminal offense. By fighting a war on drugs the government has increased the problems of society and made them far worse. A system of regulation rather than prohibition is a less harmful, more ethical and a more effective public policy. In some countries, there has been a move toward harm reduction by health services, where the use of illicit drugs is neither condoned nor promoted, but services and support are provided to ensure users have adequate factual information readily available, and that the negative effects of their use be minimized.

There exist three UN Conventions on drug abuse and trafficking, namely the Single Convention on Narcotic Drugs 1961, the Convention on Psychotropic Substances 1971 and the United Nations Convention Against Illicit Traffic in Narcotic Drugs and Psychotropic Substances 1988. Bangladesh is a signatory to all three UN Conventions (bdlaws).

To meet the requirements of these Conventions Bangladesh has enacted The Narcotics Control Act of 1990 (Act no XX of 1990) which covers the control of narcotic drugs and psychotropic substances, including provision for the treatment and rehabilitation of drug dependent people ( bdlaws). Bangladesh has amended the Narcotics Act and allows the Director General of the Department of Narcotics Control to send drug addicts for treatment. Drug use is considered as a treatable condition rather than a criminal offence.

## 1.2 TYPES OF DRUG

### CANNABIS

Cannabis makes users feel relaxed and heighten their sensory awareness. Thus, users may experience a more vivid sense of sight, smell, taste and hearing (unodc).

### COCAINE

Cocaine makes users feel exhilarated and euphoric. Furthermore, users often experience a temporary increase in alertness and energy levels, and a postponement of hunger and fatigue (unodc).

### ECSTASY

Ecstasy is usually distributed as a tablet or pill but can also be a powder or capsule. It can heighten users' empathy levels and induce a feeling of closeness to people around (unodc).

### HALLUCINOGENS

Hallucinogens are drugs that alter users' state of consciousness and produce different kinds of hallucinations (unodc).

### HEROIN

Heroin makes users feel an initial surge of euphoria, along with a feeling of warmth and relaxation. Users also often become detached from emotional or physical distress, pain or anxiety.

### METHAMPHETAMINE

By taking Methamphetamine users experience a temporary rise in energy, often perceived to improve their performance at manual or intellectual tasks. Users also feel postponement of hunger and fatigue. Such as, Crack meth, Ice, Crystal meth, Tik, Shabu, Yaba

### 1.3 REASONS FOR DRUG ADDICTIONS

Most of the people take drugs as they think it will help them lead a better life than he is leading right now. Many of them believe taking drugs causes them to forget the sorrows and frustrations. Some think that drugs are solution to their problem but in reality it is not. The reasons behind the taking of drugs are not clear, but many social scientists blame the examples set by their elders. Firstly, parents who drink and smoke are, in effect, telling their children that it is a socially acceptable behaviour. Consequently children may have a similar view towards illegal drugs, even if their parents are against their use. In addition, drug use shown on television, films, magazines and public displays can only attract children, if not confuse them, about the serious health-hazards that are associated with drug abuse (thefinancialexpress).

From another perspective, the pressure on young people to perform well at schools and other competitive platforms is a possible cause of the problem. Many believe they cannot live up to their parents' expectations and feel a sense of hopelessness and frustration. Scientists have established a relation between drug use and stress, frustration, lack of expressing dissatisfaction with the pressures that they face in society. Also the widespread availability of drugs means teenagers are often encountered by the temptation to experiment. (thefinancialexpress).

### 1.4 DRUG ADDICTION & CRIME

Drugs are related to crime in multiple ways. Most directly, it is a crime to use, possess, manufacture, or distribute drugs classified as having a potential for abuse. Drugs are also related to crime through the effects they have on the user's behavior and by generating violence and other illegal activity in connection with drug trafficking. (bjs.gov)

### 1.5 YOUNG GENERATION & DRUG

Nowadays hundreds of thousands of youths across Bangladesh are taking drugs on a large scale which is turning to create a catastrophic event. Drug abuse among youth is a serious problem in Bangladesh. Not only the illegal drug use is on the rise, but children as young as 10 years old are also experimenting with alcohol, phensidyl, heroin, baba, ganja, and other forms of available drugs. Many young talents are wasted, and prolonged addiction to hard drugs can cost a user his or her life. Suggesting remedies for youth drug abuse requires a clear understanding of the underlying reasons. (thefinancialexpress)

### 1.6 DRUG TRAFFICKING ROUTE-MAP IN BANGLADESH

Bangladesh, with its longest borders with India on 3 sides and with Myanmar to the northeast has become very risky and vulnerable for drug trafficking and abuse. The most frequently used drug is heroin, thereafter, phensidyl (Codeine based cough syrup) illegally transit from India and the third highest is cannabis. Bangladesh has borders with India on its three sides except the south, which stands on the Bay of Bengal. The three border routes are as follows:

Routs	Areas
<b>The Western Routes</b>	Darshana, Zibannagar of Chuadanga, Hili and Birol of Dinajpur and Moghulhat, Aditmari, Durgapur, Fulbari, Nageshwari of Kurigram and Nawabgonj, Rajshahi, Meherpur & Debbat and Kaligonj of Khulna and Benapole, Chowgacha of Jessore.
<b>The Eastern Routes</b>	Akhaura, Zhautala, Sadullahpur, Nawagaon, Singer bil, Col. bazar, Gangasagar and Kasba of B.Barua, Bibirbazar, Chagalnaiya, Maharajganj and Gutuma of Feni, Barkal and Baghaichari of Rangamati, Chittagong, Teknaf of Cox's Bazar, Dighinala, Panchari, and Matiranga of Khagrachari.
<b>The Northern Routes</b>	Haluaghat(Telikhali/Karaitali/Surjyapur/Bandarkata/Munsirhat/Munshipara) of Mymensing and Durgapur (Bijoypur and Bhabani area) of Netrokona and Bangla Banda, Bhurungabari, Jhenaigati, Sunamgonj, Tamabil.

### 2.1. OBJECTIVES OF RESEARCH

The main objective of this research is to explore the business tactics of drug traders, the causes of failure of drug administration in controlling the drug business and finding out the effective methods to control the drug business.

### 2.2 RESEARCH METHODOLOGY

#### RESEARCH DESIGN

The research is to study the present's tactics of drug traders, the causes of drug addiction, the existing laws to control the drug trading, the causes of failure of drug and narcotics control department and the effective way outs to control the drug trading in Bangladesh. So it is the research of descriptive nature.

#### SAMPLING DESIGN

The research is designed to use the secondary statistics of narcotics department and others with some primary data collected from drug control official and executives of rehabilitation centers of Sylhet district to get insights of causes and remedies of controlling drug trade along with addicted persons. To take the opinion of experts and executives of drug administration the researchers have to depend on non-probabilistic type of sampling to ensure the availability along with the reliability of data.

#### DATA COLLECTION

The primary data was collected from the executives of narcotics control department, Sylhet and the rehabilitation centers, who were selected by the judgmental sampling to ensure the availability and reliability of data. The data were collected from them and from 200 addicted persons by well designed questionnaire and interview. The secondary data was collected from the books, brochures, websites, newspapers, magazine and journals etc.

#### INTERPRETATION OF DATA

The data was processed by SPSS 19 and Microsoft Excel 2007 to get the insights and interpreted by the output of SPSS and excel. Some recommendations are made through the logical viewpoints of the researchers from the outputs.

### 3.0 FINDINGS

#### 3.1 PRIMARY REASON OF DRUG ADDICTION

The drug addicted persons are the customers of drug traders. The promotional activities of them are oriented to the causes of drug addiction. The drug traders capitalize the causes and make the persons addicted to use drug regularly.



**TABLE 1: REASONS FOR DRUG ADDICTION**

Reasons for drug addiction	2011	
	Number	%
Interest	259	32.62
Peer pressure	439	55.29
Satisfaction	11	1.39
Mental Disorder	5	0.63
Adverse family Environment	33	4.16
Easy Availability	1	0.13
Unemployment	1	0.13
Frustration	36	4.53
Ignorance about addiction	3	0.38
Medical hazards	1	0.13
Others	5	0.63
Total	794	100.00

Source: Annual Drug Report, 2011 (dnc.com)

From the above table it is clear that the modal class is the peer pressure. The drug addicted persons enjoy taking the drug in a group, so they tried to keep pressure on their peers to use these drugs. Specially they take the advantage of weakest moments of the peer and also attract them to enjoy their life by taking drugs. The second largest cause is interest. Around 32% persons were addicted by their interest to know about the drug. Sometimes, it happened by the drug control campaign of the authority. The drug traders take the advantage of promotion of drugs by the controlling authority's campaign. The brokers of drug traders try to grow interest of the youths to drugs by various ways also. Adverse family environment and frustration are shown as the causes of drug addiction in 4% of the persons each. The other causes like easy availability, unemployment, ignorance about addiction, medical hazards & others are proved as insignificant causes of drug addiction.

From the survey in Sylhet it is found that out of 200 addicted persons, 50% of them are addicted because of peer pressure, 20% of them are from interest and the rest from other enlisted reasons of the above table. So it is clear that the marketing of drug traders in the form of peer pressure and interest created more addicted persons.

### 3.2.1 AGE VARIATION OF DRUG ADDICTION

Another important factor of finding the tactics of drug traders is to find the age limits of addicted persons to identify the maturity levels of the addicted persons and to find the drug traders influences on them. The following table explores the age variations of the addicted persons:

**TABLE 2: AGE VARIATION OF DRUG ADDICT**

Age	Number	%
Below 15	11	1.39
15-20	81	10.25
20-25	136	17.22
25-30	232	29.37
30-35	178	22.53
35-40	81	10.25
40-45	41	5.19
45-50	23	2.91
Above 50	7	0.89
Total	790	100.00

Source: Annual Drug Report, 2011(dnc)

The above table shows that the modal class of addicted persons is 25-30 aged (29.37%). The second largest class is 30-35 age groups (22.53%). Another significant class is 20-25 age groups (17.22%). It is apparent from the table that the drug addiction held more in the age of 125-30, here youths are somehow in anxiety about their future. The other significant influences of the two age groups also expressed the uncertainty in the future with immaturity may be the main cause of drug addiction, when men are becoming somehow independent in their life as the guardians control at that stages are becoming slacks. The peer pressure and interest can influence on the targeted persons of the drug traders and brokers.

From the survey in Sylhet it is found that out of 200 addicted persons, 45% of the addicts are of 25-30 years of age, 25% of them are of 30-35 years of age, and the rest from other enlisted age ranges of the above table. So it shows that at that age a person usually feels himself much more independent and capable of making decisions of his own and due to that attitude, they become the victims of drug marketers.

### 3.2.2 MARITAL STATUS OF DRUG ADDICT

it is also important to check whether the marital status have influence on the addiction to drug or not. The following table exposed the same:

**TABLE 3: MARITAL STATUS OF DRUG ADDICT**

Status	Number	%
Unmarried	295	37.25
Married	430	54.29
Separate	41	5.18
Widow	3	0.38
Divorced	22	2.78
Other	1	0.13
Total	792	100.00

Source: Annual Drug Report, 2011(dnc)

The table also expressed the impact of peer pressure and interest is the main cause of drug addiction on the persons. The effect of peer pressure can play effective role on the person at the stage of their going to be independent. So the newly marital stage is the most effective time to make them customers by the method of peer pressure. Of course it cannot affect on the matured stage, but addiction cannot be removed easily. For these reasons the married persons are most vulnerable class in drug addiction and the traders targeted that class more. The unmarried persons are the second largest group of being addicted. It also happened at the stage of their going to be independent age. The main promotion by peer pressure and growing interest can play effective role at that stage also. In Sylhet area among the 200 drug addicts 60% of them are married and 10% of them are divorced and rest belongs to the other classes. So it implies that sense of immaturity also plays a significant role in drug abuse.

**3.3 EDUCATIONAL QUALIFICATION**

Checking the education time of the addicted persons is also a significant factor. The tools of promotion have great influence on the shorter duration than longer duration because the education level can increase the reasonability and understanding of men. The following table shows the effect of drug promotional tools on the education time of men:

**TABLE 4: EDUCATION TIME OF MEN**

Education time	Number	%
Illiterate	208	26.26
1-5 years	149	18.81
6-9 years	198	25.00
10 Years	121	15.28
11-12 years	61	7.70
13-14 years	31	3.91
15-more	24	3.03
Total	792	100.00

Source: Annual Drug Report, 2011(dnc)

The above table successfully showed that the modal class in illiterate class of people who are most vulnerable as the drug traders are successful on them to make them addicted on drug. It is gradually reduced with the increase of education time as education build up the logical ground of men. But why the 6-9 years group is more affected than 1-5 & 10 years group cannot be explained by the researchers.

Survey in Sylhet Area shows that, 30% of drug addicts is illiterate and 20% is primary school dropout. This indicates that ignorance in education is an important factor which drives a person take drugs.

**3.4.1 FAMILY INCOME**

It should be examined that whether family income have significant influence on the addiction or not. Because there is some logic that, the lower family income creates frustration among members that leads to the addiction. The following table shows the addicted persons in number and in percentage distributed by the family income:

**TABLE 5: FAMILY INCOME OF DRUG ADDICT**

Income	Patient	%
0-2000	15	1.90
2001-3000	86	10.89
3001-5000	133	16.84
5001-10000	330	41.77
10001-20000	151	19.11
20001-Above	75	9.49
Total	790	100.00

Source: Annual Drug Report, 2011(dnc)

From the above table it is clear that the modal class is the family income group of 5001-10000. It constitutes around 42% of the addiction under survey. The second largest group is 10001-20000 (19%). Then another significant income group is 3001-5000 (16.84%). But it is proved that in the solvent family drug addiction is lesser and it is lowest in most vulnerable economic group of family income of 0-2000. The group of 5000-10000 shown highest addiction, because this group suffer most as they cannot make the both ends, meet in the daily requirements. The lower income group can manage somehow and have no money spare to involve in drug addiction. The higher income groups are beyond the frustration from economic reason and at the mean time they are well informed about the bad impact of addiction and the marketing techniques of drug traders and become cautious about the dreadful habit.

In our survey, it is found that, the middle income family members are mostly indulged in drug addiction. This is due to failure in meeting the necessities of families and ability to spare money for drugs. For the involvement in family affairs in most of the time they cannot develop themselves with the information of bad impact of drug addiction. The markets can avail that opportunity.

**3.4.2 PROFESSION OF THE DRUG ADDICTS**

It is also to check whether the profession have any influence on drug addiction or not. The survey on addicted persons on different professions of low income people is checked to explore the same. It is expressed in the following table:

**TABLE 6: PROFESSION OF DRUG ADDICT**

Profession	2011	%
Unemployed	365	46.09
Small Business	104	13.13
Job	64	8.08
Day Worker	84	10.61
Driver	56	7.07
Students	30	3.79
Farmer	11	
Other	78	
Total	792	

Source: Annual Drug Report, 2011(shaptahik 2000)

The highest addiction is held on the unemployed persons (46%), as they have the scope to be in touch of peer pressure. They are also targeted persons in reach of salesmen of drug traders. The small traders are second largest group because they are in reach of the traders. The salesmen have also access on them easily. The farmer is the class of least addiction as they are out of their reach and have no access to them easily because they are very busy with their work and no time to enjoy in leisure.

By the survey in Sylhet the similar result was found. The unemployed and small traders are the vulnerable class of drug victims. Around 70% of members are found from those classes.

**3.5 CRIMINALS' DRUG ADDICTION**

It is also shown that the criminals are the easy target of drug traders as the criminals can easily involved in drug trading. The person of high crime record becomes easy target of the drug traders, brokers and the salesmen of traders. The % of people involved in drug addiction with criminal record in the last five years is shown in the following table:

**TABLE 7: CRIMINAL RECORDS OF DRUG ADDICTS**

Year	% of addicted people's crime record
2007	33.22
2008	47.73
2009	73.68
2010	56.10
2011	46.88

Source: Annual Drug Report, 2011(dnc)

The above table shows that it is in increasing trend from 2007 to 2009, then it shown decreasing trend. It may be because of anti drug campaigning of the government and various groups in current years.

### 3.6 AMOUNT OF DRUG TRADES

It is not ascertained the annual units of drug consumed in the country as it is used as at route of drug trafficking and also a good market of drug as it is the most populated country of the world. From study, it is found that around 60 lakh people of Bangladesh spend Tk. 7 crore on various types of drug daily (The daily Star, Aug. 14, 2013). The seizure list of drug control department and police can be used to predict the total drug consumed and transferred in the drug route. The list is summarized as below:

**TABLE 8: LIST OF SEIZURE OF DRUG IN THE LAST 5 YEARS**

Name of Drug	Seized drug in the last five years				
	2008	2009	2010	2011	2012
Popy Plant		1450210			
Affim (kg.)			11.69	8.07	
Heroin (Kg.)	146593	159783	188186	104183	78802
Elements produce Kodin (bottle)	904384	1117354	961260	925763	788580
Loose kodin (liter)	2620.438	32955.581	48749.357	52691	26695
Kanabis (Kg.)	24282.395	32955.581	48749.357	52691	26695
Kanabis Plant	2834	791	1760	742	243
Injecting Drug (Ample)	45921	89469	69158	117042	92423
ATS (Yaba Tablet)	36543	129644	812716	1360186	1073827

Source: Annual Drug Report, 2011(dnc)

The increasing trends of seizure of ATS (Yaba Tablet) clearly indicate that the use of Yaba is increasing in the country. The same trend is shown in injecting Drugs. Kanabis seizure was in increasing trends up to 2010 but a declining trend in expressed in 2011. It may be due to the failure of authority. Heroin seizure is also reduced in a little bit, but there is also a regular flow.

### 3.7 EXISTING MEASURES TO CONTROL DRUG IN BANGLADESH

#### 3.7.1. EXISTING LAWS IN BANGLADESH

In Bangladesh the Narcotics Control Act of 1990 (Act no XX of 1990) is the prime law to control narcotic drugs and psychotropic substances in. Some other laws like The Narcotics control Rules 1999, The National Narcotics Control Board Fund Rules 2001, Alcohol Control (License Fee) Rules 2002 and Acid Control Rules 2004. Under Narcotics Control Act of 1990 drug use is considered as a treatable condition rather than a criminal offence. Any kind of illegal operations regarding narcotic drugs, psychotropic substances as well as precursor chemicals is prohibited under Section 19 and 20 of the Act. Additionally, a rule is introduced for the licensing of the precursor chemicals. It is a special law having predominance over other laws in respect of its ambit and jurisdiction on drugs and drug related issues. Interception of illicit drug trafficking through law enforcement, control of narcotic drugs and psychotropic substances used in medical, industrial and scientific purposes coupled with treatment and rehabilitation of the drug addicts underlie the propriety of this law. But there has no adequate and enabling law to handle the grubby condition created by drug abuse and the related issues.

#### 3.7.2. AUTHORITIES TO CONTROL DRUG

a. NNCB: National Narcotics Control Board was formed in 1990 for achieving the objectives of narcotics Control Act 1990', headed by the Home Minister with the Director of Narcotics Control Department as the member-secretary. The responsibilities of the board was marked as making necessary policies to prevention of drug addiction, collecting data regarding various aspects of narcotics, to create public awareness and to take any measures necessary to control.

b. DNC: Department of Narcotics Control is formed with the responsibilities to implement the policies of NNCB. It is powered with 155 field offices across the country with headquarter in Dhaka. DNC has 4 zonal office, 4 zonal intelligence offices, 26 range office, 108 circle office, 1 chemical laboratory, 4 treatment centers, 4 Distillery, 13 ware Houses with 1277 sanctioned officers.

c. Police, RAB and BGB: Police, RAB, BGB are the supporting forces in controlling drug. They are to help the narcotics control department by catching the drug traffickers across the country.

d. Social Norms: Our social norms are strong force against drugs. But the social system is about to destroy due to changing norms and migration of people from one place to another weaken the social strongholds.

The sanctioned manpower of DNC is 1283 persons. Up to April 2013 21% of the actual requirements are vacant. Among the vacant positions, most of them are class three employees. Imports of different chemicals are found to be used in drug production in the country. So there are lacking in supervision for imported drug consumption in necessary field and in abuse. The laws and authority to implement is almost sufficiently equipped but the measures are not taken properly. It is alleged that the authority itself is involved in taking bribes monthly from drug traffickers. Even in the remote place like prison, drugs are widespread with the help of law enforcing agencies, as the marketers found it is a good market as the prisoners have nothing to do in the place but to worry about their future. In that situation, using drugs can give them relief from anxiety. So with the help of the law enforcing authority they targeted that place and successfully marketed the product and making huge number persons addicted.

The business of transferring to the profitable places in DNC is published in various media regularly. It proved that the authority is failing to control the drug. They are making money by helping the drug traders in their marketing and distributions in the name of controlling the drug.

The police are found taking extortions regularly from the drug traffickers. Even they are found taking Tk 1000-2000 from the rickshaw pullars and release them even when they found drugs in their vehicles (Shaptahik 2000, 2012).

### 4.0 RECOMMENDATIONS

4.1.1 Peer pressure has been found to be among the strongest reasons of drug use during adolescence. To reduce the influence of peer pressure various governmental and non-governmental initiatives need to be taken. Effective schooling is one of the reasons which cause drug abuse reduction. Educational institutions can play a great role in ensuring effective schooling among the youth. The government may introduce compulsory subject in Higher Secondary level on moral teachings. Laws can provide stricter punishments if anyone induce someone to take drugs. Existing laws need to be amended and should meet the growing need of time. In Bangladesh drug abuse is considered as a treatable situation, not an offence. Here at least reformatory punishments may be introduced.

4.1.2 Another important cause of drug abuse is "Interest" among the youths about drugs. In that case also measures need to be taken to make people aware about the demerits of taking drugs. The Electronic and Print Media can play a great role in creating awareness. They can run anti-drug campaign and may also show the demerits of taking drugs through various popular television programs. In Bangladesh until now four short films on drugs has been made but it failed to

grow interest among the viewers. Usually people don't enjoy watching awareness programs. That's why the authority should rethink about alluring the viewers. Various participatory competitive programs can be initiated and beside that anti-drug campaign can be run during the popular television programs.

4.2.1. It is found that going to be independent level of age is the most vulnerable in drug addiction. So it is suggested to build up proper awareness to combat the marketing of drug traders among the youngsters.

4.2.2. The newly married and unmarried persons are found as drug addicts because of their immaturity and newly independent attitude when the guardians are to ignore the supervision. So it is suggested to build up awareness by all means to protect them.

4.3 It is found that the rate of drug abuse among the illiterate people is alarming. That is because they are less caring about the affects of drug abuse. They take it as a usual habit and they do not care about the physical, economical, mental or social harm caused by the drugs. Awareness program among those people is mandatory at first place. Measures may be taken to educate them, to make them know the bad sides of taking drugs. People who have discontinued their study may also be given chance to continue their study at any stage of life.

4.4.1 The middle income families are targeted by drug marketers. So the authority can think to create a savings attitude among them by new schemes of better return and also the awareness programs of every available means.

4.4.2 The majority of drug addicts are small traders and unemployed persons. So the authority should give more emphasize to solve the unemployment problems and the law enforcing agencies must be cautious about the movement of drug traders and brokers along with drug addicts to the small traders. Besides, the awareness programs will play significant role in this respect.

4.5 To address the issue of drug addiction among the offenders who are in prison it is suggested to take measures to ensure proper accountability of the Jail Authorities. Culprits who are responsible for this should be brought before justice.

4.6 Authorities dealing with controlling of drug trades must be made competent to meet the demand of time. Special Training for the officials can be arranged which can bring some significant improvements.

4.7.1 Prosecution and sanction need to be carried out properly. There should be a special court to deal with drug and drug related offences for speedy disposal. To prevent the drug traders from marketing their harmful products law enforcement agencies should be reformed. Punishment for trading drug should be increased. Good governance should be ensured in all spheres.

4.7.2 Concerned law enforcement body should be rearranged. Miscreants, those who are hidden in the Police, RAB, BGB, Jail Authority and Narcotics Control Department, must be punished. At the same time, rewards may be declared for good performance. It is obvious that, drugs business would fall rapidly if border-crossing areas can be checked properly.

4.8 Mentors of social institutions like schools, colleges, other educational institutions etc. should come forward to build resistance against drugs.

## 5.0 CONCLUSION

Drug abuse directly affects the economic and social growth of a country. In Bangladesh it is a raising concern and is spreading like a disease in the society. The symptom indicates that, it is going to bring a social change in Bangladesh. The adequate laws and logistics support of the authority is failed in meeting their objectives to reduce drug addiction. The causes of failure of the authority should be properly identified and preventive measures should be taken. The suggested measures can be taken to bring the effectively of the authority. A more intensive research, action program, and social movement are needed. It is also needed to strengthen family and social values and religious ethics in order to maintain a stable and drug-free society.

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