FINDING OUR BEST SELVES

SPYM's Juvenile De-Addiction cum Rehabilitation Centre: Healing Children Abusing Drugs and in Conflict with the Law

SOCIETY FOR THE PROMOTION OF YOUTH AND MASSES

2016

SOCIETY FOR THE PROMOTION OF YOUTH AND MASSES (SPYM)

The SPYM, established in 1986, is a national organisation that works in the areas of juvenile drug abuse, health, HIV-AIDS, and the socio-economic development of the most marginalised population

Vision

- We believe that every child has an equal right to live his/her life with full dignity. We support their recovery from drug use using multiple pathways, and by instilling hope and ensuring opportunity (so that children transition into adulthood with their selfhood intact) while also reducing stigma

Mission

- To empower the children through holistic and sustainable preventive and rehabilitative programmes (where education and access to finances converge to enable true independence from drugs)
- To implement and replicate curative and rehabilitative practices for children across the nation
- To become an inspiring social enterprise that fosters extensive partnerships with public and private sectors

SPYM on child protection

Vision

- To safeguard the rights of children and protect them from abuse and exploitation by creating an environment where children are respected, empowered and active in their own protection

Mission

- To create "child safe" environments for protecting and safeguarding the rights of children and ensuring that they are safe from any sort of harm guided by the principle of "the best interest of the child"

SPYM's Juvenile De-Addiction cum Rehabilitation Centre, *Sewa Kutir*, Kingsway Camp, New Delhi

Set up in 2011 as a +50 bedded, 90-day treatment facility by the Honourable Juvenile Justice Committee, High Court of Delhi, Department of Women and Child Development, and SPYM, this one-of-its kind Centre in India (and perhaps in South Asia) aims to build the inner merits and resilience of adolescent boys between seven and 18 years to get past addiction and criminal behaviours. Most of these boys are in conflict with the law and have been assessed *to have a history of substance abuse and current substance dependence, along with other psychological and behavioural issues*

Vision

- Treatment, rehabilitation and reformation of adolescent boys using drugs and in conflict with the law

Mission

- Grow a model to rehabilitate and reform adolescent boys who abuse drugs, one that can be replicated and up scaled

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ACKNOWLEDGEMENTS

Make me a picture of the sun

So I can hang it in my room

And make believe I'm getting warm

When others call it 'Day'

- *Emily Dickinson*

We remain deeply inspired by the courage of each one of the adolescent boys at the at the SPYM's Juvenile De-Addiction cum Rehabilitation Centre. Each of them cope with the unspeakable challenges of altered consciousness, brought on by drug abuse. As also physical, emotional, behavioural and cognitive problems. Theirs is a dark world with darker problems.

Though fearful, broken, despairing, and mentally exhausted on several occasions, many have the courage to remain sober, and are picking up the pieces of their life to patch together a new sense of self. They have learned to bring in their own sunshine and spread their narrow arms to gather many possibilities for their present and future lives.

We are indebted to all the SPYM staff and counsellors, both at the Centre and at the head office, as well as the numerous interns and volunteers, who help these young and vulnerable boys walk the road to wellness and recovery. By respecting the children, giving them the space and confidence to recover, and working together with them, they are allowing them to live lives of empowerment and dignity.

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- ***INTRODUCTION***

FROM A LIFE OF DRUG ADDICTION AND CRIME TO RECOVERY AND REINTEGRATION

Many ex-inmates of the SPYM's Juvenile De-Addiction cum Rehabilitation Centre say their recovery began after they were arrested and sent to the Centre. Having crossed the line from dependence to addiction a long while before the arrest, most admit, their recovery did not seem remotely possible when they were convicted. Or desirable, as their brains had lost the ability to think straight or apply good judgement.

Yet today the lives of these boys and young men exemplify resumption, allowing us to believe that it is possible to break the cycle of drug addiction.

This report attempts to tell you our story, our efforts in the last five years to bring hope to families whose children have fallen prey to substance abuse and crime (like drug trafficking, robbery, murder, and abduction to fund this habit). Especially those belonging to poor and marginalised groups.

Although half the rehabilitated youth do relapse into drug use, the fact that half of them progress from recovery to lead lives that are fulfilling is a lifeline that needs to be grasped.

There is mounting evidence to show precarious socio-economic conditions, lack of education, poor protective family and societal scaffoldings, availability of substances in and around home or school, parental use of drugs and attitudes that tolerate substance use, and peer substance use encourage drug abuse among children.

A justice system for young offenders has been envisaged in the country based on the fact that they are children, and must be treated as such. Yet an effective juvenile justice system should go beyond punishment and deterrence. It must aim to make young people aware of the gravity of their crimes, and be accountable for them.

More significantly, it must move far beyond this to build skills and coping mechanisms so as to allow children to make good choices, handle pressures, and live productively. This can be done by anchoring the children through education, vocational training, good health and nutrition, and counselling. And, by equipping them with a firm moral compass, one that allows them to steer their course of their lives with a conviction that their choices and actions are correct, and will not harm themselves or others.

This is the empowerment that SPYM hopes to hold out to the boys who come to their Centre, boys who are both in conflict with the law and in need of care and protection. And, thus, restore the faith of families, communities and the Society in recovery, rehabilitation and reintegration of children. The faith that these children can indeed transform into responsible, caring adults.

SPYM: seeing children through, from treatment to recovery to restoration

The easiest way to get to SPYM's Juvenile De-Addiction cum Rehabilitation Centre is to ride the metro. One has to alight at the GTB station, and the straight road from the metro station leads to the Centre. Its proximity to the premier Delhi University has it teeming with young people who constantly spill out of the tangle of untidy shops, coaching centres, book stores, and eateries, all through the day and night.

The road eventually brings you to the Mukherjee Nagar police station, signaling that you are close to the Centre. The compound which hosts the Centre also houses a facility for blind boys and a government Observation Home. It is surprisingly quiet and its large leafy trees offer shade, comfort, quietude, and privacy from the hustle of the outside world.

The SPYM Centre at Kingsway Camp beckons you through a guarded broad white gate. The inside is spacious and opens out to a canteen and then to a reception and registration room. Juveniles (referred through the Juvenile Justice Board) are received here and all their details verified. All information regarding juveniles, families, and visitors are recorded maintained in this room.

The same path leads into a rectangular courtyard that often doubles up as a classroom on days when children get restless within rooms. Around the courtyard are classrooms. There is also a training hall, a counselling room, a medical room, a store room, and an administrative room. There are separate men and women toilets for the boys and staff (many of who are women). The dormitory, the service kitchen and playground are set a bit apart.

SPYM provides a 90-day residential, around-the-clock, primary support as well as rehabilitation and reintegration (with the help of families and the community) for boys who are in conflict with the law. At any given time there are between 50 and 60 boys hopeful of recovery.

This is where it all starts …

As per the Indian Constitution, criminal responsibility for an offence can rest only with a child who is over seven years of age. Also, it must be proved beyond reasonable doubt that the child is guilty, and that the child is aware of the grave nature of his offence.

Once a child is arrested, he is produced before the magistrate within 24 hours. Children who are directed by the magistrate to go the SPYM Centre are routed to it through the government Observation Home.

When arriving from the Observation Home, the juvenile comes equipped with a magistrate order, medical legal certification (MLC) report, OHB warrant, psychological assessment report (that contains the case history and mental status examination report), and other counselling reports.

The Centre first conducts a drug use test and if this reveals the child is abusing drugs, he is admitted. If, however, the child is found to suffering from psychiatric disorders that are beyond the ken of the Centre, he is referred to more professional institutes.

When the child is admitted, a separate intake file is created. It contains the juvenile's name, parent's name, age, address, contact number, educational qualifications, religion, case history (FIR number, name of police station and the concerned JJB), type of substance abused, history of drug use, sources of earning money to sustain drug dependency, residency details of child when he abuses drugs, and date of admission. This personal, social, physical, and psychological information is updated on a regular basis from date of admission to date of discharge.

The child is then sent to be detoxed at the Centre's headquarters. The process lasts anywhere between three and seven days, depending on the severity of substance abuse. The child is then sent back to the Centre where he falls into the routines of the Centre for anywhere between 30 and 90 days, or longer in some exceptional cases.

Every 14 days the child's progress is monitored by a magistrate. The child is accompanied by the staff to the court, and the magistrate pens his/her suggestions and comments on the child's files. Regular health check-ups are also ensured to keep the child is good health.

When orders for the release of the child come from the Court, the child is sent back to the Observation Home which releases the child. Six monthly follow ups with the child are expected.

A new vision, a new lease of life

A 1,000 children have been treated till date at the Centre using a comprehensive, child-centered, strengths approach that employs diversionary tactics, therapeutic interventions, education and life skills training. Attention is also paid to health and nutrition.

The common refrain one hears from them is: "My recovery from substance abuse is really about learning to live again."

Many of these children have put their past behind them, been clean and sober for a while, and pay attention to the teachings at the Centre to remain so. Experience shows that many do feel rudderless, alone and afraid. And, even discouraged on days. Yet having come thus far they have the will not to succumb. They continue to trudge along, validating the Centre's efforts and their faith in them.

Others have not been so strong. Their convictions have worn off and their resolve has weakened. SPYM, however, does not lose hope. It is firm in its conviction that all of us in society have a stake in fighting drug addiction among children and the stigmas associated with it. A problem that keeps so many families from a solution.

SPYM hopes that its model to rehabilitate and reform adolescent boys who abuse drugs will be replicated and up scaled to help many more children, who unfortunately today seem to be among the last to be helped.

BOX ONE: Substance abuse by juveniles: hard facts, hard realities

- ✓ The average age of children at the Centre is between 15 and 18 years
- ✓ SPYM studies show children start abusing substances between the ages of 10 and 14 and pursue it vigorously between 15 and 18 years
- ✓ At SPYM's Centre, the rehabilitation cost per child per month is between Rs. 6,000 and Rs. 7,000
- ✓ 63.7% children form the drug habit under the influence of their peer group
- ✓ 26.45% of these children have never been to school, 25.34% are school drop-outs (classes I to IV standard), and 28.69% (from V to VIII standard)
- ✓ 51.5% of the children are from government schools, 10.8% children are from private institutions, and 37.6% children have never been to school
- ✓ The common drugs used by the children are cannabis 40.86%, opium 28.9%, inhalants 16.27%, and alcohol 13.9%

- ✓ 69.68% children are poly drug abusers, whereas 30.31% of the children are single drug abusers

- ✓ 54.53% children are involved in anti-social activities to sustain their drug dependency, 16.27% are rag pickers, 10.31% work in industries, 10.9% work in tea stalls and 7.95% are daily wage labourers

- ✓ 29.56% children require between Rs. 1,001 and Rs.1,500 per day to sustain their drug dependency, 29.44% require between Rs. 100 and Rs. 500 per day, 12.67% require between Rs. 501 and Rs.1,000 per day, 12.54% require between Rs.1,501 and Rs. 2,000 per day, and 15.77% require Rs. 2,001 and above per day

- ✓ According to an independent survey, there are roughly between 20,000 and 30,000 drug addicts in Delhi

- ✓ One child spends around Rs.1, 500 per day on an average to keep up his drug habit. This means that Rs. 12, 07,500 is spend by children every day. This accounts for a whopping Rs.3, 62, 25,000 a month and an astounding Rs. 44, 07, 37,500 a year

- ✓ 22.36% of the children have been using drugs for the last seven-12 months, 19.87% for the past one-two years, 14.40% for over three years, 14.90% children have a dependency of two-three years, 12.67% have dependency of four-six months, and 15.77% have dependency of last three months

- ✓ 30.43% children have been living with the peer group at the time of use, followed by 32.04% with families, 23.1% are vagabonds living on the streets, and 14.4% of children live with their families but on streets

- ✓ 49.93% fathers and 59.1% mothers of the children are illiterate, 15.65% fathers and 12.54% mothers have a primary education, 18.5% fathers and 18.63% mothers have secondary education and 15.9% father and 9.68% mothers have tertiary education

- ✓ 39.75% of the children have families where either parents or a member of family is in addiction, whereas 60.24% of the children do not have drug addiction problem at home

- ✓ 57.6% children belong to nuclear families, 23.85% children come from joint families, and 18.5% have a single parent

- ✓ 42.1% of the families have an income between Rs. 5,001 and Rs. 10,000 per month, whereas 34.53% of the families have income of between Rs. 0 and Rs. 5,000 per month, 12.42% families have income of between Rs. 10,001 and Rs. 15,000, and 10.93% families have income of Rs. 15,001 and above

- ✓ 64.96% children reported the attitude of the police to be unsatisfactory, while 35.03% said it was satisfactory

- ✓ 43.10% children started their experiments with drugs with inhalants, 30.55% started with cannabis, 7.45% with pharmaceutical drugs, 11% with alcohol and 7.82% with opium

- ***CHAPTER ONE***

CLAIMING THE LIFE THAT IS AND THE LIFE TO BE

Each adolescent boy's life at the SPYM's Juvenile De-Addiction cum Rehabilitation Centre has a nearness to tremendousness.

Tremendous harsh realities, uncertainties, powerlessness, unmanageability of life, anger, hatred and fear against circumstances, and physical and psychological struggles.

The realisation that every aspect of their life is chaotic – physically, mentally, emotionally and socially – is hugely debilitating. There is a deal danger of their bottoming out as a deprived sense of belonging and coping skills begins to settle in.

At any given time between 50 and 60 boys at the Centre struggle with such daunting physical and psycho-social challenges, and a declining sense of self-efficacy.

Levels and frequency of substance use by children: on the rise in the country

If this mental picture of irredeemable suffering is disquieting, the assessment of pattern, profile and correlates of substance use among children in India by the National Commission for Protection of Child Rights (NCPCR), 2013, has set the alarm belling ringing across the country. (*Assessment of Pattern, Profile and Correlates of Substance Use among Children in India, National Commission for Protection of Child Rights, New Delhi, 2013)*

The report uncovers the fact that "the majority of children studied report a lifetime use of a variety of substances."

The study, that used a large national sample size of 4,024 children (boys and girls) with a total of 29 states/Union Territories and 135 sites in cities and towns, points to a dangerous increase in substance use among children and adolescents and its consistent use over a period of time.

Child substance usage patterns are: tobacco (83.2%), alcohol (67.7%), cannabis (35.4%), inhalants (34.7%), pharmaceutical opioids (18.1%), sedatives (7.9%), heroin/smack (7.9%), and injectable substances (12.6%).

Declaring the increasing levels of drug use by children to be a 'serious national public health problem' that interferes with physical growth, attainment of educational and occupational goals, and acquisition of basic life skills, the report underlines the need for urgent action.

- ➨ **'Early' curbing of substance abuse: vital to safeguard children's most invaluable possession, their 'childhood'**

- ***The starting point of SPYM is its belief that children must be allowed their childhood. Dr. Rajesh Kumar, Executive Director, SPYM, spells this out:***

The importance of early intervention programmes that identify and address various risk factors associated with early onset of substance abuse, alone or in combination (including the underage use of legal drugs, the use of illegal drugs, and the inappropriate use of legally obtained substances (for example, inhalants), prescription medications, or over-the-counter drugs) can never be emphasised enough.

Inattention to young children who start abusing drugs means that as the habit gets pronounced these children will invariably come into conflict with law. The consequence of this is the abrupt loss of childhood, a hugely traumatic and often life-altering experience.

Energies need to be directed to early detection of substance use in schools and homes, and early detox, counselling, rehabilitation and reintegration. It is well established that unresolved pain from childhood gets recreated and acted out in adult relationships. It is important that the body and mind be healed together.

If we don't invest ***now*** in redeeming our children and adolescents from substance abuse and rehabilitating and reintegrating them into society, we will be actively contributing to increased numbers of child addicts, deepened children-criminal nexus, and an overburdening of our health, policing and judicial systems.

More importantly, we will be denying children many of their rights ... to survival, health, nutrition, protection, education, development, sexual and reproductive health and rights, participation, and employment.

Though ideally there should be a minimum of nine rehabilitation homes for children to coincide with the nine districts of the National Capital, at present there are two observation homes run by the government and one by an NGO. SPYM runs the one and only drug de-addiction Centre, and one Centre in Delhi Gate Bazaar for children in need of care and protection. There is need for many more treatment centres, particularly those that allow a longer stay for fuller recovery and rehabilitation.

Children affected by substance abuse are considered as children in need of care and protection under the Juvenile Justice Act, 2000 (amended in 2015). While the unease with issues relating to juvenile justice is building up, post the December 2012 gang rape in New Delhi, and the public outrage towards all manner of juvenile delinquency is perceptible (substance abuse included), it is critical to not to lose sight of the fact that these are children. Children in need of guidance, love, acceptance, reformation and rehabilitation.

Their future lies in our today's investments in them.

➨ **Using a child-centered, strengths approach, to enable children claim the life that is and the life to be**

- ***What are the simple SPYM truths behind its extraordinary results? Why and how is SPYM's Juvenile De-Addiction cum Rehabilitation Centre's approach and functioning different? How has it created impact?***

SPYM places the children at the core of all its efforts. The healing process is initiated and carried ahead by the children themselves.

SPYM believes as these boys' lives have framed by their problematic surroundings their development should neither be forced nor harshly restricted by adults in positions of authority. The intention is instead to try and understand something of those pressures, and tensions, and in understanding, to help them.

The staff at the Centre practice what can be understood as free discipline – to grow established freedom, where the child feels free to live, engage, learn and express himself. And, heal. Just some ground rules apply.

Freedom is key. As children have been subject to harsh discipline and restrictions at home, and by authorities when apprehended, this approach is restorative as children are given the power and choice to decide the course of their life. Providing such a gateway to life as it were, is a hugely liberating experience for them as it allows them to regain a sense of their self without fear of failure or humiliation.

SPYM's strengths approach uses a comprehensive frame of reference – methods, tools, strategies, and resources – to stimulate the boys' efforts into constructive channels so that their current abilities are harnessed to their maximum potential. This is what lends structure amidst the freedom to their daily living as these strategies are taken forward in planned, cohesive manner.

Rather than admonishing the boys (for the use of substances or their inability to stop intake) or forcing extreme choices on them – particularly difficult steps for young people – a suite of innovative techniques provide a hands-on, practical approach to solving emotional and behavioural problems.

SPYM sees the first step towards children's awareness of their problem to be mindful self-acceptance of substance abuse. Once children are able to understand and accept their problem they move to the next step of finding solutions, and from here progress to goal-setting and eventually to larger issues like finding their purpose in life.

Children are also encouraged to review their own progress, and find ways to improve their behaviour through a variety of forums (described at length later). These serve as opportunities for them to take responsibility of their actions.

Motivational posters – on rights of children, Child Rights Protection Policy, dangers on the abuse of drugs, the joys of childhood – that abound at the Centre are constant reminders that this is possible!

An unusual Centre using unusual methods!

The majority of the adolescent inmates at the Centre can be classified as 'difficult' as for most part of their lives they have shown marked opposition to and disregard for authority.

This is unsurprising because they have led lives of everyday hunger, violence, acute poverty, and insecurity. As family and school lives have not provided social and emotional safety nets, the boys have allowed the volatility of their environment to push them into drug use and crime. These circumstances have severely inhibited their physical, emotional, and spiritual growth.

Despite this the SPYM compound is largely absent of barbed wires and fencing, and lacks the cordoned-off feel. It also does not have classrooms with neatly aligned rows of tables and chairs and obedient children.

It soon becomes evident that this is no usual Centre. Teachers in the classes are constantly disrupted by children talking and jostling amongst themselves and others trying to wander off. Their laughter often erupts without reason. But this is tolerated.

The idea is to guide children with trust, love hope, tools, and living examples. And, by allowing children to steer the course of their days at the Centre with a structure and set activities that springs organically from their children's desire for them.

- *Who are we and what do we want?* ***This is a simple yet powerful question that the Centre makes each of its child inmate confront through its interventions and activities. It determines what the children accomplish.***

By making children tackle this dilemma over the first month of their stay, an emphasis on purpose, priority and productivity is unhurriedly brought to play.

What this really means is that self-development of children at the SPYM Centre is fostered by allowing children take charge of their lives … by understanding their own setbacks, and by building on self-reliance (by drawing on their inner resources and strengths) to counter it.

The Centre does not force its presence on the children. Instead they gently allow the children to make decisions about their day to day living. They are encouraged to choose how to live, study, eat and play, and resolve differences amongst themselves (using the potent platform of *Bal Panchayats*). The power to heal is placed in the children's hands, so that both the power and responsibility are theirs to hold and bear.

Mohammad Asraf, 17, testifies to "feeling enormously empowered" after sticking with the 90-day treatment plan. "My actions may have been poor and my judgement lacking during my stay at the Centre. But no one made me feel small or unspectacular. Instead I learnt that I am worthy of everything wonderful due to me. That I have the capability of making decisions in my daily life and the life to come. I also understood that I have talents and my capacity to grow is limitless. I have lived by these learnings and now work at the Centre in various capacities, learning new skills every day."

- ***How do we find our best selves? How do we curtail the negative impacts of drug use? Enabling children find their lives again is done over three months.***

The first month for children is about learning about chemical addiction, identifying and developing addiction refusal and coping skills, crafting support systems for sobriety, engaging in vocational and other recreational services based on their interest, and understanding that by failing to develop a recovery-based lifestyle, it is possible to relapse into addiction.

In the second month, the boys work together with therapist to develop and maintain a balanced lifestyle. Past behaviours are addressed and work is done to overcome obstacles to substance abuse. The focus is on re-establishing self-esteem and personal identity away from chemical dependency, repairing damaged relationships, stepping into society productively, and on engaging in vocational services. As the boys continue to achieve freedom from substance abuse, their decisions are no longer based on chemical addiction, but on personal ethics and morality.

In the third month the treatment plan aids in identifying and removing self-defeating behaviours, continuing a healthy relationship with family and friends, critically reflecting on past issues, developing a good relapse prevention plan, and exploring vocational and placement avenues.

The life of Rahul Jayakar, a peer educator, is affirmation of this approach's efficacy. "Before I entered the Centre I was wasted, not knowing day from night in the haze of drugs. This made me live behind walls of inadequacy. SPYM teachers, staff and peer counsellors dismantled my reservations this brick by brick and

made me feel that I could do several things, based on my very own decisions. While I now indeed can do several things, I have chosen to work here because I want to give back. I wish to enable my brothers to reshape their lives in the way I have, paying attention to their personal development and skills enhancement. I know this is possible."

- *Nurturing centres of leadership among ex-inmates and after care of inmates are critical components.*

They say success in circuit lies. Today, 23 older boys serve as living examples of transformation and recovery, as they all have lived experiences of addiction and recovery.

Recovered older boys are encouraged to take on mentorship and leadership roles with children in recovery. Half way homes have been set up for them so that they can stay here till they are 21 years of age, actively volunteer at the Centre, help children counteract the challenges that they themselves have overcome, as well as buttress their relapse into abusing drugs.

Dharmendra, an ex-inmate, who has been a peer educator for two years, says, "I anchor 'Just for Today' sessions, supervise the children's TV watching and take them to hospital when needed. Children listen more to people like me rather than teachers as we have a narrow age barrier, and understand and relate to them better." Mohan Singh, who was an inmate in 2012, concurs. He says he too anchors 'Just for Today' for children at the Centre and de-addiction camps at the level of the community for this very reason.

These are some stories of this approach having come full circle. The significance of this method becomes clear when viewed against the backdrop of the fact that children inmates here are subject to temporary groupings, as new children enter daily and many others exit. The peer educators in that sense are a constant presence.

After care and follow ups with inmates is regular and meticulous. At least five or six follow ups are done in the six months' post release. Six monthly *Milan* programmes are also organised to facilitate the children who stick to their treatment and recovery regimen.

- **The Centre relies on innovations for impact and sustainability of outcomes.**

Several innovative concepts have reaped rich dividends for the Centre and its children.

Bal Panchayat: Held four days a week, these interactive, immersive exchanges among children are looked forward to. They ensure a routine 15-day election of five children. Children themselves elect five office bearers, and each of these members are given earmarked supervisory duties. They relate to ensuring that children go to classes, perform their home duties, decide menus, maintain cleanliness, and resolve their conflicts. This innovation ensures that home is run by the children themselves, and fosters in them a sense of responsibility, an ability to make decisions, and a strong and abiding feeling that it is within their power and interest to affect self-change.

Big Brothers: The older boys (who are generally between 16 and 18 years) act as friends and mentors. They actively use the techniques of befriending (to help younger children resolve their problems and re-enter the social space gradually) and mentoring (to provide children with the necessary skills and abilities to ensure that they are able to continue and sustain any achieved change).

Half Way Home: This has been created to help ex-inmates find a home if they don't have a family to return to or if families disown them post recovery. Their stay is made purposive by enabling them to befriend and mentor the younger children.

Community Canteens: These have again been evolved with the idea of bringing together ex-inmates and current residents around the concept of cooking and feeding. Both work together to feed an army of hungry children, an endeavour that strengths bonds and conversations.

***Milan* Programmes**: These are weekly reunions of children where a recap of the last seven-day learnings is done to embed teachings. A six monthly event to honour ex-inmates who are steadfastly sticking to their treatment regimen is a way to show current inmates that a way to change is possible, and that they themselves can take this path.

'**Just for Today'**: This is an unusual idea where the emphasis is on affecting achievable and positive change on a day-to-day basis without thinking of yesterday's mistakes or tomorrow's course of action. In everyday sessions on this, children share with one another their resolutions for the day.

'**For Today and Tomorrow'**: works to build children's futures through nine carefully crafted teaching modules ('enjoy learning', 'understanding self', 'building relationships', 'effective communication', 'moving ahead in adolescence', 'controlling emotions', 'remaining healthy', 'staying away from drugs' and 'keeping away from risks')

Most Significant Remembrance: The children are made to recount a powerful positive and negative experience at the Centre. This helps SPYM learn, understand and better serve the children.

It is no mean achievement that, in 2014, the Centre was recognised with the National Award for being among the more innovative projects in the country by the President of India**.**

- **Collaborative partnerships are established with families for long term change in children and their reintegration into homes and society.**

Families often feel overwhelmed by the crisis in their children lives and do not know how to help the child.

SPYM enables them to tide over their helplessness using three simple steps. One, they facilitate regular meetings of the child, parents and the counsellor for each of the parties to gain a nuanced understanding of the situation, concerns, and possible recovery routes. Two, the counsellors meet the family separately to address the queries the parents may have, that they do not wish to discuss in front of the child. Three, group family sessions are organised so parents can know that their families are not alone in this crisis, and that they can work alongside this group for better synergy and impact. SPYM ensures that the families live close to each other so that productive exchanges are possible, and social anxiety is diminished.

- *SPYM procedures, policies and workings are attuned to child-centric care.*

The staff of SPYM are sensitised to child rights and polices, and work strictly within its framework. They adhere to strict confidentiality standards.

The SPYM staff work within the ambit of the Child Protection Policy. This is a tough call, yet it has been possible. This is why the SPYM narrative is one of triumph. Its firm belief that each child holds rights

makes all its practices (be they activities, staff accountability or reporting formats) child-informed and sensitive. Hearing the children's voices and accommodating them is the *raison d'etre* for its success.

The Child Protection Policy applies to everyone working for or associated with SPYM. It includes:

- Staff at all levels - in office, in field or elsewhere
- SPYM associates - board members, volunteers, community volunteers, sponsors, consultants and contractors. As also the staff and/or representatives of partner organisations and local governments who have been brought into contact with children or are party to SPYM child sensitive data while working for or with SPYM
- SPYM visitors - donors, journalists, media, researchers, and government officials who may come into contact with children through SPYM

Child Protection Policy

1. A Child is defined as any person under the age of 18 years
2. Child abuse is defined as all forms of physical abuse, emotional ill-treatment, sexual abuse and exploitation, neglect or negligent treatment, commercial or other exploitation of a child and includes any actions that result in actual or potential harm to a child
3. Child abuse may be a deliberate act or it may be failing to act to prevent harm. Child abuse consists of anything which individuals, institutions or processes do or fail to do, intentionally or unintentionally, which harms a child or damages his/her prospect of safe and healthy development into adulthood
4. Child Protection, within the scope of this policy, is defined as the responsibilities, measures and activities that SPYM undertakes to safeguard children from both intentional and unintentional harm

Rights of the Children

All clients and their family members have the right to the following:

- A supportive drug-free environment
- Equal rights and equal opportunities without any discrimination on grounds of caste, class, religion, language, region, sex and so on
- Right to access the basic literacy and library programme
- Right to be treated with dignity and respect
- Right to nutritious food
- Right to access adequate necessary health services including regular check- ups as and when necessary
- A protective environment which makes them feels safe and secure
- Right to be protected from any kind of exploitation (such as using children for personal benefits)
- Right to get full information about the nature and content of the treatment as well as the risks and benefits expected from treatment
- Right to wear own clothes, keeping the local customs and traditions
- Right to have contact or visits from family members or support persons while in treatment
- Right to maintain their confidentiality regarding their information while participating in the programme and of all treatment records by the staff members
- Right to have the freedom of choice with regards to the participation in any in- house activities

- Right to get exposure or exploring their talents (such as organising sports meets, talent hunt competition etc)
- Right that all issues or complaints to be address at the priority level

- ***CHAPTER TWO***

CREATING IMPACT USING THE OTHER, UNTRIED WAY

So far the Centre has had roughly 1,000 admissions, a majority of them who have been successfully rehabilitated. How has this impact been possible?

A revolutionary approach: seemingly odd and unrealistic but workable

- ***Shibendu Bhattacharjee, Project Incharge***

"Our approach might seem odd, revolutionary and ever so unrealistic to many outsiders but it works. We don't follow systems of power hierarchies and strict disciplinarian measures simply because it won't work. It has been tried unsuccessfully in their homes, schools, and by the law enforcement authorities. We know that children eventually get resentful and resist obeying and this results in disruptive and even violent behaviours. Forewarning such as this means being forearmed … with methodologies and techniques that work, accepted by children and even designed by them. This makes children part of the solution.

By extending freedom to children, allowing them to decide the course of their everyday lives, and settle fights between themselves in their way, we feed into their self-interest, and instill within them a keen desire to lead a fulfilling and healthy life. Children who see and experience the merits of a sober life voluntarily give up the allure of making easy money through crime to fund their drug habit. Our strategies and activities are geared to open the children to new possibilities, help them find spaces for new joys and a will to grasp them."

SPYM's competence lies in its child-informed framework, strengths approach, and holistic recovery care

- ***Bilal Ahmed, Programme Director***

"SPYM's competence lies in its knowledge, attitude and policy to be able to work within a child-informed framework. Ours is a strengths-based framework grounded on an understanding and responsiveness to the impact of drug use on children. It emphasises physical, psychological, emotional and cultural safety of both the children and providers to rebuild a sense of control, resilience and empowerment.

Our approach, care and services use a comprehensive, integrated framework that promotes an awareness of the trauma caused by drug intake. It ensures safety and autonomy of children by giving them power and decision-making authority; integrates recovery care so that it is holistic; supports societal and community relationships; and fosters recovery and rehabilitation.

The pathways we use involve recreation, therapeutic care, education and building life skills.

While moving forward in the process of recovery, we do it within the context of each child's life. We see ourselves as able to provide culturally competent care. Rather than say 'how do I understand this

problem', we approach the issue by asking 'how do I understand this child'. Every part of our organisation management and service delivery is geared to address the complexities of the child's issues within the context of his socio-economic and cultural surroundings. In this sense, our approach differs from traditional service approaches that don't factor in this methodology.

We have come a long way since our inception and today we are in a position to provide technical assistance to those who wish to set up similar interventions."

The child's addiction is not a child's problem alone, it is that of entire families, communities and societies

- ***Ambreen Khan, Programme Coordinator***

"We see our greatest achievement to be enabling children to recover and stem relapse by harnessing children's resilience and strength, being sensitive to drug re-use triggers, and by bringing in family and community networks to support their healing and recovery.

We do not see our treatment goal merely as the stabilisation of the child's symptoms and halting their drug use. We are keen to give them a sense of control and autonomy over their lives through skill-building, and ensure an acceptance of them in their homes, schools, and community lives.

We bring the idea that the child's addiction is not a child's problem alone. It is that of entire families, communities and societies."

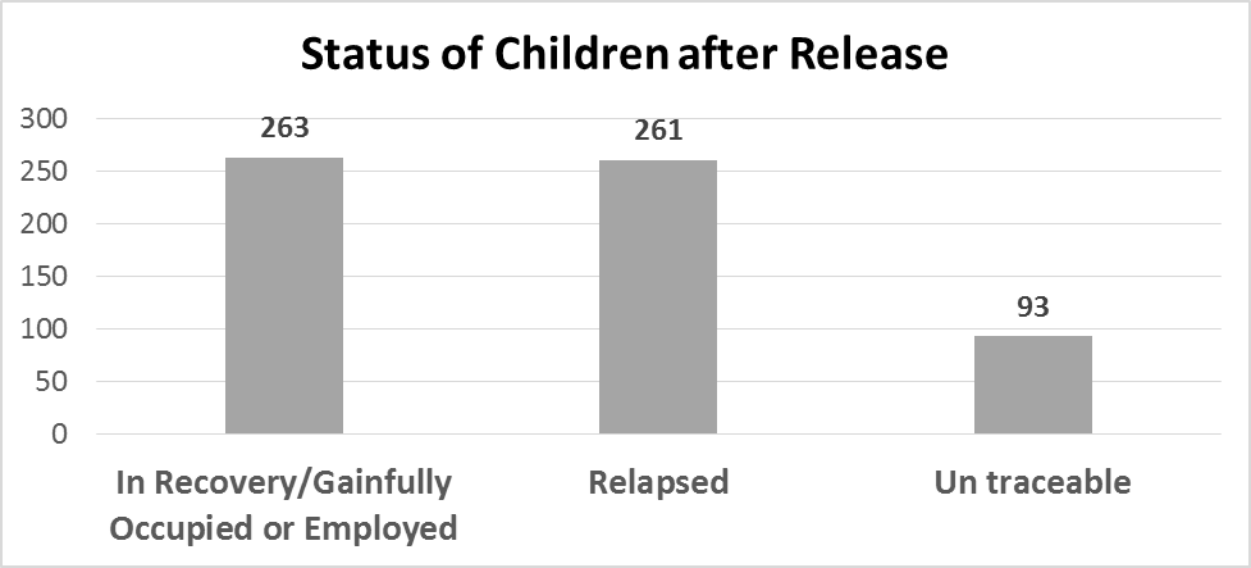
Mapping the change: from innovation to impact

A recent impact assessment by SPYM of its Centre shows:

- 56% children treated are in recovery
- 780 children are enrolled in the literacy programme
- 52 children have been admitted to the National Institute of Open Schooling
- 39% children have shown remarkable improvement in literacy, progressing from level 0 to 4
- 22 children are employed at Kirloskar after being trained on repairing motor pumps
- 41 children are successfully employed by SPYM in its different programmes
- 10 children are effectively managing the Community Canteen at the Centre
- 530 children have successfully completed an exam in food production exam conducted by ITI and received certificates
- Our life skills modules have been widely used by several NGOs and the Ministry of Social Justice

Winding back into addiction

A critical evaluation of relapse rates (through an analysis of the status of children after release) with a sample size of 300 show them to be high



Though the progress on containing the relapse rates over the years has been good, SPYM by itself may not be able to favourably transform the lives of all its inmates.

Yet it changing the lives of many, many of its children by helping them identify their problems and set about addressing it. SPYM is readying them to face the outside world, a world they will eventually have to step in and take their place.

And, the success of one inmate is inspiring others to take that leap of faith. As more children walk on the path of recovery they are bringing stability and joy within families, neighbourhoods and the society at large.

The road ahead is long, but a beginning to the uplift of children has been made.

- ***CHAPTER THREE***

A NEW WAY TO LIFE, A NEW WAY TO FREEDOM

While the promise of inter-sector convergence is recognised, SPYM's model actively utilises it. Under the umbrella framework of continuum of care, the core of the Center's multi-disciplinary approach is about combining:

Recreation

- Children are deliberately kept busy the whole day using a host of fun, interactive, action-learning, diversionary, and creative processes
- These activities harness the transformative potential of conversations, art, film shows, quiz, paintings, puzzles, theatre, puppetry, story-telling and graphics (that encourage children to communicate their deepest feelings by drawing visual narratives)
- The focus is on preventive, curative and rehabilitative activities
- Such activities create a safe space for dialogue and critical thinking, allow boys to verbally formulate what they are feeling and handle their negative emotions, come up with their own solutions, change behaviours, nurture communion with others, and also allow discussions on issues like bullying, drug abuse, sexual desires, sexual abuse, oppression, discrimination and prejudice

Therapeutic interventions

They include:

- Goal-oriented forms of individual, group and family counselling (using the principles of sympathy, empathy, and role plays of real life situations to re-allow normalcy in the lives of boys)
- Cognitive behavioural therapies (using techniques like 'grounding' that promotes a here-and-now awareness so that children can connect with current resources and options, 'feelings check' that follows the contours of feelings and emotions to try and control them and 'imagery' that uses imagination to manage difficult experiences) that help boys deal with their emotions and beliefs, reduce stress, help resolve problems and conflicts, facilitate the process of taking decisions and responsibility for these decisions, and enhance their sense of well-being
- Abstinence motivation that explore the reasons for addiction, background of the child, and his interpersonal relationships with family friends. Once the causes for dependence are identified, the child is encouraged to develop coping mechanisms and internal motivation to deal with 'craving'
- Relaxation, yoga and meditation are used to heighten movement exploration and improve behaviours, mental health, self-esteem, concentration, awareness and positive moods
- Psychotherapy, and harm reduction techniques seek to limit the negative consequences of substance abuse and help the boys unburden their woes and feelings of negativity

Firming up education

- Imparting functional literacy skills to non-literates, and sustaining and improving literacy skills of neo-literates is undertaken through the provision of reading materials in the library that are group appropriate, lively multimedia interactions, and reading and writing classes
- The Aseem library that is run at the Centre keeps up a steady supply of interesting books. Teachers help the children understand how to access the library, how to read books, how to sift through the contents to pick up what is relevant, how to identify the author/illustrator and how to read the book jacket to gauge the content of the books
- Basic skills on how to sign their names, read documents, recognise numbers, and add and subtract are part and parcel of the learning exercises

Building life skills

- There is a focus on equipping children with employable skills that can turn the tide for many children. The nine modules in '*For Today and Tomorrow'* aim to do precisely this and also build up their social and communication skills so that their re-entry into society is that much easier
- These modules have gained wide acceptance across NGOs and the Ministry of Social Justice who have published them for wider dissemination
- Active vocational trainings to become motor mechanics, cooks, data entry operators in computer companies, launderers, plumbers, and wall painters among others are also undertaken
- SPYM collaborates with ITI on a two-month course to build these skills, and the children's choice of vocational skill is based upon aptitude as well as basic education. After successful training, older boys have been placed in call centers and various retail agencies like Big Bazaar, Flipkart, and Pantaloons

"Such a framework using daily diversionary creative group processes, learning, developing life skills, and direct and indirect psychological counselling methods is a disciplined and structured way to work towards rehabilitating and reintegration of the boys. As the focus is on prevention techniques (by its emphasis on building their strengths and competencies of boys) within a clear framework of protecting children's rights, it has had a huge impact," says Ambreen Khan.

"Our focus on *3 Ls* – literacy, library and life skills – are successful because they are field-tested. By this we mean that the children are asked to judge if they understand these modules, whether they would like to learn from them, and whether it interests then," says Shibendu Bhattacharjee.

Says inmate Nandan Singh Bist, 17 years, "I enjoy the first aid classes, life skills sessions and literacy classes, and ensure that I attend the '*Just for Today'* and '*For Today and Tomorrow* 'sessions so that I have a chance to hear others and speak out for myself."

While children are eager learners, they have a disarming way of enlightening the teachers. The staff say that they have learned 'patience', 'humility' and 'the virtues of giving freely without restraint' from children.

An overview of the various strategic interventions that the Centre pulls together and synthesises reads like this:

Strategic Interventions	Activities	Expected Outcomes
• Functional literacy • Library • Life skills and first aid education • Vocational training	• Literacy classes • *For Today and Tomorrow* and first aid sessions • Weekly *Milan* programme • Library • Games • Creative activities - drawing, painting	Life skills of adolescents enhanced A. Non-literate boys B. Literate boys C. Volunteers as peer educators D. In-recovery adolescents
• Adapting training modules for neo-literates related to one or two vocations	• Coordination with technical agency for skill building • Field testing materials developed for vocational training	Vocational skills training
• Screening and assessment • Counselling • Group therapy • Role plays • *Just for Today* • *Bal Panchayat* • Recreation	• Recording of profile of the boys • Weekly sharing of progress • Monthly review meeting • Assessment of literacy level and knowledge tests	• Monitoring and progress evaluation • Overall growth and development • Conflict resolution
Documentation by way of daily logs (MIS); Most Significant Change technique for monitoring and evaluation	• Documentation of success stories • Interaction with boys and their family members • Assessment of literacy level and knowledge tests	Research and documentation of best practices

- ***CHAPTER FOUR***

SPYM TEAM: HELPING CHILDREN ON THE THRESHOLD OF ADULTHOOD

The SPYM model works with the assumption that if teachers, staff, interns and volunteers become sufficiently important enough to the children, their collective influence will balance or outweigh the desire to fall back into the substance abuse trap and relapse into criminal activities.

SPYM does understand that there is no blueprint for teaching, and even if there was it would not work here. Yet it is firm in its belief that the mindful options that this group extends by way of life choices could enable these children to grow out of criminal behaviour and substance abuse.

While engaging with children the staff of SPYM attempt a variety of techniques (that have been explained) to build their competence and survival skills.

In essence, they:

- acknowledge the centrality of each child's drug experience, and the effects it has had on their lives
- understand that the behaviours and responses expressed by the child are directly related to drug use and assure them that they are understandable
- try and understand the child, the context in which he lives instead of just focusing on symptoms
- explore the potential paths for their holistic healing in partnership with them, and
- minimise the risks that could trigger a relapse

The larger goal is to reintegrate children into their everyday social and community life. And, in case there is are no social networks or a real danger of relapsing into drug use, the staff makes efforts to accommodate them in the halfway homes within the Centre (where the children can stay post treatment).

To achieve this ambitious agenda, the staff are trained to be attentive listeners, express empathy, be culturally competent (relate to the children's background and set of values yet ensure that own their biases are not communicated to children), innovative (so as to open children's mind to fresh ideas), practical (to realise that they cannot solve all problems) and remain independent (so as not to encourage any kind of dependence on them by the boys).

They are in essence to look beyond the brash, sulking exteriors of children, the irritability, the restlessness and discontent. And use a blend patience and firmness to nourish the children's sense of self-worth and belonging, and strengthen their capabilities to handle insecurities and the complexities of their lives.

While the majority of the staff work from 10 am to 5 pm, there is a 24-hour site presence to ensure the safety and care of children. The policies and procedures of the Centre are oriented to address the child's needs.

Serving not through tiers of hierarchy but out of love and compassion

Sonia Sharma, Literacy and Life Skills Educator

"Putting children through the paces of learning is both frustrating and an absolute joy. While we teach children to read and write after testing their individual literacy levels, our classes are almost always not age and literacy level assimilated. So we have to innovate to engage different boys in different ways, and all at the same time. This is a huge challenge. We rely on our primers, objective question-answer sessions, and audio-visual aids to generate and sustain interest.

Also, children are called away from classes when they have to be presented before a magistrate at the Juvenile Justice Court. This happens at least twice in a month. This means a break and discontinuity in lessons taught and learnt. Also, teachers have to deal with the entry-release see-saw pattern as children leave after 90 days in most cases and almost daily there is a new entrant. So we ensure that each class is a complete one.

Many boys talk in class all the time. Other boys are rude and use bad language. We as teachers now actively try to discourage these habits without the use of coercion. This stems from a recognition that this is a malaise that affects the boys as they have grown up in neighbourhoods that normalise such language and where there is a general inattention to learning. We also know that such behaviour results from a deep feeling of insecurity. So we give them affection and confidence and wean them out of it.

The result: the younger boys see the older boys being respectful to teachers and women and do the same. We also raise this issue at the *Just for Today* and *For Today and Tomorrow* sessions and open it up to dialogue and debate. We also simulate real life situations where people use abusive language and violence and children learn of the negative fall-outs. It is surprising what such simple awareness-raising can do to change attitudes and behaviours."

Monika Pal, Literacy and Life Skills Educator

"We as teachers are indebted to the modules that have been developed to help us enrich the competencies of these children. They are simple to use and the children learn fast. While the life skills modules are nine in number and deal with building capacities of children to enter life supportive vocations, the modules for literacy ensure the children learn to read and fine tune their literacy skills. While it not possible to greatly advance their reading skills or bring them to speed to the school curriculum, we have ensured that the children have a working knowledge. It means that they can identity bus numbers, read directions and such like. What is hugely important to mention is that these modules are field tested. The children decide whether they understand what they are expected to read and comprehend. If they say they do not understand the module designed, it is scrapped. We as teachers need to switch roles. While my designation is life skills educator, I have to take literacy classes as well if the other teacher is on leave or busy elsewhere."

Megha Sharma, Counsellor

"My first responsibility is to pursue the psychological assessment report of each child (that consists of biographical data, current social circumstances, family relationships, current and past use of alcohol and illicit drugs, past treatment history and the child's culture and ethnicity), assess the degree of psychological complications and the child's willing to treatment, and then extend counselling to the boys depending on this.

The idea behind counselling is manifold: help these boys share their feelings, serve as bridges of empathy, enable them to dip into their inner reserves to resolve their complex life situations, and help extend their capabilities to understand and cope.

These sessions help me understand the boys, see what they need, and tell me how they can be helped. Many of them suffer from aggression, self-hate, learning problems, memory lapse and hesitancy in making decisions. Earlier the boys were circumspect and suspicious and would not express their feelings. Many would even deny their use of substances. Others displayed aggressive behaviours. But as I and the other staff built a rapport with them, they are starting to seek our help. "

Uma Khanal, Social Worker

"We maintain a detailed personal, social, physical, and psychological information of children in their intake file that is updated on a regular basis from date of admission to date of discharge. Each child's file also contains a progress report. As each one of them is presented every 14 days in front of a magistrate, this report records the comments and suggestions of the magistrate before whom a child is presented. We also follow up on the discharge reports and the six-monthly follow up reports that is an intrinsic part of each child's report. Such detailed documentation helps us gain a nuanced as well as comprehensive understanding of the problem."

Aditya Kumar, Office Assistant

"I look into follow ups that the Centre has ensure *vis a vis* the Juvenile Justice Board and other officials, and advocates/lawyers, probationary officers and welfare officers. I follow up on receiving and handing over the juveniles, transfer and referrals and also look into stocks, staff activity and schedules. I am enjoying the learning process."

Lekh Ram, Caretaker and Supervisor

"I am responsible for the security of the premises, and facilitating children's trips to St Stephen's hospital thrice a week. I ensure that the children don't feel hemmed in or restricted while ensuring that they do not take advantage of this leniency. Sometimes children do display maladaptive behaviours but we are experienced enough to calm them down, gently and persuasively."

Yogesh Kumar, Caretaker and Peer Educator

"I ferry the children to the court where they are produced before a magistrate. This happens almost on a daily basis as each child has a separate date. As a reformed addict, I understand the child's fears and apprehensions and try to assuage them."

Surender Kumar Sharma, Peer Educator

"I was an inmate in 2011 and now ensure that the Centre's daily routines are well oiled and happen like clockwork. I ensure children awaken, freshen up, attend yoga and meditation sessions, breakfast, handle their home chores, attend the morning '*Just for Today*' classes, proceed to literacy classes, eat lunch, wash their plates, attend the afternoon like skills classes, play in the grounds for an hour, watch TV and relax at 5.30 pm, attend the *Bal Panchayat* on assigned days at 7pm, have dinner, clean up the dishes, say prayers and sleep by 10 pm. It is important that there be a routine and schedule to the children's life so that their minds are occupied productively. The family environment that results from our efforts help children feel a sense of belonging."

Kelly Siali and Julie Van Rysseghem, Interns, pursuing their Masters in Special Education, University of Ghent, Belgium

"We are here to understand this unique model, see if it bears replication and contribute to the Centre in every which way. We are eager learners and intend to be part of the Centre's routines and the children's lives. Their incredible energy and enthusiasm on the Republic Day, where we joined them in painting the faces of participants made us feel alive with hope for them."

SPYM's code of conduct for the staff

(Including child staff/ volunteers and counsellors)

- Staff must always talk softly with children
- Threatening, bullying, physical abuse and using abusive language with children will not be tolerated under any circumstance
- There is zero tolerance to discrimination on the basis of ethnicity, caste, religion or sex
- Staff body language must be appropriate and should not be used to communicate negativity
- Appropriate behaviour is essential at all times as staff serve as role models
- Staff should support children in accomplishing what they can readily do for themselves
- The services should be equally provided
- Staff should provide accurate and complete information in understandable manner to the children, particularly about the efficacy of treatment and referral options available
- Staff must be able to recognise that there are children with whom he/she cannot work effectively. In such cases, arrangements for consultation, co-therapy or referral should be made
- Staff must refer the child to an appropriate resource when the child's mental, spiritual, physical status is beyond the scope of the counsellor
- Staff should not exploit their relationship with the children
- They should not accept any gifts from the children and their families
- They should keep their personal and professional lives separate
- They should assign children to homogeneous groups as much as possible
- They should use only those assessments/instruments for which they have been adequately trained
- Records should be kept confidential in a locked cabinet or in a safe room
- They should maintain respect for the organisation's policies and management functions
- They should maintain property and assets appropriately
- They should not offer services or use techniques outside of their own professional competencies

Code of conduct for interns/volunteers

It is expected that this code of conduct be followed by all the interns and volunteers:

- Punctuality and regularity in attendance
- Dignity and respect for the staff members and children
- Proper dress code
- Work under proper guidelines (of either the in-charge or the assigned supervisor)
- Fulfill expected roles and duties within the given time
- Maintain confidentialities (especially of children)

- Maintain proper distance with the staff and children
- Refrain from discrimination on the basis of sex, caste, religion, race etc
- Keep away from negative and de-motivating behaviours towards the children and staff members
- Provide innovative ideas and initiate activities to help the children
- Do not abuse children in any form (physically and verbally)
- Do not get emotionally involved with any child
- Ensure clear communication regarding problems children face inside the centre
- Seek prior information and approval to interact with any child
- Refrain from taking photos or promoting video coverage as it is strictly prohibited

- ***CONCLUSION***

CELEBRATING SOBRIETY

"*Living life leaning on drugs of every kind for support was the only way I knew how to live. As an addict, I was indiscriminate in my abuse of substances and used to experiment with everything I could get my hands on. I could not think of staying sober for an entire day because there is no way I could*.

To fund this habit, I used to steal, chain snatch, and I even murdered. Since I lived in a bubble of drugs and intoxicants for so long, I lost contact with the real world and my true feelings. It did not even bother me that my father died because he was unable to bear seeing me destroy my life.

I came to the Centre in 2011 but didn't really think this whole treatment thing was going to work for me. I expected that while I was there the counsellors were going to dissect my life, I was going to be pushed into boring lessons, and some philosophy would be rammed into my being, after which I would be told I was "cured." I assumed that after suffering this, I would escape and go back to my old ways. I was wrong.

The first thing I learned at the Centre was that addiction can impact anyone, irrespective of sex, age, race or religion. I was surrounded by people who were exactly like me. My teachers explained to me that we would have structure and that there were certain rules I would have to follow. I was not too happy, having lived by rules all my life. But soon I realised that open-mindedness, willingness to learn and recover, and respect for myself was all they asked. Once I accepted that this place was there to help me, I braced myself to embrace recovery. I could no longer endure my old self. I gave myself to the ways of the Centre.

Today, I have an energy for life and understanding of self that you wouldn't expect from someone who has been through what I have. The Centre encouraged me to cook and learn to this task well. Today, five years after my stint at the Centre I still continue to be associated with them of my own accord. This is because this is the place that has taught me the true meaning of life and the importance of rebuilding relationships.

I have cooked for many years at the Centre for the inmates. Today I am in charge of the canteen at the SPYM's Chandigarh facility and earn a decent living. I feel honoured by this responsibility. I today even send money home. The Centre has taken me away from self-centered addiction and living. It has taught me the gift of sharing my recovery.

I have been interviewed by several newspapers and television channels. I am happy as I think the message of recovery should go to everyone. It is important that families and schools be vigilant of the easy availability and use of drugs by children. This is how I started. I used to sit at a dhaba near home with my friends and abuse substances of all manner. Ironically, this dhaba is near the police station.

The road to sobriety has not been easy. I will not lie. Ugliness did threaten to creep in again. I brooded about what I lost. I sought to replace the dark forebodings with happy thoughts. I was not denying my past. I was simply accepting that I could do nothing to erase it, so dwelling on it would not help. And the difference after treatment is I knew how cope with those feelings. Today I found my balance. And I celebrate my sobriety."

A replenished life

These are the words of Saddam Hussein, an ex-inmate of the Centre. His story underlines the fact that there is more to recovery than getting treated and staying clean and sober. It is truly about another way of life and another path to living, not just existing. More importantly, it about co-existing with one's family, friends, community members and the society at large.

Self-acceptance was the starting point for Saddam. He accepted the fact that the problem was really him, and not the drugs. The core of the problem was how he perceived of myself and the world. Then he accepted the fact that this led him to be a drug addict, creating difficulties in forming any type of meaningful relationship with people, and causing unrelenting pain and suffering to himself, his mother, and his brothers.

With the help compassionate staff at SPYM he then came to an understanding and awareness, and took corrective measures. It taught him not to underestimate the power of love, tolerance, kindness and compassion. After this, his path has been to keep up the positivity and a focus on all that is good in his sober life.

Call his story a tale of redemption. Or the great recovery. Or crown him the champion of second chances. The fact remains that this is the truth. His truth and the truth of SPYM.

His transformation has not come about overnight. Nor has that of the other inmates who have recovered with him. Or after his time. It has come with learning to reprogramme their attitudes and behaviour and constant mindfulness so that they don't slip back into their old patterns of thought. It is about living inside out. And SPYM has had a huge part in this process of self-reformation.

Affirming lifelines

SPYM is keen that the treatment process be longer as three months is inadequate for complete treatment. This is perhaps why treated addicts will always be one step away from a relapse. Clinical standpoints make it clear that relapse is not simply about just choice and willpower. It is a consequence of many different elements in one's life, and a longer treatment span could help tackle it.

Till that can happen, SPYM remains undeterred in its efforts to heal the body, mind, and spirit in the way it best knows how to.

And, it is more than open to provide technical support to organisations who wish to take on the process of recovery, rehabilitation and reintegration of children who turn to drugs and crime.