

# Human Rights Abuses in the Name of Drug Treatment: Reports From the Field

Around the world, governments commit flagrant and widespread human rights violations against people who use drugs, often in the name of "treating" them for drug dependence. Suspected drug users are subject to arbitrary, prolonged detention and, once inside treatment centers, abuses that may rise to the level of torture. In many countries, military and police force people who use drugs into treatment without any medical assessment, and then rely on chains and locked doors to keep them there. Drug users who voluntarily seek medical help are sometimes unaware of the nature or duration of the treatment they will receive. In fact, treatment can include detention for months or years without judicial oversight, beatings, isolation, and addition of drug users' names to government registries that deprive them of basic social protections and subject them to future police surveillance and violence.

Mechanisms to force people who use drugs into treatment, and the methods of treatment used, are rarely documented. United Nations or national assessments of drug dependence treatment frequently report numbers of those treated without additional detail about the nature or quality of what constitutes "treatment." The accounts below, drawn from published literature and from those who have passed through treatment in Asia and the former Soviet Union, detail the range of abuses practiced in the name of drug dependence treatment, and suggest the need for reform on grounds of health and human rights.

## Arbitrary Deprivations of Liberty and Denial of Due Process

A common way for people to enter drug treatment is involuntarily through the criminal justice system. People suspected of using drugs, whether actual drug users or those simply swept up in police or military raids, are frequently detained for treatment on the basis of mere police suspicion or a single positive urine test. They are remanded to treatment for months or years without medical assessment or right of appeal. Even those who enter treatment voluntarily find themselves confined for years at a time without due process.

- Malaysia's drug treatment system makes no distinction between occasional drug users and those actually dependent on drugs.<sup>1</sup> Anyone can be detained for up to two weeks and forcibly tested by police on suspicion of drug use. Those testing positive, even in the absence of possession, can be flogged and interned for up to two years in a compulsory drug treatment center.<sup>2</sup>
- In Cambodia, drug users and others are picked up in police raids and confined in treatment and rehabilitation centers run by military staff with no training in addiction or counseling. Drug users, people with mental disabilities, sex workers, and the homeless



are sometimes confined together. There is no judicial supervision or process for appeal, though detainees report being able to bribe their way out of internment.<sup>3</sup> There is no clear criteria for release, which may depend on being able to recite the Cambodian national drug laws from memory.<sup>4</sup>

- Drug users in Vietnam can be committed by family members or community focal points that keep lists of known drug users, and there is no due process to appeal commitment or extension of internment.<sup>5</sup> In response to high rates of return to drug use (as high as 95 percent by those leaving the centers<sup>6</sup>) the government in some cities has extended terms of detention to as long as six years, including labor in facilities built near the treatment centers.<sup>7,8</sup> Between 50,000 to 100,000 drug users are now interned in Vietnam's compulsory rehabilitation centers.<sup>9,10</sup>
- As many as 350,000 people are in China's reeducation through labor and compulsory detoxification centers, which have recently been renamed, but which continue to intern people upon suspicion of drug use or a positive test for illicit substances.<sup>11</sup> The involuntary nature of treatment is revealed by one 2004 study, which found that nearly 10 percent of those apprehended by the police on suspicion of drug use swallowed nails, metal filings, or ground glass in order to obtain a medical exemption and escape internment.<sup>12</sup>

## Abuses in Confinement

What is referred to as “treatment” in many centers in fact includes painful, unmedicated withdrawal, beatings, military drills, verbal abuse, and sometimes scientific experimentation without informed consent. Forced labor, without pay or at extremely low wages, at times in total silence, is used as “rehabilitation,” with detainees punished if work quotas are not met. These abuses violate the right to be free from torture, cruel, inhuman, or degrading treatment and punishment; the right to health; and other fundamental human rights.

### Physical and mental abuse

- People formerly detained in Malaysian government treatment centers describe being kicked, punched, made to crawl through animal excrement, “act like a whale” by drinking and spitting out dirty water,

and being abused and caned by a religious leader while being told that they are “worse than an animal.” Overcrowding forces as many as 40 inmates to sleep in one cell.<sup>13</sup>

- In Vietnam, detainees are punished for failing to meet work quotas by being denied baths for a month, beaten with clubs, and being chained and forced to stand on their toes for more than 24 hours. Some internees report being put in isolation for up to a week in a cell so small that they are forced to sleep, urinate, and defecate in a standing position. Several people interviewed after completing compulsory treatment said they felt “lower than animals” after serving such sentences.<sup>14</sup>
- In Guangxi province, China, a recent study found reports of sexual abuse of female inmates by guards. Inmates received mandatory HIV tests but were not told the results. Guards reportedly used the data to know which inmates they could sleep with without using a condom.<sup>15</sup>
- In Nagaland, India, drug users have been crammed into thorn-tree cages in a sitting position.<sup>16</sup> In Punjab, drug treatment patients are routinely tortured, and in some cases have been beaten to death.<sup>17</sup>
- Drug users in Nepal recount that being taken for treatment has included suspension by the arms or legs for hours, beatings on the soles of the feet, threat of rape, and verbal abuse that includes assertions that they do not belong in the “new Nepal.”<sup>18</sup>
- Former detainees in Cambodia report being locked in cement facilities where they are forced to withdraw “cold turkey,” and not allowed to use the toilet despite the diarrhea that is commonly associated with such withdrawal, subjected to sexual violence and beatings with batons and boards, and compelled to confess to unsolved criminal cases. Detainees also describe shortages of food so severe that some eat grass and leaves.<sup>19</sup>
- In Russia, drug users in some facilities are chained to their bed and offered “flogging therapy.”<sup>20</sup>
- In South Africa, unregistered treatment centers are allowed to operate without government regulation or medical oversight. Former residents of one center report being kicked and beaten if they did not maintain sufficient speed during physical training, which consisted of carrying boulders on their bare backs, rolling long distances on hot pavement, or running while carrying as much as 25 liters of water and then being forced to drink it all, pausing only to vomit.<sup>21</sup>

Despite the reported deaths of two teenage patients, the center still in operation.<sup>22,23,24</sup> Methods used to at other centers in South Africa include stranding patients in remote areas for three days, or prohibiting them from talking to, looking at, writing messages to, or touching another person while in treatment.<sup>25</sup>

### **Non-evidence-based and experimental treatment**

- Malaysia's drug treatment centers are commonly run by ex-army personnel, and there are few trained paramedics or counselors.<sup>26</sup> Treatment is largely military-style discipline and drills in the hot sun. Methadone, a proven treatment for opioid dependence, is unavailable in most centers.<sup>27</sup> Condoms are also unavailable in many centers, despite accounts of sexual behavior among residents and between residents and guards.<sup>28</sup>
- Antiretroviral treatment is not available in most of Vietnam's treatment centers, although HIV prevalence is reported at 75 percent.<sup>29</sup> Some centers conduct mandatory HIV testing without informing those tested of their results.<sup>30</sup> Treatment of tuberculosis and other opportunistic infections is also unavailable, except through bribes, and there is no access to sterile injection equipment despite documented drug use in many centers.<sup>31</sup>
- Those interned in China's centers are often offered little treatment other than mandated chants such as "drugs are bad, I am bad," long hours of forced labor, and military-style drills.<sup>32</sup> Private and voluntary treatment methods include partial lobotomy through the insertion of heated needles clamped in place for up to a week to destroy brain tissue thought to be connected to cravings.<sup>33</sup> The technique is a variation of a Russian technique in which very cold, rather than heated, rods were used to destroy brain tissue.<sup>34</sup> This surgery is one for which families save and pay significant money, despite

reports of adverse effects and widespread condemnation of such procedures as experimental and unethical.

- One treatment center in India runs on the motto "changed when chained," and shackles participants' legs together and loosens links the longer they remain drug free.<sup>35</sup> Some centers administer drugs that have been discontinued in Europe due to their adverse effects, while treatment with methadone or buprenorphine, both on WHO's list of essential medicines, is often not available.<sup>36</sup>
- Throughout Eastern Europe and Central Asia, "narcologists" charged with treating drug and alcohol addiction administer hypnoid therapies used in Soviet times, where patients have ampoules or substances injected under the skin and are told that they will explode and poison them if they drink or use drugs, or where patients are shown films with subliminal anti-addiction messages.<sup>37</sup> Prescription of methadone or buprenorphine, either for maintenance or detoxification, is illegal in Russia.

### **Forced labor**

- Human rights groups assert that drug treatment centers in Vietnam are in reality forced labor camps, with inmates required to work long hours under extremely harsh conditions<sup>38</sup> at far below market wages. Tasks included carrying heavy buckets of water and excrement, hauling clay on their shoulders,<sup>39</sup> or making trinkets for market sale. Those who fail to meet work quotas are isolated and punished severely.<sup>40</sup>
- One study in China found that detained IDUs reported working from 7 a.m. to 2 a.m., seven days a week, performing unpaid factory labor, with the threat of punishment, including beatings, if production quotas were not met.<sup>41</sup>

*"The Special Rapporteur wishes to recall that, from a human rights perspective, drug dependence should be treated like any other health care condition. Consequently, he would like to reiterate that denial of medical treatment and/or absence of access to medical care in custodial situations may constitute cruel, inhuman or degrading treatment or punishment and is therefore prohibited under international human rights law. Equally, subjecting persons to treatment or testing without their consent may constitute a violation of the right to physical integrity. He would also like to stress that, in this regard, States have a positive obligation to ensure the same access to prevention and treatment in places of detention as outside."*

— Manfred Nowak

Special Rapporteur on torture and other cruel, inhuman or degrading treatment or punishment (Geneva, January 14, 2009)

## Endnotes

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### International Harm Reduction Development Program (IHRD)

The International Harm Reduction Development Program (IHRD), part of the Open Society Institute's Public Health Program, works to reduce HIV and other harms related to injecting drug use and to press for policies that reduce stigmatization of illicit drug users and protect their human rights. Since 1995 IHRD has supported more than 200 programs in Central and Eastern Europe and Asia, and bases its activities on the philosophy that people unable or unwilling to abstain from drug use can make positive changes to protect their health and the health of others. Since 2001, IHRD has prioritized advocacy to expand availability and quality of needle exchange, drug dependence treatment, and treatment for HIV; to reform discriminatory policies and practices; and to increase the participation of people who use drugs and those living with HIV in shaping policies that affect their lives.