



LAO PDR

Somsanga's Secrets

Arbitrary Detention, Physical Abuse, and Suicide
inside a Lao Drug Detention Center

HUMAN
RIGHTS
WATCH



Somsanga's Secrets

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Lao Drug Detention Center**

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Summary and Recommendations



Once inside Somsanga, people cannot come and go. Most detainees are held in locked cells inside a compound with high walls topped with barbed wire.



SOMSANGA'S SECRETS

Photographs by Arantxa Cedillo

*I was not happy there,
I wanted to go out all the time.*

PACHEEK, A CHILD WHEN RELEASED
FROM SOMSANGA IN MID-2010

“Do drugs control your life?” For those ready to answer “yes,” the glossy pamphlet describing the Somsanga Treatment and Rehabilitation Center in Vientiane, the capital of Laos, is reassuring. Bearing the logos of the government of the Lao People’s Democratic Republic (PDR), the United States Embassy, and the United Nations Office on Drugs and Crime (UNODC), the tri-folded brochure provides an overview of the Somsanga center as well as its contact information. The brochure also touts the center’s evolution from draconian detention facility to a more enlightened establishment— what it calls a “significant shift away from its role as a law enforcement tool towards becoming a health-oriented facility.” Lao media and the UNODC’s website echo the suggestion that Somsanga is a “reformed” detention center.

This description fundamentally misrepresents the real situation inside Somsanga.





Exercise drills involving pushups and calisthenics take place early every morning in Somsanga center.



A guard lectures detainees in Somsanga center. Classes in drug use and courses such as vocational training may be beneficial for some people trying to overcome drug dependency, but there is no rationale for premising such services on months or years of involuntary detention.



Far from being “health-oriented,” as government officials and the center’s international supporters claim, Somsanga offers little effective, evidence-based treatment for those who need it. Confinement is still Somsanga’s central operating principle: most detainees remain in locked cells inside compounds with high walls topped with barbed wire. Somsanga still functions as a detention center, although it lacks the basic protections prisons provide: due process, judicial oversight, and mechanisms for appeals and accountability.

This report examines how people get to Somsanga and what happens to them inside. Based on interviews with 12 former detainees and 8 current or former staff members of international organizations, it details how Somsanga holds most of its detainees against their will. Police or village militia (*tamnaut baan*) detain and bring people to Somsanga. Other detainees enter because their family members “volunteer” them out of a mistaken belief that the center offers therapeutic treatment, or because they feel social pressure to help make their village “drug free.”

Regardless of how they enter, people held in Somsanga never benefit from any judicial process to authorize their detention. Once inside, people cannot come and go. Police, who guard the facility’s main gate, are responsible for security and are a constant presence among detainees. As one member of an international organization familiar with the center observed, “A truly voluntary center does not need to be guarded by police, nor do the doors need to be locked.”

This report finds that detainees live in a punitive and heavily controlled environment. Those who try to escape may be brutally beaten by “room captains”—trusted detainees whom staff designate to play a central role in the daily control of other detainees, including serving the center’s police as guards and punishing detainees who infringe center rules. Sahm, who was released in mid-2010, reported witnessing a beating of five detainees who were unsuccessful in their escape attempt.

The room captains beat them until they were unconscious. Some were kicked, some [beaten] with a stick of wood.... The police told the room captains to punish them because the police would be held responsible for any successful escapes.

In Lao PDR, village officials are under pressure from government administrators to declare their village “drug-free.” However only a minority of people who use amphetamine type stimulants—the most common type of drug in Lao PDR—actually become dependent. Despite this, village officials and family members—eager to be seen to comply with official policy—sometimes request and pay Somsanga to detain individuals who use drugs infrequently or irregularly.



Detainees live in a punitive and heavily controlled environment. Detainees who try to escape may be brutally beaten by “room captains”—trusted detainees whom staff designate to play a central role in the daily control of other detainees.





The Lao government uses the Somsanga center as a convenient dumping ground for populations that are deemed “undesirable” by police or the village militia. In addition to the mentally ill, homeless people and street children may be detained in Somsanga.



Human Rights Watch is concerned that infrequent drug users may be subject to Somsanga’s “treatment” without having an underlying condition that actually requires treatment.

Somsanga not only detains those dependent on drugs. For Lao authorities, Somsanga functions as a convenient dumping ground for those considered socially “undesirable.” People who might have a genuine need for drug dependency treatment are locked in alongside beggars, the homeless, street children, and people with mental disabilities. In the lead up to the 25th Southeast Asia (SEA) games, held in Vientiane in December 2009, city authorities published call-in numbers for the public to report beggars to ensure “orderliness” during the games. Authorities explained they would hold people rounded up in this way in Somsanga. Former detainees held in Somsanga at the time of the games told Human Rights Watch the center did indeed detain homeless people and street children. Media reports indicate that such detentions continued during 2010.

International donors have lent more than their logos to promoting Somsanga. Indeed, over the last decade, they have constructed many of Somsanga’s buildings and fences. Donors have also paid for center staff to be trained in drug treatment. Foreign embassies in Vientiane and UNODC have funded services in the center, such as vocational training, and have donated books and sports equipment. This approach is not working. “People are angrier and more aggressive after they are there,” Ungkhan, a former detainee, said.

It’s not difficult to see why: the essence of Somsanga’s purported “treatment” remains being locked up, at risk of physical abuse for infringing rules or trying to escape. While classes or courses may be useful for some people undergoing rehabilitation when they are offered in community settings, the utility of such classes or courses for Somsanga’s detainees is obscured by the bleakness and cruelty of detention in its crowded cells.

One startling finding of Human Rights Watch’s research into the conditions inside Somsanga was the number of former detainees who reported seeing other detainees attempt or commit suicide. Of the 12 former detainees interviewed for this report, five said they had directly witnessed suicides or suicide attempts by fellow detainees during their detention. As Maesa, a child (i.e. under 18-years-old) who spent six months in Somsanga, explained to Human Rights Watch: “Some people think that to die is better than staying there.” Despondent at being locked up or demoralized by being abandoned by their families, some detainees protest their detention by the only means left to them. Former detainees spoke of suicides—both attempted and actualized—involving ingesting glass, swallowing fabric soap, or hanging.



(opposite) Detainees stare out from behind bars at the Somsanga Centre. The essence of drug “treatment” in Somsanga is detention.

(right) The toilets in Somsanga’s “lower buildings” are dirty and in poor condition.

Human Rights Watch believes Somsanga should be shut down for three main reasons.

First, the underlying operational principle of Somsanga—long-term compulsory detention in the name of “treatment” and “rehabilitation”—violates the right to health. Compulsory drug treatment should not be routine, *en masse* detention that lasts for months or years. It is only justifiable in exceptional circumstances of high risk to self or others, when accompanied by a series of due process protections to prevent the abuse of such a system, and when limited to the time strictly necessary to return a patient to a degree of autonomy over their own decision making. Where compulsory treatment consists of being locked up in a detention center without due process, it violates the prohibition on arbitrary detention and the right to health of drug users.

UN agencies and international organizations have criticized centers that routinely and *en masse* detain people for purported “treatment” and “rehabilitation” and called for them to be closed down. In December 2010, UN agencies convened a meeting in Bangkok, Thailand, to discuss alternatives to compulsory drug detention centers. Officials from eight Asian governments that operate compulsory drug detention centers in their countries attended the meeting. However, Lao PDR chose not to attend. According to staff members of international organizations familiar with the meeting, Lao PDR took this position because it does not consider its centers compulsory.

Somsanga operates in clear disregard for the principles articulated by one of its principal supporters, UNODC, which has elsewhere clearly criticized the approach of routine, *en masse* detention in the name of “treatment”:

Many countries provide long term residential treatment for drug dependence without the consent of the patient that is in reality a type of low security imprisonment. Evidence of the therapeutic effect of this approach is lacking.... It does not constitute an alternative to incarceration because it is a form of incarceration.

Second, Human Rights Watch believes Somsanga should close because the center entails an unacceptably high risk of other human rights abuses, such as ill-treatment of detainees by staff or detainee guards and the arbitrary detention of



populations considered socially “undesirable.” Human Rights Watch is concerned that international donors supporting Somsanga are not monitoring and reporting such issues.

In the course of researching this report, Human Rights Watch wrote to 10 international donors and implementing partners who reportedly have supported Somsanga, outlining the findings of this research and asking whether those organizations were aware of any reports of human rights abuses in Somsanga. At time of writing, Human Rights Watch had not received a response from four of these donors. One donor responded to clarify that it had not provided support to Somsanga. While the responses of the remaining five organizations varied in their content and detail, all responded that they were not aware of any reports of arbitrary detention, ill-treatment, or other human rights abuses in Somsanga.

Third, international donor support for services such as drug classes and vocational training in closed centers has retarded the development of voluntary services in community settings. Despite a decade of external donor funding for the Somsanga center, the overall state of drug dependency treatment in Lao PDR is poor; there are virtually no voluntary, community-based options for those who need drug dependency treatment. The sad truth is that a person dependent on drugs in Vientiane, and who wants help in grappling with their addiction, has few realistic options. Individuals dependent upon drugs in Vientiane face a choice between trying to stop on their own and admitting themselves into a locked detention facility for months or years, where they may face physical and psychological abuse amounting to cruel, inhuman, and degrading treatment.

Classes in drug use and courses such as vocational training may benefit some people trying to overcome drug dependency, but there is no rationale for premising such services on months or years of involuntary detention. One staff member of an international organization familiar with drug issues in Lao PDR said:

The overwhelming majority of young people in Somsangna would be much better off either at school or engaged in some higher educational or vocational training initiative—or indeed working—outside of Somsangna. Even if there is drug use and sexual risk reduction education in Somsangna, it should be going on in the community.

Donors should focus on ensuring the availability of, and limit their support to, humane drug treatment options that comport with international standards. Those standards include the requirement that drug dependency treatment be voluntary (except in very limited circumstances), based on sound scientific evidence as to what is effective, and adapted to the individual needs and interests of the patient.

Beatings and suicides and other abuses in Somsangna must be addressed. But they are symptoms of the more fundamental problem that underlies them and that is the focus of this report: the functioning of a center that purports to be a health facility, but operates in reality as a detention center. This report urges the Lao government and the center’s supporters to move away from an approach of routine, long-term, *en masse* detention of people in the name of drug treatment. Human Rights Watch urges donors and government authorities to begin to establish voluntary, community-based options available to anyone in the community who wants them.

In many countries, the range of health services required to provide drug dependence services to the community is offered by nongovernmental organizations (NGOs). Historically, Lao government authorities have suppressed these groups, although there are some indications this situation may be changing. Support for NGOs—from the Lao government but also from donors funding drug-related issues in Lao PDR—has the potential to provide necessary services for people who use drugs (as well as other socially marginalized groups).

Lao PDR has stated its intention to make the country “drug free” by 2015, in line with an Association of Southeast Asian Nations (ASEAN)-wide political commitment. But such a goal should not blind the government to respect the human rights of Lao people who use drugs and other marginalized populations, such as beggars, the homeless, street children, and people with mental disabilities. Nor should the fact that Lao PDR is a poor country with limited infrastructure to provide social services prevent donors and implementing partners from aligning their assistance to Lao PDR in a way that reflects international standards and best practice in providing drug treatment. Indeed, failure to respect human rights and comport with international standards will only further undermine the stated goal of the Lao government to create a “prosperous society governed by the rule of law for all Lao people.”





Inside Somsanga's "lower buildings" hundreds and sometimes over a thousand detainees languish in overcrowded cells. People who might have a genuine need for drug dependency treatment are locked in alongside casual drug users, beggars, the homeless, the mentally ill, and street children.

KEY RECOMMENDATIONS

TO THE LAO GOVERNMENT

- Instruct the Lao Commission on Drug Control to release current detainees in Somsanga, as their continued detention cannot be justified on legal or health grounds.
- Instruct the Lao Commission on Drug Control to permanently close Somsanga.
- Carry out prompt, independent, thorough investigations into allegations of arbitrary detention and cruel, inhuman or degrading treatment or punishment in Somsanga.
- Stop the arbitrary arrest of people who use drugs and other “undesirables” such as homeless people, beggars, street children, and people with mental disabilities.
- Instruct the Ministry of Health and other relevant ministries and departments to expand access to voluntary, community-based drug dependency treatment and ensure that such treatment is medically appropriate and comports with international standards.

TO UNODC, BILATERAL DONORS, AND INTERNATIONAL ORGANIZATIONS PROVIDING ASSISTANCE TO SOMSANGA

- Publically call for:
 - The closure of Somsanga
 - An investigation into the allegations of human rights violations occurring inside Somsanga
 - Holding those responsible for any violations to account
 - Appropriate remedy for detainees and former detainees for any harm to their physical and mental health sustained while in detention.
- Review any funding, programming, and activities that support the operation of Somsanga to ensure that no funding is being used to implement policies or programs that violate international human rights law, such as the prohibitions on arbitrary detention, and cruel, inhuman or degrading treatment or punishment.
- For those donors funding capacity building projects on drug dependence treatment for drug detention center staff, cease such projects immediately.
- Support the expansion of voluntary, community-based drug dependency treatment, including appropriate services for women and children.

For full recommendations, see p. 63

SOMSANGA DRUG DETENTION CENTER, LAO PDR



The Somsanga center is a large complex of concrete buildings, situated on land that slopes gently downhill from an entrance gate guarded by police. Most visitors to the center are shown the “upper buildings”: the Somsanga clinic and the dormitories nearby where patients can stay if their relatives are willing to pay. Further inside Somsanga center, downhill, is what former detainees refer to as the “lower buildings,” two distinct compounds that sit behind high walls topped with barbed wire. Inside, hundreds and sometimes over a thousand detainees languish in overcrowded cells.
January 15, 2010. © 2010 Google

Methodology

Lao PDR does not allow international human rights organizations to freely conduct research or monitor human rights concerns in the country. NGOs and others visiting drug detention centers are rarely, if ever, able to speak privately with detainees or see all parts of a government drug detention center. As a result, obtaining and verifying information about human rights violations in Lao drug detention centers presents great challenges. There is reluctance in Lao PDR to discuss drug use in general, and Somsanga in particular. While former detainees of Somsanga are freer to talk openly about their experiences than those still in detention, many are still fearful of being taken back to the center and are wary of the additional risk created by talking to human rights organizations.

This report is based on information collected during three weeks of field research conducted in Lao PDR in late 2010. Human Rights Watch conducted in-depth, confidential interviews with 12 people recently detained in Somsanga drug detention center.¹ All 12 had been in detention within two years of the date of their interview with Human Rights Watch. All come from Vientiane.

Of the 12 former detainees whose testimony forms the basis of this report, four were children at the time of their detention, including one who was a girl at the time of her detention.² All four children were adolescents, although their precise ages have not been included in the report in order to protect their identities.

All interviewees provided verbal informed consent to participate. Individuals were assured that they could end the interview at any time or decline to answer any questions without consequence. Interviews were semi-structured and covered a number of topics related to illicit drug use, arrest, and the conditions of detention. To protect their confidentiality and safety, interviewees have been given pseudonyms and in some cases certain other identifying information has been withheld.

¹ Human Rights Watch uses the term detainees to refer to those who reported that they were detained against their will as well as those who entered the centers on a voluntary basis. The term detainee is appropriate for those who enter on a voluntary basis because once inside the centers they are not free to leave.

² The word “child” is used in this report to refer to anyone under the age of 18 and “girl” to a female under the age of 18. The Convention on the Rights of the Child (CRC) defines as a child “every human being below the age of 18 years unless under the law applicable to the child, majority is attained earlier,” art. 1, adopted November 20, 1989, 1577 U.N.T.S. 3 (entered into force September 2, 1990). Lao PDR acceded to the CRC on May 8, 1991.

Information from these former detainees was generally consistent in terms of the forms, severity, and frequency of abuses reported.

Human Rights Watch also spoke to two people who had been held in Somsanga prior to 2009. Their testimony, largely consistent with the testimony of more recent detainees, is not included in this report because their periods of detention fall outside this report's timeframe.

Human Rights Watch also interviewed eight current or former staff members of international organizations who have knowledge and experience regarding the situation of people who use drugs in Lao PDR. Testimony they provided has been included in this report.

Where available, secondary sources—including official Lao media and reports from government sources or other organizations—has been included to corroborate information from former detainees and current or former staff members of international organizations.

In July 2011, Human Rights Watch wrote to the head of the Lao Commission on Drug Control (LCDC) to request information on the Somsanga center and solicit its response to violations documented in this report. This correspondence is attached in Annex 1.

In July 2011, Human Rights Watch also contacted 10 donors and implementers who have reportedly funded or implemented programs in Somsanga drug detention center. A version of this correspondence is attached in Annex 2.

I. Somsanga Center

You can't compare it to outside. [In Somsanga] you have no freedom.
—Pueksapa, who spent nine months in the center³

The Somsanga center is a large complex of concrete buildings, situated on land that slopes gently downhill from an entrance gate guarded by police. Most visitors to the center are shown the “upper buildings”: the Somsanga clinic and the dormitories nearby where patients can stay if their parents or relatives are willing to pay monthly fees of between approximately US\$40 to \$60.⁴

The “upper buildings” are still located inside the barbed wire fence that runs around the perimeter of the center. Police guard the gate to the center, and some detainees in the “upper buildings” are held there against their will.⁵ Nevertheless, those in the “upper buildings” have food brought from their relatives and long periods outside their rooms each day.

This experience is for the lucky few. Further inside Somsanga center, downhill, is what former detainees refer to as the “lower buildings,” two distinct compounds that sit behind high walls topped with barbed wire. Inside, hundreds and sometimes over a thousand detainees languish in overcrowded cells.

Management staff from the center reported that in mid-2011 there were 1,087 detainees.⁶ The Lao Commission on Drug Control has reported that, between 2003 and 2009, the detainee population in Somsanga has fluctuated between 1,100 to 2,600 detainees per year.⁷ Of the 4,151 people who were held in Somsanga in the three years between 2008 and 2010, 233 (or around 6 percent) were female.⁸

³ Human Rights Watch interview with Pueksapa, Vientiane, late 2010.

⁴ Human Rights Watch interviews with Ungkhan and Maesa, Vientiane, late 2010.

⁵ Interviews with Ungkhan, Paet, and Maesa confirmed that people can be held in the “upper buildings” against their will: Human Rights Watch interview with Ungkhan, Paet, and Maesa, Vientiane, late 2010.

⁶ “Drug Treatment and Vocational Training Center, Vientiane Capital, Laos,” Oukeo Keovoravong, deputy director for treatment and psychology of [Somsanga] center, presentation at Regional Seminar on ATS Treatment and Care, Kunming China, April 18-21, 2011, copy on file with Human Rights Watch.

⁷ “Presentation by participant of LCDC at the UNODC Global SMART Programme Regional Workshop,” Lao Commission on Drug Control, Bangkok Thailand, August 5-6, 2010, copy on file with Human Rights Watch.

⁸ “Drug Treatment and Vocational Training Center, Vientiane Capital, Laos,” Oukeo Keovoravong, deputy director for treatment and psychology of [Somsanga] center, presentation at Regional Seminar on ATS Treatment and Care, Kunming China, April 18-21, 2011, copy on file with Human Rights Watch.

Maesa, who spent six months in Somsanga, estimated that when she was detained there were about 50 people staying in the “upper buildings” and some 750 people in the “lower buildings.” She explained the difference between these two parts of Somsanga:

The upper buildings are very comfortable and good. The people in the upper level are rich: the families provide money to the center. The people in the lower buildings don’t pay. They are poor people who have no money for medicine—or if they have a little money for medicine, they have no money to stay in the clinic. In the lower buildings, the food is bad and dirty, showers are only for a short time, all day they ring the bell so it’s time to go back to the cells. The lower buildings are very tense: you have to follow lots of rules. In the lower buildings, people are suffering, [figuratively] suffocating.⁹

The center’s management staff classified the overwhelming majority (around 93 percent) of total detainees between 2008 and 2010 as users of amphetamine type stimulants.¹⁰ Methamphetamine (commonly known as *ya ba* or *ya ma*, an amphetamine type stimulant) has been a commonly used drug in Lao PDR since at least 2000.¹¹ Fueled by low prices and widespread availability, UNODC estimated that 1.4 percent of the population aged between 15 and 64 has used methamphetamine at least once in the last year.¹²

The Lao government and some international donors have responded to this widespread methamphetamine use by building closed centers to meet purported “treatment” needs. Some staff members of international organizations, familiar with drug issues in Lao PDR, explained that in their opinion, the impetus to build such centers came from particular international donors rather than the Lao government itself. One staff member of an international organization, familiar with drug issues in Lao PDR, explained:

External donors are encouraging Lao PDR to continue to build and run these [drug detention] centers. Eight new centers were built with external funding

⁹ Human Rights Watch interview with Maesa, Vientiane, late 2010.

¹⁰ “Drug Treatment and Vocational Training Center, Vientiane Capital, Laos,” Oukeo Keovoravong, deputy director for treatment and psychology of [Somsanga] center, presentation at Regional Seminar on ATS Treatment and Care, Kunming China, April 18-21, 2011, copy on file with Human Rights Watch.

¹¹ Literally, *ya ba* means “crazy drug,” referring to the limited cases when a methamphetamine consumer might display “crazy” behavior, possibly due to a drug-induced psychosis. Literally, *ya ma* means “horse drug,” referring to its effects on the consumer’s energy level.

¹² UNODC, “Amphetamines and Ecstasy: 2011 Global ATS Assessment,” September 2011, p. 24. http://www.unodc.org/documents/ATS/ATS_Global_Assessment_2011.pdf (accessed September 26, 2011); UNODC, “Patterns and Trends of Amphetamine-Type Stimulants and Other Drugs: Asia and the Pacific,” 2010, p. 81. Available via http://www.apaic.org/images/stories/publications/2010_Regional_Patterns_and_Trends_ATS.pdf (accessed June 10, 2011).

over the last few years. In my experience, Lao decision makers know very well the limitations of these centers: even if the compulsory—or “voluntary”—centers were full, it would take them many years to “treat” all amphetamine users. They know about the high relapse rate [after release].¹³

As of mid-2011, there were at least eight such centers across the country, of which Somsanga is the oldest and largest. Additional centers are in Champasak province (supported by Thailand), Savanakheth (supported by the US), Oudomxay (supported by China), Luang Prabang (supported by Japan), and Bokeo (supported by the US). Two centers are located in Sayaburi (supported by Brunei).¹⁴ The Lao Commission on Drug Control ultimately oversees all these centers.

Somsanga is often portrayed as a “rehabilitated” detention center. Somsanga’s first buildings were constructed in 1996 and the facility was initially under the authority of the Ministry of Public Security.¹⁵ UNODC’s website states that it has been supporting Somsanga since this date.¹⁶ According to UNODC correspondence with Human Rights Watch, the center used to be the “Somsanga Correctional Center,” although it is unclear whether it was originally a prison, reformatory, or other type of detention center. From 2001 to 2003, UNODC supported the construction of a health clinic beside this building with funding from the US government.¹⁷ UNODC notes on its website that “the [Somsanga] facility has recently undergone a significant shift from its role as a law enforcement institution towards a health-oriented facility.”¹⁸

¹³ Human Rights Watch interview with staff member of an international organization, September 2011.

¹⁴ “Presentation by participant of LCDC at the UNODC Global SMART Programme Regional Workshop,” Lao Commission on Drug Control, Bangkok Thailand, August 5-6, 2010, copy on file with Human Rights Watch; UNODC, “Sustaining Opium Reduction in Southeast Asia: Sharing Experiences on Alternative Development and Beyond,” 2009, p. 46; N. Thomson, “Detention as Treatment: Detention of Methamphetamine Users in Cambodia, Laos and Thailand,” The Nossal Institute for Global Health and the Open Society Institute, March 2010, p. 51, http://www.soros.org/initiatives/health/focus/ihrd/articles_publications/publications/detention-as-treatment-20100301 (accessed May 12, 2011).

¹⁵ Chloé Gwinner, “Somsanga: From detention to rehabilitation,” *Vientiane Times*, April 1, 2010.

¹⁶ According to the UNODC website, “UNODC has been supporting the Lao Government in its efforts in improving services and staff capacity at the centre since 1996 through the provision of infrastructure to ameliorate patients’ standards of living, recreational therapy and vocational training, as well as training for the centre’s staff.” See “Lao PDR: Creating art on the way to recovery,” UNODC, February 16, 2010, www.unodc.org/laopdr/en/stories/Artwork-on-the-way-to-recovery.html (accessed June 2, 2011).

¹⁷ Letter to Human Rights Watch from Sandeep Chawla, deputy executive director of UNODC, September 27, 2011.

¹⁸ “Expansion of vocational training and occupational therapy opportunities at the Somsanga treatment and Rehabilitation Center (LAO/F13 sub-project),” UNODC, undated, www.unodc.org/laopdr/en/projects/STC/STC.html (accessed June 6, 2011).

It is a description frequently echoed in official Lao media.¹⁹ In May 2005 the official Lao press agency KPL described Somsanga as the “pilot center” of a UNODC capacity building project:

The project is executed by UNODC, with the Lao National Commission for Drug Control and Supervision (LCDC) as its counterpart agency, and the US Government supporting with USD167,000 funding.... Over the past 12 months, the project saw several milestones and achievements. The 180 degree transformation of Somsanga Rehabilitation Centre is one good example.²⁰

Similarly, in April 2010, the *Vientiane Times* described the center as a “former detention center.” Yet a closer reading of the same article reveals that Somsanga has not undergone the “significant” shift that it, or its supporters, contends. The story continues:

After medical treatment, patients will be transferred to the male or female compounds to undergo a rehabilitation period of 6 to 12 months, or up to 2 or 3 years for recidivists. The number of police guards has been reduced to a minimum who are assisted by a team of trusted patients in cases of escape. Guards in plain clothes stay among the patients and talk with them in a friendly atmosphere. Still, about one patient manages to run away every month.²¹

International Support

Somsanga’s supposed reformation is largely explained as a consequence of international donor support. Since at least 2001, donors and implementing organizations have generously supported the center by constructing buildings, providing training in rehabilitation services, and supporting services in Somsanga.

¹⁹ In Lao PDR, the state closely controls most media and does not allow for the publication of views critical of the state. The international NGO Freedom House ranks the country 184 of 196 countries in terms of press freedoms and categorizes the country as “not free”: see the Global Press Freedom Rankings in Freedom House, *Freedom of the Press 2011: A Global Survey of Media Independence* <http://freedomhouse.org/template.cfm?page=668> (accessed August 21, 2011). For its part, the international NGO Reporters Without Borders ranked Lao PDR 168 out of 178 countries on its Press Freedom Index in 2010: see Reporters Without Borders, “Press Freedom Index 2010”, <http://en.rsf.org/press-freedom-index-2010,1034.html> (accessed August 21, 2011).

²⁰ “Laos tackle drug problem,” KPL Lao News Agency, May 31, 2005.

²¹ Gwinner, “Somsanga: From detention to rehabilitation,” *Vientiane Times*.

In July 2011, Human Rights Watch wrote to 10 donors and implementers who have reportedly funded or implemented programs in Somsanga drug detention center. By the time this report went to print, Human Rights Watch had received no response from four of those donors: the US Department of State’s Bureau of International Narcotics and Law Enforcement Affairs (INL), the US Embassy in Vientiane, the Japanese Embassy in Vientiane, and the Australian Embassy in Vientiane.²²

Six donors and implementers did respond to Human Rights Watch’s correspondence, including UNODC, the German Embassy in Vientiane, the German Development Agency (DED, now GIZ), the Singaporean Embassy in Vientiane, the Singapore International Foundation (SIF), and the EU delegation to Lao PDR.²³

One of the 10 donors and implementers contacted by Human Rights Watch—the European Union delegation to Lao PDR— wrote to Human Rights Watch to clarify that the EU does not finance any projects in Somsanga, nor are such projects planned.²⁴

While the exact content of the other five responses received by Human Rights Watch varied, the organizations tended to provide a number of similar responses: all denied any awareness of reports of human rights abuses in the center, and none identified any specific reporting mechanisms for human rights abuses experienced by detainees or witnessed by project staff in the course of implementing the projects.

Building Infrastructure

Human Rights Watch wrote to donors reportedly involved in the building of infrastructure at Somsanga seeking (among other information) details on any support for the construction of new, or renovation of existing, physical infrastructure in Somsanga.

In correspondence to Human Rights Watch, UNODC responded that it has supported the construction of various buildings in the Somsanga center with funds from the US

²² Letter from Human Rights Watch to William Brownfield, assistant secretary for the Bureau of International Narcotics and Law Enforcement Affairs, US Department of State, July 15, 2011; Letter from Human Rights Watch to Karen Stewart, US ambassador to Lao PDR, July 15, 2011; Letter from Human Rights Watch to Lynda Worthaisong, Australian ambassador to Lao PDR, July 15, 2011; Letter from Human Rights Watch to Junko Yokota, Japanese ambassador to Lao PDR, July 15, 2011.

²³ Letters to Human Rights Watch from Sandeep Chawla, deputy executive director of UNODC, August 13, 2011 and September 27, 2011; Letter to Human Rights Watch from Dileep Nair, Singaporean ambassador to Lao PDR, September 5, 2011; Letter to Human Rights Watch from Jean Tan, executive director of the Singapore International Foundation, August 16, 2011; Letter to Human Rights Watch from Wolfgang Thoran, chargé d’affaires in the German Embassy in Lao PDR, August 4, 2011; Letter to Human Rights Watch from Sebastian Paust, managing director of GIZ, July 29, 2011; Letter to Human Rights Watch from David Lipman, head of delegation, European Union Delegation to Laos, August 8, 2011.

²⁴ Letter to Human Rights Watch from David Lipman, head of delegation, European Union Delegation to Laos, August 8, 2011.

government. As noted above, by the time this report went to print Human Rights Watch had received no response from the US Department of State's International Narcotics and Law Enforcement Affairs, or the US Embassy in Vientiane.

From 2001 to 2003, UNODC supported the construction of a health clinic beside the existing detention center. The \$145,786 in funding for this project came from the US government.²⁵ UNODC's deputy executive director explained:

The health center was constructed outside of, what at the time used to be referred to as 'the Somsanga Correctional Centre', which was then under jurisdiction of the police... The Somsanga Correctional Centre was transferred to the responsibility of the Vientiane Municipality in 2004 and renamed the Somsanga Drug Treatment and Rehabilitation Center.²⁶

In an article to mark International Day against Drug Abuse (June 26) in 2002, the *Vientiane Times* cited the head of the [then] National Commission for Drug Control and Supervision (NCDCS, now the Lao Commission on Drug Control, or LCDC) as stating that the NCDCS and UNDCP (United Nations Drug Control Program, the forerunner of UNODC), supported by the US government, had recently opened a treatment and rehabilitation facility at Somsanga.²⁷

There are also reports linking Japanese assistance to the center in 2002.²⁸ The official Lao press agency KPL reported that construction of the "drug addiction treatment block" in Somsanga was supported by UNODC, the US Embassy, and the Japanese Embassy.²⁹

²⁵ Letter to Human Rights Watch from Sandeep Chawla, deputy executive director of UNODC, September 27, 2011.

²⁶ Letter to Human Rights Watch from Sandeep Chawla, deputy executive director of UNODC, September 27, 2011.

²⁷ Citing Souban Srinirath, then-chairman of the National Commission for Drug Control and Supervision [NCDCS]: Phonekeo Vorakhoun, "Drugs burn, sober warnings issued," *Vientiane Times*, June 28- July 1, 2002. A year earlier, in mid-2001, Souban Srinirath had reported to a group of donors on Lao drug policy that, "I am also pleased to inform you that with UNDCP [forerunner of UNODC] assistance the construction of our first Detoxification Center for ATS addicts has already started and expected to be completed in the first half of next year." See "Briefing to the Vientiane Mini-Dublin Group on the implementation of drug control policy of the Lao PDR," Soubanh Srithirath, chairman of Lao Commission on Drug Control, Vientiane, May 5 2001, copy on file with Human Rights Watch. In mid-2002, the *Vientiane Times* reported that "[t]he United Nations Drug Control Programme handed over a new rehabilitation and treatment facility to the Somsanga Drug Rehabilitation Centre on June 17 [2002]": see "UNDCP supports drug rehab," *Vientiane Times*, June 18-20, 2002. A month later the *Vientiane Times* reported that the Somsanga center "is being supported by the Government, some private organizations and the UNDCP [forerunner of UNODC]": see Thanongsak Bannavong, "Addicts queue up at rehab center," *Vientiane Times*, June 28- July 1, 2002.

²⁸ Government of the Lao People's Democratic Republic, Second Periodic Report to the Committee on the Rights of the Child, CRC/C/Lao/2, August 10, 2010, para. 154 (c).

²⁹ "Australia gives USD 9,300 to improve library for drug addicts," KPL Lao News Agency, June 3, 2010.

More recently, the US Embassy has continued to support the expansion and renovation of buildings within the center. On February 8, 2008, the US ambassador to Lao PDR opened a new women's rehabilitation facility in Somsanga, funded by the embassy.³⁰

In 2009-2010, the US Embassy again funded construction in Somsanga, this time of two new buildings for male detainees with a combined capacity for some 150 detainees.³¹ In correspondence with Human Rights Watch, UNODC's deputy executive director also noted:

In 2009, UNODC funded renovation of Somsanga treatment center building and facilities, including renovation of a dormitory for young men in order for young residents to be housed in separate dormitory from adults. UNODC does not support the construction of new centers in Lao PDR.

The UNODC correspondence notes that this renovation was "to meet basic standards of hygiene and comfort and to separate young residents from adults" and cost \$95,200.³²

The US Embassy's public invitations for bids for contractors to carry out construction work at Somsanga have specifically included building fences.³³

Support for Activities in Somsanga

In response to Human Rights Watch correspondence, UNODC confirmed it has supported activities to build the capacity of the center's staff and to provide services in Somsanga. UNODC's deputy executive director noted that the agency's support to the Lao government between 2004 and 2006 included drug counseling training for staff at Somsanga.³⁴

From 2008 to mid-2011 UNODC implemented a (separate) project whose goal was to "provide a suitable basic setting for drug detoxification and rehabilitation and to

³⁰ See Embassy of the United States, "Somsanga Dedication Ceremony," February 8, 2008, http://laos.usembassy.gov/naspe_febo8_2008.html (accessed June 6, 2011).

³¹ US State Department, Bureau of International Narcotics and Law Enforcement Affairs, "International Narcotics Control Strategy Report- 2011: Lao," March 2011, www.state.gov/p/inl/rls/nrcrpt/2011/vol1/156361.htm#laos (accessed June 7, 2011).

³² Letter to Human Rights Watch from Sandeep Chawla, deputy executive director of UNODC, August 13, 2011.

³³ For example, one public invitation for bids in February 2010 was for "The Construction of 2 Patient Dormitories (including fence) at the Somsanga Drug Addiction Treatment Center, Somsanga [village], Vientiane Capital." See "Invitation for bids," *Vientiane Times*, February 1, 2010. Another public invitation for bids, in November 2010, was for the "Construction of Read [sic] Wall/Fence and Wire Mesh Fence" at Somsanga. "Invitation for bids," *Vientiane Times*, November 12, 2010.

³⁴ Letter to Human Rights Watch from Sandeep Chawla, deputy executive director of UNODC, September 27, 2011.

implement vocational training activities.”³⁵ Support totaled \$242,837, funded by the US Department of State’s International Narcotics and Law Enforcement Affairs.³⁶

In its correspondence with Human Rights Watch, UNODC’s deputy executive director noted that staff from Somsanga center participated in seminars and trainings on drug dependence treatment organized by UNODC’s regional office in Bangkok.³⁷

UNODC has also partnered with the Singapore-based NGO, the Singapore International Foundation, in a three-year project (2009-2011) to train Somsanga staff and others in drug dependency treatment.³⁸ According to SIF, the aim of this project was:

[T]o train Lao officers working with recovering addicts in addressing the psychosocial aspects of addiction recovery. This approach encourages and equips them with skills to adopt a mindset of respecting the human dignity of each recovering addict and the value of mobilizing support networks, such as the family, in the addict’s recovery.³⁹

In SIF’s response to Human Rights Watch’s enquiries, the executive director noted that six trainings took place over three years (2009-2011). The project also involved a study tour to Singapore in 2010.⁴⁰

In addition to building staff capacity, UNODC has implemented a project on vocational training project in Somsanga, partnering with the German Development Service (DED), now the German Agency for International Development (GIZ).⁴¹ Each year from 2009-2011, DED placed two volunteers at Somsanga.⁴² In its correspondence with Human Rights Watch, GIZ

³⁵ “Expansion of vocational training and occupational therapy opportunities at the Somsanga Treatment and Rehabilitation Center (LAO/F13 sub-project),” UNODC, www.unodc.org/laopdr/en/projects/STC/STC.html (accessed June 6, 2011).

³⁶ Note that this amount includes the US\$95,200 for construction of new dormitories described above. Letter to Human Rights Watch from Sandeep Chawla, deputy executive director of UNODC, August 13, 2011.

³⁷ Ibid.

³⁸ “Singapore International Volunteers,” www.sif.org.sg/programmes/5/stories/181/drug-rehabilitation (accessed June 2, 2011).

³⁹ Letter to Human Rights Watch from Jean Tan, executive director of the Singapore International Foundation, August 16, 2011.

⁴⁰ “Singapore International Volunteers,” www.sif.org.sg/programmes/5/stories/181/drug-rehabilitation (accessed June 2, 2011).

⁴¹ *Deutscher Entwicklungsdienst* (DED) is now the *Deutsche Gesellschaft für Internationale Zusammenarbeit*, the German Agency for International Cooperation (GIZ).

⁴² GIZ clarified that “weltwärts-volunteers” were not professional experts but “young high school graduates, around 18-years-old, volunteering for social services in other countries, wishing to get first-hand experiences from social and development work while experiencing another culture.” Letter to Human Rights Watch from Sebastian Paust, managing director of GIZ, July 29, 2011.

described the main activities of these volunteers as “English teaching, IT-support for PC-lab, sports and gymnastics in a room furnished by the German Embassy, [and] support of skills training (wood works, printing, tailoring, and motorbike repair).”⁴³

The US State Department’s 2010 International Narcotics Control Strategy Report (INCSR) noted that:

One of the more successful efforts using [the Bureau of International Narcotics and Law Enforcement Affairs] funding has been an innovative occupational therapy program at the Somsanga Drug Treatment Center operated in cooperation with UNODC. Several hundred previously idle youth in the rehabilitation section are now busy with a variety of training activities.⁴⁴

In its correspondence with Human Rights Watch in mid-August 2011, UNODC noted:

The most recent project activities, which were completed at the end of July 2011, were expansion of vocational training, occupational therapy opportunity and training on drug counseling. At this moment, UNODC has no ongoing activities at the Somsanga Treatment and Rehabilitation Centre.⁴⁵

However, as recently as April 2011, UNODC in Lao PDR publically advertised for the position of an “international project assistant at Somsanga drug treatment and rehabilitation center.” Listed tasks for the position included, among others, “[i]mprov[ing] the existing drug rehabilitation service and strengthen[ing] the overall capacity of the Somsanga Drug Treatment and Rehabilitation Center in Vientiane.”⁴⁶

Other international donors have provided support to Somsanga. The official Lao press agency reported in mid-2010 that the Australian government had given \$9,300 “to improve the library” of the Somsanga center.⁴⁷ By the time this report went to print, Human Rights Watch had not received a response to its correspondence to the Australian ambassador in Vientiane.

⁴³ Ibid.

⁴⁴ US State Department, Bureau of International Narcotics and Law Enforcement Affairs, “International Narcotics Control Strategy Report- 2010: Lao,” March 2010, www.state.gov/p/inl/rls/nrcrpt/2010/vol1/137197.htm (accessed June 7, 2011).

⁴⁵ Letter to Human Rights Watch from Sandeep Chawla, deputy executive director of UNODC, August 13, 2011.

⁴⁶ “Vacancy: International Project Assistant at Somsanga Drug Treatment and Rehabilitation Center, Vientiane,” closing date April 10, 2011, <http://unjobs.org/vacancies/1301557744456> (accessed June 7, 2011).

⁴⁷ “Australia gives USD 9,300 to improve library for drug addicts,” KPL Lao News Agency, June 3, 2010.

In a response to Human Rights Watch, the ambassador of Singapore to Lao PDR noted that the Singaporean Embassy had supported the construction of a one-story building for a motorbike repair center in Somsanga, as well as equipment and trainers. The Singaporean Embassy helped raise \$22,500 for the project. According to the ambassador, the support was “aimed at providing the young people at the Rehabilitation Center [with] a skill to help them become useful citizens of society.”⁴⁸

In addition to the GIZ project discussed above, a chargé d’affaires at the German Embassy in Vientiane noted that in 2009 the embassy paid for the installation of gymnasium equipment in Somsanga “in an effort to supplement drug withdrawal treatments and to improve living conditions of former drug addicts.” The correspondence stated that this support cost \$10,000.⁴⁹

The head of the EU delegation to Lao PDR replied to Human Rights Watch’s enquiry:

I can now inform you that the EU does not finance any programmes supporting the Somsanga Drug Detention Center, nor are any programmes currently planned.... We are aware that there is a growing drug problem among young people in Laos and this has been reflected in the increasing numbers admitted to the Somsanga center, but we have not heard of any cases of abuse in Somsanga as outlined in your letter. However given the serious nature of the allegations, we will enquire with the government and with donor partners, and if there are grounds for concern, we will take up the matter with the appropriate authorities and in our dialogue with the Lao government.⁵⁰

Monitoring and Reporting on Conditions

UN and bilateral donors claim that a decade of intense support has resulted in the “reformation” of the Somsanga center. In May 2009, the head of the UNODC country office in Lao PDR reportedly stated:

We've made many significant changes in Somsanga. The patients are more confident. They aren't treated badly. And the government is more transparent as a result.⁵¹

⁴⁸ Letter to Human Rights Watch from Dileep Nair, Singaporean ambassador to Lao PDR, September 5, 2011.

⁴⁹ Letter to Human Rights Watch from Wolfgang Thoran, chargé d’affaires in the German Embassy in Lao PDR, August 4, 2011.

⁵⁰ Letter to Human Rights Watch from David Lipman, head of delegation, European Union Delegation to Laos, August 8, 2011.

⁵¹ “Laos: Grappling with ‘crazy drugs,’” IRIN humanitarian news and analysis, May 20, 2009, www.irinnews.org/Report.aspx?ReportId=84457 (accessed June 10, 2011).

A chargé d'affaires at the German Embassy in Vientiane noted in his correspondence to Human Rights Watch:

[L]ooking at the facilities and services in Somsanga with its library, its motorcycle and printing workshops, its gymnasium and its activities program, the center has come a long way since I started following its progress some 3 years ago. These changes have become possible as a result of the dedicated support of various international donors under the leadership of UNODC and it is my firm belief that Samsonga [sic] now offers far better facilities than many other Lao social institutions including schools, hospitals and universities.⁵²

However, the exact basis for claims that Somsanga is “a reformed center” is unclear. According to one staff member of an organization familiar with the situation at the center:

As far as I know there is no independent monitoring of these [drug detention] centers either from the perspective of evidence of effectiveness, or from the perspective of compliance with human rights.⁵³

This assessment was borne out by Human Rights Watch’s correspondence with donors and implementers supporting Somsanga. Human Rights Watch’s correspondence to all 10 donors and implementers set out the findings of this report and also sought information on whether these organizations had a stated policy for handling reports of human rights violations witnessed or received by staff and how such agencies would seek redress for victims of those abuses. The correspondence also sought information on whether they were aware of any reports of human rights abuses or deaths in custody in Somsanga.

As noted above, by the time this report went to print, Human Rights Watch had not received a response from the US Department of State’s International Narcotics and Law Enforcement Affairs, the US Embassy in Vientiane, the Japanese Embassy in Vientiane, and the Australian Embassy in Vientiane.

In their responses to Human Rights Watch, no organization identified a specific mechanism to monitor the human rights of detainees in Somsanga. No organization was aware of any reports of human rights abuses against detainees.

⁵² Letter to Human Rights Watch from Wolfgang Thoran, chargé d'affaires in the German Embassy in Lao PDR, August 4, 2011.

⁵³ Human Rights Watch interview with staff member of an international organization, September 2011.

UNODC's deputy executive director confirmed that the UNODC country representative had personally visited the center on "a number of occasions," and that the German GIZ (formerly DED)-funded volunteers visited the center on a daily basis to implement and monitor vocational training activities. The correspondence noted that:

[UNODC's] policy [for the handling of reports of suspected human rights violations witnessed or received by UNODC staff or those implementing UNODC projects] is that any reports will be addressed. An internal policy for UNODC, in the form of a Guidance Note for our staff, is being prepared and will be distributed to our field network when completed.⁵⁴

UNODC's deputy executive director stated the organization was not aware of any reports of human rights abuses in Somsanga.

In its correspondence, a chargé d'affaires at the German Embassy described the protection of human rights as "one of the guiding principles of German [development] assistance."⁵⁵ The response did not address the specific questions about monitoring of human rights abuses. The response noted that the embassy had no information about human rights abuses in the center.

In its correspondence, the German Agency for International Development replied that "[h]uman rights are the main principle of the German development policy. These principles are authoritative for programs and approaches of the German development policy in cooperation with partner countries." With respect to monitoring mechanisms, the GIZ response noted:

The GIZ was not involved in any further project activities [in addition to the placement of volunteers in Somsanga] concerning the Somsanga Treatment and Rehabilitation Center and therefore there is no particular GIZ system of monitoring, reporting or evaluation, beyond the individual exchange of experiences with the volunteers and their quarterly reports.... No such reports (of human rights violations) were received or documented by GIZ (formerly DED). Volunteer reports do not give any indication of suspected human rights violations.⁵⁶

⁵⁴ Letter to Human Rights Watch from Sandeep Chawla, deputy executive director of UNODC, August 13, 2011.

⁵⁵ Letter to Human Rights Watch from Wolfgang Thoran, chargé d'affaires in the German Embassy in Lao PDR, August 4, 2011.

⁵⁶ Letter to Human Rights Watch from Sebastian Paust, managing director of GIZ, July 29, 2011.

In its correspondence, the Singapore International Foundation did not respond to the specific questions about monitoring or reports of human rights abuses or deaths in custody. However it did note:

Five of the six trainings are conducted at a training center in Vientiane City. Only one training was conducted at the Somsanga Treatment Center, during which our project team was confined to the training room and had no direct access to Somsanga Center’s residents or its activities.⁵⁷

In its correspondence, the ambassador of Singapore to Lao PDR did not respond to the specific questions about monitoring or reports of human rights abuses. He noted that the embassy had not received any information regarding the human rights abuses contained in Human Rights Watch’s correspondence.⁵⁸

Omitting any monitoring of the human rights conditions of detainees means that project descriptions, reports, and evaluations routinely point out the success of project activities in drug detention centers while failing to reflect any human rights abuses suffered by project “beneficiaries.” In this way, implementing agencies and the donors who support them risk ignoring the human rights abuses that their project staff or “beneficiaries” witness.

⁵⁷ Letter to Human Rights Watch from Jean Tan, executive director of the Singapore International Foundation, August 16, 2011.

⁵⁸ Letter to Human Rights Watch from Dileep Nair, Singaporean ambassador to Lao PDR, September 5, 2011.

II. Abuses

No Due Process

The police were my lawyer.

—Pacheek, a child released from Somsanga in mid-2010⁵⁹

The Somsanga center operates entirely outside the Lao justice system. Lao PDR's national drug law states that “[d]rug addicts are to be considered as victims who need to be treated.”⁶⁰ The law simply provides: “The [rehabilitation] centres receive drugs addicts to be treated [as] sent by the officers and families or on voluntary [admission] of the drug addicts.”⁶¹

However the drug law contains no process that officers and families must follow before a person can be detained, and there are no apparent procedural safeguards prior to detention in centers. None of the persons whom Human Rights Watch interviewed for this report had seen a lawyer, been brought before a judge, or been sent to a court prior to detention in Somsanga. Just as the law requires no judicial basis or oversight of any decision to detain an individual, there does not appear to be any legal right or means to review or appeal against detention.⁶² This absence of a legal framework for detention renders detentions arbitrary, and as such unlawful under international law.

One member of an international organization who is familiar with drug issues in Lao PDR explained:

Somsanga is not a center where you decide to go of your own will; people are usually “encouraged” to go by the local authorities and family members. I'm not aware of any legal process for the placement of drug users in Somsanga.⁶³

⁵⁹ Human Rights Watch interview, Vientiane, late 2010.

⁶⁰ Law on Drugs, No. 10/NA, adopted by the National Assembly December 25, 2007, art. 5(5).

⁶¹ Law on Drugs, art 41.

⁶² Article 9(1) of the International Covenant on Civil and Political Rights (ICCPR) to which Lao P.D.R. is a party provides that, “No one shall be subjected to arbitrary arrest or detention [or] be deprived of his liberty except on such grounds and in accordance with such procedures as are established by law.” ICCPR, adopted December 16, 1966, G.A. Res. 2200A (XXI), 21 U.N. GAOR Supp. (No. 16) at 52, U.N. Doc. A/6316 (1966), 999 U.N.T.S. 171, entered into force March 23, 1976, acceded to by Lao P.D.R. on September 25, 2009. International law grants a detainee the right to challenge the lawfulness of his or her detention by petitioning an appropriate judicial authority to review whether the grounds for detention are lawful, reasonable and necessary: ICCPR, art. 9 (4).

⁶³ Human Rights Watch interview with staff member of an international organization, September 2011.

Another person working on drug issues in Lao PDR gave a similar description of the lack of due process:

Police arrest someone and bring them to Somsanga, or families approach the village head and he decrees that the person needs to be brought to Somsanga. In a very few cases, the families bring their children to Somsanga and pay for it. To my knowledge there is no defined legal process [for admission], which also means no possible appeal [against the decision to detain].⁶⁴

Other assessments of drug detention centers in Lao PDR have reported the practice of rounding up drug users and detaining them without legal review in detention centers.⁶⁵

In July 2011, Human Rights Watch wrote to the head of the Lao Commission on Drug Control seeking, among other information, details on the admission process to Somsanga, and particularly the number of people who had legal representation during the process of the decision to detain them as well as the number of people who appealed against such decisions to detain them. By the time this report went to print Human Rights Watch had not received a response.

Locked Up as Treatment

Detention [has not] been recognized by science as treatment for drug use disorders.

— WHO/UNODC, “Principles of Drug Dependence Treatment,” March 2008⁶⁶

According to the glossy pamphlet about Somsanga published by the Lao government, the US Embassy and UNODC, “treatment” in the center covers three phases: drug detoxification, rehabilitation, and follow-up.

The drug detoxification phase “lasts for about 42 days depending on the addiction level of the patient,” during which “counseling consultation and psychological support treatment will be provided for the patients and their families.” Rehabilitation “lasts for 3-12 months

⁶⁴ Human Rights Watch interview with staff member of an international organization, September 2011.

⁶⁵ See, for example, N. Thomson, “Detention as Treatment: Detention of Methamphetamine Users in Cambodia, Laos and Thailand,” The Nossal Institute for Global Health and the Open Society Institute, March 2010, p. 44, http://www.soros.org/initiatives/health/focus/ihrd/articles_publications/publications/detention-as-treatment-20100301 (accessed May 12, 2011).

⁶⁶ WHO/UNODC, “Principles of Drug Dependence Treatment,” March 2008, p. 14, www.who.int/substance_abuse/publications/principles_drug_dependence_treatment.pdf (accessed August 13, 2011).

depending on the severity of the patient’s drug problems” and involves “group counseling consultations” and “provision of vocational and occupational training activities.” Follow-up involves “encourag[ing] the discharged patient to reintegrate into society,” and offering him or her employment or further education.⁶⁷

In reality, treatment at Somsanga is available only to those detainees whose families pay for it. Staying in the “upper” buildings near the clinic costs money. Former detainees reported that the cost of “treatment” and “rehabilitation” in the “upper” buildings varied from a one-off payment to the center of 1,000,000 kip (approximately \$125) for three months to a monthly payment of between 300,000 to 500,000 kip (approximately \$38 to \$63) for as long as the family requests the person be held in the “upper” buildings.⁶⁸ According to Pueksapa:

The clinic building is clean. The food is nicer and there its lots of it. They have TV and can do a lot of activities. In the clinic building there were 70-80 people. In the lower buildings there were about 600 people with a hard life.⁶⁹

While the number of people in the “lower buildings” fluctuates over time, the compounds are crowded with detainees. Estimates by former detainees of the total number of people held at any one time in the “lower buildings” ranged from 600 to 1,400.⁷⁰ This wide range of total detainees may reflect fluctuations of detainee population over time. The Lao Commission on Drug Control has reported that the detainee population in Somsanga has fluctuated between 1,100 to 2,600 detainees per year between 2003 and 2009.⁷¹ Management staff from the center reported that in mid-2011 there were 1,087 detainees.⁷²

The essence of drug “treatment” in Somsanga is detention.⁷³ Of the 12 former detainees interviewed for this report, eight explicitly stated that they had not wanted to be in

⁶⁷Government of Lao PDR, Embassy of the United States, UNODC, “Somsanga Treatment and Rehabilitation Center, Ban Somsanga, Saysetha District, Vientiane Capital, LAO PDR,” pamphlet, undated, copy on file with Human Rights Watch.

⁶⁸ Human Rights Watch interviews with Ungkhan and Maesa, Vientiane, late 2010.

⁶⁹ Human Rights Watch interview with Pueksapa, Vientiane, late 2010.

⁷⁰ Human Rights Watch interview with Ateet and Pahat, Vientiane, late 2010.

⁷¹ “Presentation by participant of LCDC at the UNODC Global SMART Programme Regional Workshop,” Lao Commission on Drug Control, Bangkok Thailand, August 5-6, 2010, copy on file with Human Rights Watch.

⁷² “Drug Treatment and Vocational Training Center, Vientiane Capital, Laos,” Oukeo Keovoravong, deputy director for treatment and psychology of [Somsanga] center, presentation at Regional Seminar on ATS Treatment and Care, Kunming China, April 18-21, 2011, copy on file with Human Rights Watch.

⁷³ Article 12 of the International Covenant on Economic, Social and Cultural Rights (ICESCR) provides for the right of everyone to the highest attainable standard of physical and mental health: G.A. res. 2200A (XXI), U.N. Doc. A/6316 (1966), entered into force on January 3, 1976 and acceded to by Lao P.D.R. on February 13, 2007. The Committee on Economic, Social and Cultural

Somsanga.⁷⁴ Some estimated that, based on their interactions with fellow detainees over many months of shared detention, most detainees did not want to be there.⁷⁵

According to one staff member of an international organization who is familiar with drug issues in Lao PDR:

As usual with these centers in the region, the decision to send people [to Somsanga] is based more on security and public order [concerns] than the need for an evidenced-based health intervention.⁷⁶

Once inside Somsanga, detainees live in a punitive and heavily controlled environment. According to former detainees, a bell rings at pre-established times during the day to signal that detainees must return to their cells. In a standard 24-hour weekday, detainees spend the majority of the day lying or sitting in a locked room with other detainees. Estimates of the number of detainees in each room in the “lower buildings” ranged from 45 to 60.⁷⁷

Neung, who was a child when released from Somsanga in mid-2010, described a normal day:

From Monday to Friday, they ring the bell at 6 a.m. Then you have to exercise for about 45 minutes. It’s like running on the spot and calisthenics. We finish with push-ups, which are tiring. After that, we have rice soup. It’s just a fist-full of rice. After breakfast you can watch T.V. or sleep. At 11:30 you go back [to the cell] and they lock the door. Between 11:30 and 1 o’clock you sleep or sit. It is boring and you are hungry because the food is not enough. At one o’clock you are released from the room. At 3:20 pm they let you eat dinner, then at 4 o’clock they lock the door until next morning. There is not much to do in the rooms, just sitting.⁷⁸

Rights (CESCR), the U.N. body responsible for monitoring compliance with the ICESCR, has stated that a state’s health facilities, goods and services should be culturally and ethically acceptable, scientifically and medically appropriate, and of good quality. U.N. Committee on Economic, Social and Cultural Rights, General Comment No. 14: The right to the highest attainable standard of health, November 8, 2000, para. 12.

⁷⁴ Human Rights Watch interviews with Tunva, Mankon, Paet, Sahm, Maesa, Pahat, Pacheek, and Neung, Vientiane, late 2010.

⁷⁵ Human Rights Watch interviews with Neung and Sahm, Vientiane, late 2010.

⁷⁶ Human Rights interview with staff member of an international organization, September 2011.

⁷⁷ Human Rights Watch interview with Ungkhan and Paet, Vientiane, late 2010.

⁷⁸ Human Rights Watch interview with Neung, Vientiane, late 2010.

Ungkhan, who was detained in late 2009, described a similar routine of strict rules and being locked in the cells for long periods of time.

There are so many rules. No smoking, no talking in a large group, wash your clothes at the right time, you cannot talk at night when the room is locked. You must wait until the right time to shower. In general, it's like prison: you stay under control, you don't feel relaxed. The door is opened for breakfast. At 11:30 you get food, at 12 o'clock you go back to the cell and it's locked until 2 o'clock. At 4 o'clock you eat dinner, you can eat in the cell. At 4:30 p.m. they close [the doors] again until the morning.⁷⁹

Time spent in the cells is even longer on the weekends: detainees spend more than 20 hours a day in locked rooms. Neung explained that on weekends, doors to the cells were opened from six to eight in the morning, and three to four thirty in the afternoon. "It is depressing but after a while you get used to it," he added, with a note of resignation.⁸⁰

When let out of their cells, detainees in the "lower buildings" are still inside a walled compound situated inside a fenced center. "It's boring," Pahat said. "You can't go where you want to. [In Somsanga] you're behind a wall."⁸¹

In 2007 the US State department criticized "indefinite" periods of detention in Lao drug detention centers.⁸² Saow, who was released in late 2010, explained that he was held for a year as it was his second time in Somsanga: "I wanted to leave but it's the rule: first time [in Somsanga] six months, second time one year."⁸³

However other former detainees described highly varied periods of detention: length of time in Somsanga ranged from three months to fifteen months, with no clear time periods for those in the center on their first, second, or third occasion. Pahat explained that he spent three months in the first time, six months the second time, and eight months the third time.⁸⁴ Ateet, in his early 30s, explained he was in Somsanga "not so long" the first

⁷⁹ Human Rights Watch interview with Ungkhan, Vientiane, late 2010.

⁸⁰ Human Rights Watch interview with Neung, Vientiane, late 2010.

⁸¹ Human Rights Watch interview with Pahat, Vientiane, late 2010.

⁸² See the US State Department, Bureau of Democracy, Human Rights, and Labor, "Country Reports on Human Rights Practices – 2006: Lao PDR," March 6, 2007, <http://www.state.gov/g/drl/rls/hrrpt/2006/78779.htm> (accessed September 6, 2011).

⁸³ Human Rights Watch interview with Saow, Vientiane, late 2010.

⁸⁴ Human Rights Watch interview with Pahat, Vientiane, late 2010.

time, six months the second time and over 14 months the third time.⁸⁵ Pueksapa was released after being detained for nine months, his first time.⁸⁶ Paet was detained for fifteen months, his first time.⁸⁷

Former detainees considered that detention in Somsanga undermines the aims of drug dependency treatment. Ungkhan, in his early 30s, explained:

The way they do this is unfair, to take people to Somsanga without their consent. They force you to go there against your will, so you are unhappy because it's not good to stay in Somsanga. In my opinion, people are angrier and more aggressive after they are there. I saw this in the people I knew. There are very few who have been to rehab and got better. Most are worst after rehab: it will make people who maybe behave a little bit bad a lot worse.⁸⁸

Somsanga has group classes to discuss drug use, as well as vocational training classes in subjects such as cooking, computers, handicrafts, and English language. As noted above, international donors fund many of these activities, which are for detainees of both the “upper” and “lower” buildings. Former detainees reported that, once in Somsanga, attending vocational training classes was voluntary.⁸⁹

However access to these classes is still only possible if the beneficiaries are held in detention. According to some former detainees, any possible benefits of such classes are subsumed by the overwhelmingly negative experience of being detained. Sahm told Human Rights Watch that such classes often did not contribute to ending drug use because of the resentment caused by being locked up.

They do classes about drugs on Mondays and Fridays, morning and night. The teachers showed a movie and then taught us. They try to teach not to use drugs, that it isn't good to use [drugs], while showing that normal people have a good future. I don't think the classes helped me stop using drugs. Some families think that if they put their kids in there they will stop using but I don't think so. If people are in Somsanga unwillingly, Somsanga

⁸⁵ Human Rights Watch interview with Ateet, Vientiane, late 2010.

⁸⁶ Human Rights Watch interview with Pueksapa, Vientiane, late 2010.

⁸⁷ Human Rights Watch interview with Paet, Vientiane, late 2010.

⁸⁸ Human Rights watch interview with Ungkhan, Vientiane, late 2010.

⁸⁹ Human Rights Watch interview with Neung, Vientiane, late 2010.

will make the situation worse. They are there against their will and the feelings of revenge toward the family and those who put them there go to their heart. Some people use more drugs when they come out of Somsanga.⁹⁰

Vocational training courses suffer from the same underlying problem. Pahat, who was released in mid-2010, told Human Rights Watch that he chose not to participate in any vocational training classes because he thought his participation would risk prolonging his detention.

It's a bad life in Somsanga: there was not enough food and not much to do. I was not happy there and I wanted to get out all the time. They have classes but I didn't do them because I knew I would be out [soon]. If you attend classes you must stay until you finish the course—you can't leave after just a few months.⁹¹

Pueksapa, who was held for nine months, told Human Rights Watch that he ultimately yielded to the pressure of village authorities and his mother to go to Somsanga because of vocational training classes. He was detained in the “lower buildings” and was accompanied by police when he went for vocational training in other buildings. He explained:

I signed because they said, “[If] you go, it will be a new experience. You have English language classes [in Somsanga]. In Somsanga it is good.” I come from a poor family. I thought, “If I go I have the opportunity to study English and cook.” So I went. If you stay five months you finish your course: I finished. I have a cooking certificate from Somsanga.

Nonetheless, he was adamant that the cooking class he attended did not compensate for the suffering he experienced during his detention in Somsanga.

It wasn't like I expected: it's hard in there. There are lots of people and not enough food. It was hard to sleep there because in my room there were 60 people. There was not enough water for the showers, only a few minutes to shower every day. It's horrible inside: there is no freedom there. I would never do it again. I would never suggest people to go to Somsanga.⁹²

⁹⁰ Human Rights Watch interview with Sahn, Vientiane, late 2010.

⁹¹ Human Rights Watch interview with Pahat, Vientiane, late 2010.

⁹² Human Rights Watch interview with Pueksapa, Vientiane, late 2010.

Suicides at Somsanga

The foreigners [that visit Somsanga] don't know about the beatings or the suicides.

—Paet, a child when first detained⁹³

Of the 12 former detainees interviewed for this report, five reported having directly witnessed suicides or suicide attempts by fellow detainees during their detention.

Sahm, who was released in mid-2010, told Human Rights Watch that he saw a fellow detainee who had committed suicide by ingesting glass.

Blood came out his mouth and nose. He ate glass from a sauce bottle or from a Pepsi bottle. They put him in a plastic sheet and put it in front of the building where the police stay. I saw the body.⁹⁴

Pacheek, a child when released in mid-2010, told Human Rights Watch that a man in the same cell as him committed suicide by hanging.

[In] the room I stayed in, a man committed suicide. He hung himself in the doorway while others were sleeping. Everyone woke up and saw this. He was angry at his family and depressed because he came in at the same time as his younger brother, who left before him. I saw him. He used a cord from some shorts. He had black jeans and a red t-shirt on. He had his tongue out.⁹⁵

Maesa told Human Rights Watch that during her six months in detention, she saw two suicides and one suicide attempt.

Some people think that to die is better than staying there. Some tried to kill themselves and their lives are saved. I saw one girl from the “lower buildings.” She ate fabric detergent because she wanted to die. She was upset her family left her in this place. She didn't die because the doctor found her and cleaned her stomach. Then they took care of her and told her not to try and kill herself. Others they die. Two men committed suicide

⁹³ Human Rights Watch interview, Vientiane, late 2010.

⁹⁴ Human Rights Watch interview with Sahm, Vientiane, late 2010.

⁹⁵ Human Rights Watch interview with Pacheek, Vientiane, late 2010.

when I was there. They hanged themselves. Then the staff brought the bodies up to the clinic. It was two different times, the two deaths. I saw the dead bodies.⁹⁶

Former detainees told Human Rights Watch that they believed, based on their own experiences of being detained and interactions with their fellow detainees, that people attempted suicide because of the anger and loneliness caused by detention in Somsanga. Sahm—who witnessed the suicide of a fellow detainee by ingesting glass—said:

There are many reasons people try and kill themselves. People who are there unwillingly after their families send them are depressed. Sometimes the family lies to them about the length of time in Somsanga. Others are without families so they have no one to come and visit.⁹⁷

Tunva told Human Rights Watch that he saw one fellow detainee attempt suicide by swallowing fabric detergent in January or February 2010: “I think they try and kill themselves because they feel lonely, they have no one to come and visit them.”⁹⁸ Paet, a child when he was detained, explained that the detainees who attempt suicide “are angry because they want their families to take them out of Somsanga but their families want to give them more rehab.”⁹⁹

States have a responsibility to account for every death in custody, including suicides. Whether the state bears responsibility for a suicide that takes place in detention will depend on the extent to which in the circumstances the authorities should have been aware of the risk of suicide and what measures were put in place to mitigate that risk. Where a risk is evident and the state did not take appropriate preventative steps, then the state will bear responsibility for that death in custody.¹⁰⁰

⁹⁶ Human Rights Watch interview with Maesa, Vientiane, late 2010.

⁹⁷ Human Rights Watch interview with Sahm, Vientiane, late 2010.

⁹⁸ Human Rights Watch interview with Tunva, Vientiane, late 2010.

⁹⁹ Human Rights Watch interview with Paet, Vientiane, late 2010.

¹⁰⁰ Article 6 (1) of the International Covenant on Civil and Political Rights (ICCPR), requires states to take adequate measures to protect the right to life, including those in custody whether from suicide or from being killed by others. See *Barbato v Uruguay*, Human Rights Committee, Communication No. 84/1981 paras. 9(2) and 10 (a); *Lantsova v Russia*, Human Rights Committee, View of March 26, 2002, Communication No. 763/1997 para. 9.2; *Fabrikant v Canada*, Human Rights Committee, View of November 6, 2003, Communication No. 970/2001 para. 9.3. ICCPR was adopted December 16, 1966, G.A. Res. 2200A (XXI), 21 U.N. GAOR Supp. (No. 16) at 52, U.N. Doc. A/6316 (1966), 999 U.N.T.S. 171, entered into force March 23, 1976, , arts. 10 and 7. Lao P.D.R. acceded to the ICCPR on September 25, 2009.

As far as one former detainee interviewed by Human Rights Watch was aware, authorities running Somsanga have responded to suicides in the center by making infrastructural changes. Paet explained that, “Some [detainees], they jumped from the buildings. Now in the buildings you can’t jump because they have protection grills on the balconies.” Other changes were implemented after a man hung himself with a towel in a bathroom. “No one saw him do it,” said Paet. “In that time they had doors on the bathroom. After this they took the doors off the bathrooms.”¹⁰¹

The World Health Organization (WHO) has issued guidance for authorities in charge of detainees in how to screen for, prevent, and respond to suicide and attempted suicide in detention settings.¹⁰² WHO has noted that detention itself creates a risk of suicide, as it is a stressful event that deprives even healthy people of important resources.¹⁰³ WHO’s guidance describes means to screen for suicide risk at intake, means of observation post-intake, adequate monitoring of suicidal detainees, mental health treatment, and mechanisms to review internal policies when suicides do occur. It is not apparent that the Somsanga authorities have adopted any of the recommended steps outlined in such guidance.

In its correspondence with international donors and implementing agencies, Human Rights Watch asked whether those organizations were aware of any reports of deaths in custody (including suicide), and any formal investigations into such deaths, as well as any efforts taken to prevent further suicides.

As noted above, Human Rights Watch had received no response from the US Department of State’s International Narcotics and Law Enforcement Affairs, the US Embassy in Vientiane, the Japanese Embassy in Vientiane, or the Australian Embassy in Vientiane by the time this report went to print. The Singaporean Embassy, the Singapore International Foundation, the German Embassy and the German Development Agency stated that they had not received or documented such reports. UNODC confirmed:

One case of death in custody is known and there was anecdotal information about cases of attempted suicide. UNODC staff have heard of cases of attempted suicide from the medical staff at Somsanga center.¹⁰⁴

¹⁰¹ Human Rights Watch interview with Paet, Vientiane, late 2010.

¹⁰² See, for example, WHO, “Preventing suicide in jail and prisons,” 2007. www.who.int/mental_health/prevention/suicide/resource_jails_prisons.pdf (accessed August 21, 2011).

¹⁰³ WHO, “Preventing suicide in jail and prisons,” 2007, p.3.

¹⁰⁴ Letter to Human Rights Watch from Sandeep Chawla, deputy executive director of UNODC, August 13, 2011.

The UNODC correspondence did not identify any further information (such as an investigation by the center or any steps taken by UNODC) in response to this death in custody or incidents of attempted suicide.

III-Treatment of Detainees

Inhumane or degrading practices and punishment should never be a part of treatment of drug dependence.

—WHO/UNODC, “Principles of Drug Dependence Treatment,” March 2008¹⁰⁵

As noted above, a number of international donor organizations and their implementing agencies visit Somsanga on a regular basis in order to monitor their projects or carry out project activities. Somsanga’s management appears to be conscious of its image when foreigners visit the center. As Ungkhan explained:

On days when the foreigners came [to the center] the police warned us in the morning: “Today we are going to have some guests so make the rooms clean, clean all the rubbish, behave yourselves.” We had to wear nice clothes and make everything clean.¹⁰⁶

None of the former detainees told Human Rights Watch that staff directly beat them or other detainees. On the contrary Ungkhan reported that “it is not allowed to hit people inside [Somsanga]: even the police can’t hit and beat [detainees].”¹⁰⁷

However, the rule against corporal punishment appears to be easily circumvented. In practice, police at Somsanga delegate authority to punish detainees for infringing center rules to powerful detainees.¹⁰⁸ These detainees carry out most of the day-to-day control of other detainees and enforce the rules of the center. Saow, who was released in late 2010 after a year in Somsanga, explained:

¹⁰⁵ WHO/UNODC, “Principles of Drug Dependence Treatment,” March 2008, p. 9.

¹⁰⁶ Human Rights Watch interview with Ungkhan, Vientiane, late 2010.

¹⁰⁷ Ibid.

¹⁰⁸ According to the International Covenant on Civil and Political Rights (ICCPR), “all persons deprived of their liberty shall be treated with humanity and with respect for the inherent dignity of the human person” and “[n]o one shall be subjected to torture or to cruel, inhuman or degrading treatment or punishment.” International Covenant on Civil and Political Rights (ICCPR), adopted December 16, 1966, G.A. Res. 2200A (XXI), 21 U.N. GAOR Supp. (No. 16) at 52, U.N. Doc. A/6316 (1966), 999 U.N.T.S. 171, entered into force March 23, 1976, , arts. 10 and 7. Lao P.D.R. acceded to the ICCPR on September 25, 2009. The UN’s Standard Minimum Rules for the Treatment of Prisoners states that “[c]orporal punishment ... and all cruel, inhuman or degrading punishments shall be completely prohibited as punishments for disciplinary offences.” It also states that “[n]o prisoner shall be employed in any disciplinary capacity.” United Nations Standard Minimum Rules for the Treatment of Prisoners (Standard Minimum Rules), adopted by the First United Nations Congress on the Prevention of Crime and the Treatment of Offenders, held at Geneva in 1955, and approved by the Economic and Social Council by its resolution 663 C (XXIV) of July 31, 1957, and 2076 (LXII) of May 13, 1977, paras. 31 and 28(1).

The room captains control everyone. The room captains work for the police. They are those who show good behavior and will tell [police] if people escape. The police tell us the rules and the room captains make sure we follow them.¹⁰⁹

Pahat, who was released in mid-2010 after eight months in Somsanga, told Human Rights Watch that room captains beat other detainees as punishment for infringing center rules.

There is a rule of ‘no hitting’ but the room captains still do. If you try to escape or fight, you are put in a cell and at about five or six o’clock the room captains come and punish you. I saw room captains beat people inside the cells: the person had to kneel and hold their hands behind their head and then the room captains started kicking them. I saw beatings like this all the time.¹¹⁰

During the course of researching this report, six former detainees told Human Rights Watch that room captains meted out violence on the direct orders of center staff. Pueksapa said he saw room captains beat two detainees at the command of center police.

If detainees are unsuccessful escaping, they will be hit. I saw this: two detainees climbed up the wall and we all ran to the second floor of the building to watch what happened next. They ran through the field but they didn’t manage to escape: the room captains grabbed them and beat them. The police told the room captains, “Punish them!” Then the room captains beat them.¹¹¹

Pueksapa added: “[The room captains] can do whatever they want.”

Pacheek, who was released in mid-2010 after six months in Somsanga, also reported witnessing eight or nine room captains beat two detainees who tried to escape. The detainees were then put “in a small cell for one month with no family visits.”¹¹²

Sahm, who was also released in mid-2010, reported a similar beating of five detainees who were unsuccessful in their escape attempt.

¹⁰⁹ Human Rights Watch interview with Saow, Vientiane, late 2010.

¹¹⁰ Human Rights Watch interview with Pahat, Vientiane, late 2010.

¹¹¹ Human Rights Watch interview with Pueksapa, Vientiane, late 2010.

¹¹² Human Rights Watch interview with Pacheek, Vientiane, late 2010.

The room captains beat them until they were unconscious. Some were kicked, some [beaten] with a stick of wood. The police were standing nearby and saw this. The police told the room captains to punish them because the police would be held responsible for any successful escapes.¹¹³

Paet, who was released in early 2010, reported he was beaten by fellow detainees for fighting and that staff had given the orders for the beating.

If people broke rules they were beaten or kicked. It happened to me. I was punished for fighting. The captains of the two rooms argued, so the two rooms were fighting. In my room there were 40 people and half went to fight. The ones in the room who didn't fight had to smack the face of those who had been fighting. The police said to the people hitting me, "Punish him, punish him!" The police were watching. It felt very painful. I was bleeding from my lip and my face was swollen.

While Somsanga center staff did not beat detainees, interviewees told Human Rights Watch that staff ordered individuals who had infringed center rules to be punished in ways that constituted inhuman and degrading treatment. After the beating described above, Paet and his fellow detainees were punished:

They sent us to the septic tank. We had to take the shit to the main garbage place. Then we had to clean the shit out of the septic tank with water. It was disgusting. Some were vomiting and others were dizzy. We had to stand in the shit. There were worms in it.¹¹⁴

Tunva, who was released in mid-2010 after four months in Somsanga, told Human Rights Watch that he saw staff punish one detainee who was caught trying to escape by forcing him to stand in the sun for hours.

The room captains seized one person and he was handcuffed to the pole of the volleyball net. They seized him at one o'clock and they didn't let him go until five or six o'clock. It was hot and he was suffering. It was the police, not the room captains, who handcuffed him. The foreigners [who visit Somsanga] didn't see this: they don't let the foreigners see things like this.¹¹⁵

¹¹³ Human Rights Watch interview with Sahn, Vientiane, late 2010.

¹¹⁴ Human Rights Watch interview with Paet, Vientiane, late 2010.

¹¹⁵ Human Rights Watch interview with Tunva, Vientiane, late 2010.

At least one other assessment of drug detention centers in Lao PDR has published reports of detainee beatings by staff and detainee guards in Somsanga.¹¹⁶

In its correspondence with international donors and implementing agencies, Human Rights Watch asked whether those organizations were aware of any reports of ill-treatment of detainees. As noted above, Human Rights Watch had received no response from the US Department of State's International Narcotics and Law Enforcement Affairs, the US Embassy in Vientiane, the Japanese Embassy in Vientiane, and the Australian Embassy in Vientiane by the time this report went to print. The Singaporean Embassy, the Singapore International Foundation, the German Embassy and the German Development Agency stated that they had not received or documented such reports. UNODC confirmed:

UNODC staff have not received reports that staff and detainee guards are alleged to have physically abused people as punishment of infringements of centre rules. Centre regulations prohibit such behavior.¹¹⁷

No Objective Basis for Detentions

As indicated above, Lao law does not—in theory or in practice—provide any meaningful protections against arbitrary detention of individuals for purported “treatment” and “rehabilitation.” The drug law contains no procedural safeguards prior to such detention.

Human Rights Watch wrote to the head of the Lao Commission on Drug Control seeking, among other information, details on the admission process to Somsanga, and particularly the number of people who had legal representation during the decision process to detain them, as well as the number of people who appealed against such decisions to detain them. By the time this report went to print, Human Rights Watch had not received a response.

“Drug-Free” Villages

Officially, the government of Lao PDR is working to make the country “drug free” by 2015, in line with an ASEAN-wide political commitment.¹¹⁸ The Lao national drug control master plan

¹¹⁶ See, for example, N. Thomson, “Detention as Treatment: Detention of Methamphetamine Users in Cambodia, Laos and Thailand,” The Nossal Institute for Global Health and the Open Society Institute, March 2010, p. 47, http://www.soros.org/initiatives/health/focus/ihrd/articles_publications/publications/detention-as-treatment-20100301 (accessed May 12, 2011).

¹¹⁷ Letter to Human Rights Watch from Sandeep Chawla, deputy executive director of UNODC, August 13, 2011.

¹¹⁸ At the 33rd ASEAN Ministerial Meeting in Bangkok in 2000, foreign ministers called for a drug-free ASEAN by 2015. Joint Communique of The 33rd ASEAN Ministerial Meeting, Bangkok, Thailand, 24-25 July 2000. <http://www.asean.org/595.htm> (accessed August 18, 2011).

states the nation's "goal of creating a happy drug free, prosperous society governed by the rule of law for all Lao people and work towards as the vision of a drug-free ASEAN (2015)."¹¹⁹

Village officials themselves are under pressure from government administrators to declare their villages "drug-free." According to the drugs law, one of the primary methods of combating illegal drugs is:

To strengthen [the] development [of] villages free from cultivation of drug producing plants and from drug producing, processing, abusing, trafficking and distributing.¹²⁰

Much of the pressure on families to send people who use drugs to Somsanga is exerted by village officials, and is backed up by village militia (*tamnaut baan*) who detain drug users. Along with their parents, it is often the head of the village (*nai baan*) who is responsible for signing forms to send a person to the center.

Official media avidly track the progress of efforts of officials in villages around Vientiane in efforts to achieve a "drug-free" environment. For example, according to the *Vientiane Times*, Haysok village (near Vientiane) was preparing to declare itself drug-free in 2006.

The village head explained that at present village officials are following up on two people who they suspect are drug users. If the suspicions are correct then village officials will reveal the problem to the user's parents and immediately re-educate the user about drugs. He added that if they continue to use drugs village officials will cooperate with the user's parents in sending them to the Somsanga Rehabilitation Centre for treatment.¹²¹

Similarly, Phonthan Tai village (near Vientiane) was also hoping to declare itself drug-free in 2009.

Drug use is falling in Phonthan Tai village, Vientiane, but police are currently tracking seven suspected users in an effort to declare their village drug free, according to village authorities. "We are following the suspects and if they are found using drugs officials will work with their parents to

¹¹⁹ Government of the Lao PDR, "National Drug Control Master Plan 2009-2013," February 2009, p. 23.

¹²⁰ Law on Drugs, art. 29(4).

¹²¹ Meuangkham Noradeth, "Haysok village succeeds in anti-drug activities," *Vientiane Times*, March 17, 2006.

send them to Somsanga Rehabilitation Centre for treatment,” said the Deputy Head of Phonthan Tai village.¹²²

Former detainees told Human Rights Watch that the procedure prior to their detention in Somsanga consisted of the simple process of being detained by police or the village militia (*tamnaut baan*) and taken to the center.¹²³ Pahat spent six months in Somsanga and explained:

The village militia detained me. They had been observing me for a long time. They said nothing but handcuffed me when I was inside my house. They caught me at 9 p.m., then I arrived at Somsanga around 9:30 p.m. I never saw a lawyer nor a court, I never filled out a form or signed or thumb-printed anything. They gave me no interview when I arrived. Of course I didn't want to go: they just pushed me inside Somsanga because I was using drugs.¹²⁴

Paet was held in Somsanga as a child. He was detained by village militia, who took him to the office of the head of the village (*nai baan*).

There were five people in the office with my mother and father. The village official said, “You’ve been arrested so many times, it’s time to go to rehab.” They asked my mother and father if they agreed and they did. They were losing face [i.e. felt humiliated] so they had to follow what the police said. They paid 500,000 kip [around \$62] just once. I did not want to go—I had heard Somsanga was like a jail.¹²⁵

Detaining People Who Use Drugs Infrequently or Irregularly

Another consequence of the absence of procedural protections is that village officials and family members sometimes request and pay Somsanga to detain individuals who have used drugs infrequently or irregularly. As a consequence, people may be given “treatment” in the absence of an underlying condition that actually requires treatment.

¹²² Meuangkham Noradeth, “Phonthan Tai aims to wipe out drugs,” *Vientiane Times*, December 26, 2009.

¹²³ The village militia, or *tamnaut baan*, consists of village volunteers who operate in their village of work or residence. They report to the head of the village (*nai baan*) and play a role in maintaining public order. According to the US State Department, “A militia in urban and rural areas, operating under the aegis of the armed forces, shared responsibility for maintaining public order and reported ‘undesirable elements’ to police.” See US State Department, Bureau of Democracy, Human Rights, and Labor, “Country Reports on Human Rights Practices – 2010: Laos,” April 8, 2011, <http://www.state.gov/g/drl/rls/hrrpt/2010/eap/154390.htm> (accessed June 6, 2011).

¹²⁴ Human Rights Watch interview with Pahat, Vientiane, late 2010.

¹²⁵ Human Rights Watch interview with Paet, Vientiane, late 2010.

Pacheek is a child who spent six months in Somsanga. Family members committed him to the center after catching him sniffing glue on two occasions.

I used glue twice. The first time I tried it with friends, then I tried it on my own and got high. My uncle saw me and reported me to my mother and father, then a day later the village militia came to arrest me. The village militia took me straight to Somsanga. My mother and father signed a form in the village head's office. I said no, I didn't want to go but they said I had to go because I smoked glue. I did not want to go but I am a kid, so what could I do?¹²⁶

Other former detainees reported detention for infrequent drug use. Maesa is a child who spent six months in Somsanga. She was put there by her parents, who told the head of her village she had used drugs.

At that time I was with my friends and the head of the village came and told me to come to the office. The head of the village said I was going on vacation but actually he took me to the district jail for two days. I was upset, thinking, "Why is my family doing this to me? Did I make a big mistake? Why are they punishing me like this?" I was depressed, crying. My mother came to visit me in the district jail and applied for me to go to Somsanga.... [Then] my mother took me to Somsanga and in the Somsanga clinic my mother signed. Then they checked my pee and made an interview: "How long did you use? How often?" That's all they asked. I said I did try *ya ma* (an amphetamine type stimulant) three times.

Her family paid Somsanga for medicine and also for residence in rooms near the clinic.

My family took me [to Somsanga] to change my behavior. They didn't want me to be going out all the time, going out with boys. They wanted to change me to be a good girl, not a party girl who stays out. I didn't feel addicted. I hadn't used on other occasions—I had used drugs just three times.¹²⁷

¹²⁶ Human Rights Watch interview with Pacheek, Vientiane, late 2010.

¹²⁷ Human Rights Watch interview with Maesa, Vientiane, late 2010.

Pacheek and Maesa both received six months of detention with a course of three tablets (twice daily) for the first a month-and-a-half, and classes about drugs.¹²⁸ Maesa attended a vocational training class, Pacheek did not. But despite not being dependent on drugs, Pacheek's and Maesa's received the same "treatment" and "rehabilitation" as other detainees.

Detaining Other "Undesirable" People

The Lao government uses the Somsanga center as a convenient dumping ground for populations that are deemed "undesirable" by police or the village militia. Former detainees described other detainees as including alcoholics, people with mental disabilities, petty thieves, homeless people, and beggars.¹²⁹ Street children are also detained in Somsanga.¹³⁰ Former detainees also reported that the center detained Hmong people who did not appear to fall into any of the previous categories.¹³¹

Former detainees estimated, based on their contact with fellow detainees during periods of detention, that the number of detainees who are not drug users is considerable. Ungkhan estimated that 1 in 5 of fellow detainees were not drug users. Maesa estimated people who were not drug users were 1 in 3. According to Pueksapa, up to half the people in Somsanga were not drug users.¹³² This wide range of estimates may indicate difficulties in categorizing detainees, or indicate different detainee populations at different times.

Mankon, a man in his early 20s, told Human Rights Watch that he has "been a beggar all my life." He is familiar with Somsanga, having been detained there on three occasions. He described a perfunctory process when he was picked up, most recently in 2009.

¹²⁸ Former detainees could not name the medicines they were given during this period, although some identified one of the three tablets they were given (twice daily) as vitamin tablets; Human Rights Watch interviews with Neung, Ungkhan, Pacheek and Maesa, Vientiane, late 2010.

¹²⁹ Human Rights Watch interviews with Ateet, Ungkhan, Maesa, Pueksapa, Pahat, Pacheek, and Mankon, Vientiane, late 2010.

¹³⁰ Human Rights Watch interviews with Ateet, Ungkhan, Maesa and Pueksapa, Vientiane, late 2010.

¹³¹ The Hmong are an ethnic group living in the mountainous regions of Lao PDR, as well as China, Vietnam and Thailand. Many Hmong fought against the communist Pathet Lao during the Lao civil war (1953-1975) and faced repression after the war because of their close collaboration with the US. Former detainees interviewed during this research were not clear why Hmong people were in Somsanga center. It may be that they are dependent on drugs (particularly opioids). The US State Department's Human Rights Report for Laos (2010) notes that (with respect to prisons), "There were credible reports from international organizations that authorities treated ethnic minority prisoners particularly harshly." See US State Department, Bureau of Democracy, Human Rights, and Labor, "Country Reports on Human Rights Practices—2010: Laos," April 8, 2011, <http://www.state.gov/g/drl/rls/hrrpt/2010/eap/154390.htm> (accessed June 6, 2011).

¹³² Human Rights Watch interviews with Ungkhan, Maesa and Pueksapa, Vientiane, late 2010.

The village militia arrested me because I was out too late: me and my friends were just walking in the street in [name withheld] village. They arrested all of us. They said, “What are you doing here? Looking for something to steal?” The village militia took me to the office of the village head, then to the district jail in [name withheld] district and then to Somsanga... There were over 30 people who were beggars like me in there. I was there for nine months.¹³³

According to Maesa:

[In Somsanga] there are drug users, [but also] beggars, petty thieves, alcoholics, homeless people, Hmong. Some are in because they are fighting in the street and the police pick them up and put them in there. Others are homeless and walking in the street at night. Before some important days [holidays or state functions], they clean the streets of those kinds of people. Sometimes they might bring a beggar woman with her two or three kids for about a week to Somsanga, just to punish them. It’s unfair: they are already homeless and don’t do anything wrong. Why do they have to take them to rehab?¹³⁴

Pacheek told of similar types of people detained in the center:

There were 45 people in my room: only men. *Ya ma* [an amphetamine type stimulant] users were the most common. They [also] had crazy people—two older people—in my room. They didn’t shower and were dirty. They didn’t understand when people talked to them. There were beggars as well. There were alcoholics [and] the Hmong also stay in there.... They all do the same every day, just sitting doing nothing.¹³⁵

Ateet, who was released in mid-2010, explained that when he was held in Somsanga, people were swept up off the streets by police prior to Lao PDR’s National Day (December 2) in 2009.

There were about 30 or 40 [homeless] people [while I was in Somsanga]. I asked them why the police arrest them if they are not drug users. They said,

¹³³Human Rights Watch interview with Mankon, Vientiane, late 2010.

¹³⁴Human Rights Watch interview with Maesa, Vientiane, late 2010.

¹³⁵Human Rights Watch interview with Pacheek, Vientiane, late 2010.

“We don’t know why we were put inside. We were just hanging out at night time and the police came and put us in trucks and brought us to Somsanga.” They were put in separate rooms, one for men and one for women. Some were children.... They were there about one month because they had no family or relatives to come and contact the center. If they have money they can get out in one or two days.¹³⁶

According to former detainees, street children are among those detained in Somsanga. Children are entitled to additional protections against arbitrary detention.¹³⁷ However a number of former detainees described being detained alongside children 10 years old or younger.¹³⁸ According to Ungkhan:

There were about seven children in my room but maybe about 100 children altogether. The youngest was about seven years old. The children are not drug users but homeless, like beggars on the street. One is a boy from my village who I recognized. He has no mother or father and they just dumped him there.¹³⁹

The detention of homeless people and beggars in Somsanga has been widely and publicly reported. For example, in February, 2004 the *Vientiane Times* reported that over 30 beggars were held at Somsanga in order to clean the streets prior to the ASEAN Tourism Forum meeting in Vientiane.¹⁴⁰ Again, in 2007, the official Lao news agency KPL reported that in the four months prior to February 2007, 79 beggars had been sent to Somsanga.¹⁴¹ In April 2009, the *Vientiane Times* reported that in the previous three months, some 40 beggars had been sent to Somsanga.¹⁴²

¹³⁶ Human Rights Watch interview with Ateet, Vientiane, late 2010.

¹³⁷ For example: any detention or imprisonment of a child must be in conformity with the law and can be done only as a “measure of last resort” (CRC, art. 37(b)); children deprived of their liberty have the right to challenge the legality of their detention before a court or other competent, independent and impartial authority, and are entitled to a prompt decision on any such action (CRC, art. 37(d)); and the detention of persons under age 18 in the same facilities as adults is prohibited (CRC art. 37(c)). The UN Committee on the Rights of the Child—a body of independent experts empowered with interpreting the CRC and examining whether countries are in compliance with it—has noted that children placed in institutions for the purpose of drug treatment are guaranteed at least the same minimum standards as any child deprived of his or liberty. UN Committee on the Rights of the Child, “Children’s rights in juvenile justice,” General Comment No. 10, 9 February 2007, U.N. Doc No CRC/C/GC/10, fn. 1.

¹³⁸ Human Rights Watch interviews with Neung and Pahat, , Vientiane, late 2010.

¹³⁹ Human Rights Watch interview with Ungkhan, Vientiane, late 2010.

¹⁴⁰ Manichanh Pansivongsay, “Beggars must stay away during ATF,” *Vientiane Times*, January 9, 2004; Phonekeo Vorakhoun, “Beggars must be out of town by end of week,” *Vientiane Times*, January 15, 2004.

¹⁴¹ “Beggars population in Vientiane capital down,” KPL Lao News Agency, February 13, 2007.

¹⁴² Souksakhone Vaenkeo, “Vientiane clamps down on begging,” *Vientiane Times*, April 23, 2009.

In the lead up to the 25th Southeast Asia games, held in Vientiane in December 2009, Vientiane authorities established call-in numbers for people to report beggars, to ensure “orderliness” during the games.

Vientiane Labour and Social Welfare Service has assigned direct call numbers for tracing beggars to ensure keeping orderliness within Vientiane capital during the 25th SEA Games which will fall on 9- 18 December this year. Individuals can inform village authorities, security officers stationed in nearby village clusters or dial 021 21 26 09 or 020 57 22 073 and 56 17 044 if they see beggars within the capital, said on Tuesday Mr. Khonesavanh Phommadouang, Head of Social Welfare Division, Vientiane Labour and Social Welfare Service... According to Mr. Khonesavanh, beggars who are arrested will be sent back to their hometowns or to a detention centre at Somsanga village which currently houses 22 beggars.¹⁴³

Former detainees in Somsanga held during the period of the SEA games confirmed they were detained alongside beggars. Pahat, who was released in mid-2010, explained: “There were maybe about 20 people [picked off the streets during the SEA games] and they were [in Somsanga] about three months.... It’s crazy to think they were arrested! The government tried to show that Laos has no beggars.”¹⁴⁴

It does not appear that the detention of homeless people and beggars in Somsanga abated since the 2009 SEA games. In February 2011, *Vientiane Mai* newspaper reported that 66 beggars were sent to Somsanga during 2010, of whom only 24 were considered drug dependent.¹⁴⁵

In its correspondence with international donors and implementing agencies, Human Rights Watch asked whether those organizations were aware of any reports of beggars, homeless people, street children, and people with mental disabilities being detained in Somsanga, and the legal basis for such detentions. As described above, reports of the detention of homeless people and street children in Somsanga have been published in official Lao media, in both English and Lao, since at least 2004.

¹⁴³ “Find beggars dial 21 26 09,” KPL Lao News Agency, November 19, 2009.

¹⁴⁴ Human Rights Watch interview with Pahat, Vientiane, late 2010.

¹⁴⁵ “Labor Department Focus on Addressing Beggaring Problem,” *Vientiane Mai*, February 14, 2011 [Human Rights Watch translation].

Human Rights Watch had received no response from the US Department of State's International Narcotics and Law Enforcement Affairs, the US Embassy in Vientiane, the Japanese Embassy in Vientiane, and the Australian Embassy in Vientiane by the time this report went to print. The Singapore International Foundation did not address the question in its reply to Human Rights Watch. UNODC, the Singaporean Embassy, the German Embassy and the German Development Agency stated that they had not received or documented reports of beggars, homeless street children, or people with mental disabilities detained in Somsanga.

III. Donors: The Way Forward

Involuntary detention in compulsory centres for drug users is common in Asia. Treatment should always be voluntary and provided only with the consent of the drug user, and not, as frequently happens in the Asia region, either when arrested by the police or solely at the request of the user's family.

—World Health Organization, “Technical Briefs on amphetamine-type stimulants,” 2011¹⁴⁶

Centers like Somsanga are not unique to Lao PDR. In recent years, UN agencies and international organizations have begun to express concern about drug detention centers in various countries in Asia.

In a plenary address in July 2010 at the 18th International AIDS Conference (held in Vienna, Austria) the Executive Director of the Global Fund to Fight AIDS, Tuberculosis and Malaria Dr. Michel Kazatchkine, called for the closure of all compulsory drug detention centers.¹⁴⁷ The Joint UN Programme on HIV/AIDS (UNAIDS) has called for “the earliest possible closure of such centers.”¹⁴⁸ UNDP, UNICEF, and the UN high commissioner for human rights have also criticized the centers.¹⁴⁹ The UN special rapporteurs on torture and health have also spoken out against abuses in drug detention centers. In 2010, the director of the Drug

¹⁴⁶ World Health Organization, “Technical Briefs on amphetamine-type stimulants (ATS): Principles of prevention and treatment for the use of amphetamine-type stimulants (ATS),” undated. www.wpro.who.int/sites/hsi/documents/atstechnicalbriefs.htm (accessed June 8, 2011).

¹⁴⁷ “Providing Impact, Promoting Rights. The Global Fund to Fight AIDS, Tuberculosis and Malaria,” Michel Kazatchkine, presentation at AIDS 2010 - XVIII International AIDS Conference, July 18-23, 2010, http://www.theglobalfund.org/documents/ed/remarks_iac_proving_impact_promoting_right_100721.pdf

¹⁴⁸ Letter from Michel Sidibé, Executive Director of UNAIDS to Human Rights Watch, March 30, 2010, on file with Human Rights Watch

¹⁴⁹ Comments by Mandeep Dhaliwal, Cluster Leader: Human Rights, Gender & Sexual Diversities, United Nations Development Programme, “Harm Reduction 2010 The Next Generation: Addressing the Development Dimensions,” presentation at the International Harm Reduction Association Annual Conference, Liverpool, April 29, 2010; “Statement of the care and protection of children in institutions in Cambodia,” UNICEF East Asia & Pacific Regional Office, June 8, 2010, http://www.unicef.org/eapro/UNICEF_Statement_on_HRW.pdf (accessed May 12, 2011); Email from Gottfried Hirnschall, Director of HIV/AIDS Department of WHO to Human Rights Watch, May 6, 2010, on file with Human Rights Watch; “High Commissioner calls for focus on human rights and harm reduction in international drug policy,” United Nations Office of the High Commissioner on Human Rights press release, March 10, 2009, <http://www.unhchr.ch/hurricane/hurricane.nsf/view01/3A5B668A4EE1BBC2C12575750055262E?opendocument> (accessed May 12, 2011).

Policy Coordination Unit of the European Commission deemed such centers an “abomination.”¹⁵⁰

The World Medical Association (WMA) and the International Federation of Health and Human Rights Organizations (IFHHRO) have called for the closure of such centers, on the grounds they violate the human rights of the detained and operate without following accepted principles of medical treatment.¹⁵¹

Such positions have been replicated by UN agencies and embassies at the country-level. The UN country team in Vietnam has stated that it “does not support” the use of detention centers for drug users.¹⁵² The UN country team in Cambodia has stated that “there is no reason for the centers to remain open.”¹⁵³ The US Embassy in Vietnam has pressed the Vietnamese government for “elimination of [compulsory] drug treatment centers” in that country.¹⁵⁴

For its part, UNODC has criticized the approach of routine, *en masse* long-term detention in the name of “treatment”:

¹⁵⁰ UN Human Rights Council, Report of the Special Rapporteur on torture and other cruel, inhuman or degrading treatment or punishment, Manfred Nowak, A/HRC/10/44, January 14, 2009, <http://www2.ohchr.org/english/bodies/hrcouncil/docs/10session/A.HRC.10.44AEV.pdf> (accessed May 12, 2011); UN General Assembly, Report of the Special Rapporteur on the right of everyone to the enjoyment of the highest attainable standard of physical and mental health, Anand Grover, A/65/255, August 5, 2010, <http://daccess-ods.un.org/TMP/1360889.82224464.html> accessed May 12, 2010); Comments by Carel Edwards, Director of the Drug Policy Coordination Unit of the European Commission, in Hungarian Civil Liberties Union, “Abuse in the Name of Treatment- Drug Detention Centers in Asia,” video report, 2010, <http://tasz.hu/en/hclu-film/abuse-name-treatment-drug-detention-centers-asia> (accessed May 12, 2011).

¹⁵¹ “Call for Compulsory drug detention centers to be closed,” World Medical Association and International Federation of Health and Human Rights Organizations press release, May 17, 2011, <http://www.ifhhro.org/news-a-events/225-world-medical-association-a-ifhhro-joint-press-release> (accessed September 5, 2011).

¹⁵² United Nations in Vietnam, “Position on Administrative Detention for Sex Workers and People Who Use Drugs,” August 2010, para 5. http://www.unaids.org.vn/sitee/images/stories/newsroom/2011/un_position_paper_on_administrative_detention_15_august_2011.pdf (accessed September 9, 2011. For an analysis of the human rights conditions in drug detention centers in Vietnam, see Human Rights Watch, *The Rehab Archipelago: Forced labor and Other Abuses in Drug Detention Centers in Southern Vietnam*, September 2011. <http://www.hrw.org/reports/2011/09/07/rehab-archipelago-o>

¹⁵³ United Nations in Cambodia, “UN Common Viewpoint: Support to the Royal Government of Cambodia to deliver evidence-based Drug Dependence Detoxification, Treatment and Aftercare for people who use drugs,” May 2010, para. 2. http://www.unodc.org/documents/eastasiaandpacific/cambodia/UNCT_Common_Viewpoint_on_Drug_Dep_Treatment_June_2010_FINAL.pdf (accessed September 28, 2011). For an analysis of the human rights conditions in drug detention centers in Cambodia, see Human Rights Watch, “*Skin on the Cable: The Illegal Arrest, Arbitrary Detention and Torture of People Who Use Drugs in Cambodia*,” January 2010. <http://www.hrw.org/reports/2010/01/25/skin-cable-o>

¹⁵⁴ Letter to Human Rights Watch from Gregory Beck, deputy assistance administrator, bureau for Asia, United States Agency for International Development, September 14, 2011.

Many countries provide long term residential treatment for drug dependence without the consent of the patient that is in reality a type of low security imprisonment. Evidence of the therapeutic effect of this approach is lacking, either compared to traditional imprisonment or to community-based voluntary drug treatment. It is expensive, not cost-effective, and neither benefits the individual nor the community. It does not constitute an alternative to incarceration because it is a form of incarceration.¹⁵⁵

Somsanga shares the underlying operating principle of the centers criticized by these organizations. Lao authorities have developed—and international donors have continued long-term support for—a system that results in routine, *en masse* long-term detention in the name of “treatment.”

The underlying operating principle of Somsanga—detention of people against their will in the name of “treatment” and “rehabilitation”—violates the right to health of people dependent on drugs. Except in exceptional “crisis” situations, health interventions should only be administered on a voluntary basis following the fully informed consent of the patient. Even then, involuntary treatment can only be justified when it is in the best interests of the patient, for short periods of time to return the patient to a state of autonomy over his or her own decision making, and when it involves interventions which are medically and scientifically appropriate (which is not the case, for instance, when detention itself is the mainstay of treatment).

In December 2010, UNODC, the UNAIDS and the UN Economic and Social Commission for Asian and the Pacific (ESCAP) convened a meeting in Bangkok, Thailand, to discuss alternatives to compulsory drug detention centers in the region. Government officials from China, Vietnam, Thailand, Malaysia, Cambodia, Burma, Indonesia, and the Philippines attended the meeting.¹⁵⁶ Officials from Lao PDR chose not to attend and staff members of international organizations familiar with the meeting explained that this decision reflected the Lao government’s position that its centers are voluntary.¹⁵⁷

¹⁵⁵ UNODC, “From Coercion to Cohesion: Treating drug dependence through healthcare, not punishment,” March 2, 2010, p. 11. See also UN Commission on Narcotics Drugs, “Drug Control, Crime Prevention, and Criminal Justice: A Human Rights Perspective, Note by the Executive Director,” E/CN.7/2010/CRP.6*–E/CN.15/2010/CRP.1, March 3, 2010, http://www.unodc.org/documents/commissions/CND-Uploads/CND-53-RelatedFiles/ECN152010_CRP1-6eV1051605.pdf (accessed May 12, 2011).

¹⁵⁶ See UN Economic and Social Commission for Asia and the Pacific, “Regional Consultation for Compulsory Centers for Drug Users (CCDUs) in Asia and the Pacific: 14 to 16 December 2010, Bangkok,” undated, <http://www.unescap.org/sdd/meetings/CCDU-Nov2010/index.asp> (accessed September 27, 2011).

¹⁵⁷ Human Rights Watch interview with two staff members of two international organizations, September 2011.

Somsanga operates in clear disregard of the principles articulated by one of its principal supporters, UNODC. According to UNODC:

Treatment carried out without the informed consent of the patient in clearly defined exceptional circumstances needs to follow similar criteria to those used in mental health emergency situations. It should, for example:

- Require a clinical judgment by at least two qualified healthcare professionals that such treatment was necessary
- Impose a time limit of several days for compulsory treatment (to return the person to a state of autonomy in which decisions regarding their own welfare can be taken, maximum several days)
- Include a judicial review for any continued necessity, including the right to appeal
- Involve medically appropriate, individually prescribed plan, subject to regular review, that is consistent with international evidence-based best practice and ethical standards.¹⁵⁸

Not only does the operational basis of Somsanga violate the right to health, but the human rights context of Lao PDR means that closed centers for so-called drug “treatment” and “rehabilitation” create an unacceptably high risk that other types of people deemed “undesirable” will be arbitrarily detained alongside people dependent on drugs.

Lao PDR has a dismal record on respecting, protecting and fulfilling the due process rights of its citizens. The US State Department’s 2010 human rights report noted that arbitrary arrest and detention persist in the country. It observed:

Police agents exercised wide latitude in making arrests, relying on exceptions to the requirement that warrants are necessary except to apprehend persons in the act of committing crimes or in urgent cases. Police reportedly sometimes used arrest as a means to intimidate persons or extract bribes.... A militia in urban and rural areas, operating under the aegis of the armed forces, shared responsibility for maintaining public order and reported “undesirable elements” to police.¹⁵⁹

¹⁵⁸ UNODC, “From Coercion to Cohesion: Treating drug dependence through healthcare, not punishment,” March 2, 2010, p. 11.

¹⁵⁹ US State Department, Bureau of Democracy, Human Rights, and Labor, “Country Reports on Human Rights Practices – 2010: Laos,” April 8, 2011, <http://www.state.gov/g/drl/rls/hrrpt/2010/eap/154390.htm> (accessed June 6, 2011).

Compounding these concerns is the Lao government's refusal to respect the right to freedom of expression. The government owns and controls most local print and electronic media and forbids public criticism that it considers harmful to its reputation. The US State Department's 2010 human rights report also notes the absence of independent monitoring of detention conditions.¹⁶⁰ This context renders the independent and transparent monitoring and reporting of the human rights conditions of detainees in centers such as Somsanga virtually impossible.

Despite the poor human rights record of Lao PDR, a UN agency, donors and international organizations have financed and supported drug dependency services that require people to be locked up for many months in closed centers. As noted above, in some instances donors have financed the actual construction and refurbishment of such closed centers, including fences.

Donor support for closed centers in a country where due process rights are routinely violated, and where public criticism of government policy is not tolerated, creates an unacceptably high risk that such closed centers will be abusive. This is what has occurred in Somsanga.

In effect, Somsanga functions as a detention center for people who use drugs (regardless of whether actually dependent), as well as a wide-range of other socially "undesirable" groups, outside of any form of due process or legal oversight.

None of the persons whom Human Rights Watch interviewed for this report had seen a lawyer or been sent to a court prior to their detention in Somsanga. There does not appear to be any means to review or appeal detention. Human Rights Watch believes that the appropriate response to the detention of people against their will and without due process is their immediate release from such arbitrary detention. The continued detention of detainees at Somsanga cannot be justified on either legal or health grounds.

There is no doubt that effective management and treatment of drug dependence in resource-poor settings (such as Lao PDR) present serious challenges. This is particularly the case of treatment services for amphetamine-type stimulants—the most common types of illegal drugs in Lao PDR—for which no form of accepted substitution therapy currently exists.

¹⁶⁰ Ibid.

But this fact should not be used by donors as an excuse to turn a blind eye to the ongoing confinement for an indefinite period of time of hundreds of people for whom detention is arbitrary and abusive. All people, including those who are genuinely dependent on drugs, enjoy the right to freedom from arbitrary detention. Human Rights Watch believes that, given the ongoing ill treatment and suicides in Somsanga, it is safer and healthier for people, including those who are genuinely dependent on drugs, to reside in the community rather than be confined in an abusive setting.

Neither Lao PDR nor international donors should ignore human rights concerns in the provision of drug treatment, including ATS (amphetamine type stimulants) treatment. As WHO has noted:

All approaches to the treatment of ATS use should comply with human rights obligations. The human rights of people with ATS dependence must never be compromised.... Inhuman or degrading practices and punishment should never be part of the treatment for ATS dependence. All drug treatment should therefore be voluntary. Only in an exceptional crisis situation such as high risk to self or others should compulsory treatment be considered, and only as a last resort.¹⁶¹

For some people dependent on drugs (as well as many others who are poor, homeless, infrequent drug users or beggars), vocational training courses may be beneficial. But access to such services should be conditional on months of involuntary detention in closed centers.

The way forward for drug dependence services in Lao PDR should begin with an affirmation of the human rights principle of the availability of drug dependency services on a voluntary basis, following fully informed consent. WHO and UNODC note that:

[T]he same standards of ethical treatment should apply to the treatment of drug dependence as other health care conditions. These include the right to autonomy, and self determination on the part of the patient, and the obligation for beneficence and non maleficence [do good/do no harm] on behalf of treating staff.¹⁶²

¹⁶¹ World Health Organization, "Technical Briefs on amphetamine-type stimulants (ATS): Principles of prevention and treatment for the use of amphetamine-type stimulants (ATS)," undated, www.wpro.who.int/sites/hsi/documents/atstechnicalbriefs.htm (accessed June 8, 2011).

¹⁶² UNODC/WHO, "Principles of Drug Dependence Treatment," p. 9.

The principle of treatment following fully informed consent requires the establishment of a continuum of medically and scientifically appropriate services for people who use drugs.

In this respect, it should be noted that in general only a minority of people who use ATS become dependent.¹⁶³ For those who are clinically dependent, WHO considers that a range of psychosocial interventions, from cognitive behavioral therapy, contingency management and 12-step programs, have yielded encouraging results in the treatment of dependence to amphetamine type stimulants.¹⁶⁴ Human Rights Watch is not aware that any of these interventions are available in Lao PDR.

According to one staff member of an international organization who is familiar with drug issues in Lao PDR:

To my knowledge there are only very limited voluntary services for drug users in Vientiane, and none for amphetamine users. Drug use is still seen by the authorities as requiring punishment, as opposed to medical and social support. Moving forward, there's a need to set up community treatment options for drug users. Such community services would certainly be closer to the Lao culture of compassion [than Somsanga].¹⁶⁵

Specialized residential treatment facilities—in which people are able to come and go, and are offered medically and scientifically appropriate services—should be available for some heavily dependent drug users. Human Rights Watch believes that a key condition of specialized residential facilities for drug treatment should be their voluntary nature.

Specialized residential treatment facilities operating in Lao PDR would require basic human rights safeguards, such as admission mechanisms to ensure admissions are truly voluntary (and not susceptible to abuse by families, police, or local militia). In cases where persons are admitted to the residential facility on the basis of a decision to detain the

¹⁶³ World Health Organization, “Technical Briefs on amphetamine-type stimulants (ATS): Principles of prevention and treatment for the use of amphetamine-type stimulants (ATS),” undated. www.wpro.who.int/sites/hsi/documents/atstechnicalbriefs.htm (accessed June 8, 2011). One study of lifetime psycho-stimulant users found that 11.2 percent developed drug dependence (as defined by the International Classification of Diseases (ICD)-10): Anthony JC et al. Comparative epidemiology of dependence on tobacco, alcohol, controlled substances, and inhalants: basic findings from the National Comorbidity Survey. *Experimental and Clinical Psychopharmacology*, 1994, vol. 2(3), pp. 244–268, p. 255.

¹⁶⁴ World Health Organization Western Pacific Region, “Technical Briefs on amphetamine-type stimulants (ATS): Therapeutic interventions for users of amphetamine-type stimulants,” undated. www.wpro.who.int/sites/hsi/documents/atstechnicalbriefs.htm (accessed June 8, 2011).

¹⁶⁵ Human Rights Watch interview with staff member of an international organization, September 2011.

individual, there should be due process protections (including legal representation and the right to appeal) to ensure that such decisions are only taken in the patient's best interests, are time limited and are subject to appeal. Equally importantly, specialized residential treatment facilities would require rigorous independent monitoring and reporting—including confidential interviews of both current patients and those recently discharged—as well as public reporting on conditions inside the centers.

These conditions are not present at Somsanga and continuing donor support for the Somsanga center has an unacceptably high risk of engendering the types of human rights abuses that this report has documented.

Before international donors continue funding Somsanga under the mistaken belief that it is a “reformed” detention facility now operating as a specialized residential treatment facility, they should assess this approach in terms of the actual and potential human rights violations associated with it. In addition to violating the right to health of people who use drugs, that assessment should acknowledge arbitrary detention in Somsanga, the risk of exposure to cruel, inhuman, and degrading treatment or punishment that detention entails, as well as the recognition that such abuses will very likely persist in a country noted for its dismal record regarding respecting due process rights and intolerance of public criticism.

In many countries, NGOs offer the range of health services required to provide drug dependence services. Historically, government authorities in Lao PDR have suppressed NGOs. A Decree on Associations, issued by the prime minister in 2009, has the potential to allow for a range of technical and social-welfare oriented NGOs.¹⁶⁶

According to accounts of staff members of organizations familiar with drug issues in Lao PDR, applications for registering NGOs have been painfully slow. But support by donors for NGOs has the potential to provide needed services for people who use drugs (and other socially marginalized groups) without the human rights risks inherent in closed centers. Donors should fund medically and scientifically appropriate healthcare interventions which are available via voluntary, community-based services.

¹⁶⁶ See Lao People's Democratic Republic, Decree on Associations, No. 115/PM, April 29, 2009.

IV. Recommendations

To the Lao Government

- Instruct the Lao Commission on Drug Control to release current detainees in Somsanga, as their continued detention cannot be justified on legal or health grounds.
- Instruct the Lao Commission on Drug Control to permanently close Somsanga.
- Carry out prompt, independent, thorough investigations into allegations of arbitrary detention and cruel, inhuman or degrading treatment or punishment in Somsanga.
- Take appropriate remedial action for any violations identified, including prosecution for any criminal acts and providing a remedy for detainees and former detainees who sustained physical or mental harm while in detention.
- Stop the arbitrary arrest of people who use drugs and other “undesirables” such as homeless people, beggars, street children, and people with mental disabilities.
- Instruct the Ministry of Health and other relevant ministries and departments to expand access to voluntary, community-based drug dependency treatment and ensure that such treatment is medically appropriate and comports with international standards.
- Instruct the Ministry of Health and other relevant ministries and departments to expand access to voluntary, community-based drug dependency treatment for children, and ensure that such services are age-specific, medically appropriate, and include educational components.
- Invite the UN Working Group on Arbitrary Detention to visit Lao PDR within the next year and allow the Working Group members unhindered, confidential access to all drug detention centers and to detainees, while ensuring that there will be no reprisals against any detainee who meets with UN delegations.
- Invite the special rapporteur on torture to visit Lao PDR within the next year and allow him unhindered, confidential access to all drug detention centers and to detainees, while ensuring that there will be no reprisals against any detainee who meets with him.
- Invite the special rapporteur on the right to health to visit Lao PDR within the next year and allow him unhindered, confidential access to all drug detention centers and to detainees, while ensuring that there will be no reprisals against any detainee who meets with him.

To UNODC, Bilateral Donors, and International Organizations Providing Assistance to Somsanga

- Publically call for:
 - The closure of Somsanga

- An investigation into the allegations of human rights violations occurring inside Somsanga
- Holding those responsible for any violations to account
- Appropriate remedy for detainees and former detainees for any harm to their physical and mental health sustained while in detention.
- Review any funding, programming, and activities that support the operation of Somsanga to ensure that no funding is being used to implement policies or programs that violate international human rights law, such as the prohibitions on arbitrary detention, and cruel, inhuman or degrading treatment or punishment.
- For those donors funding capacity building projects on drug dependence treatment for drug detention center staff, cease such projects immediately.
- Support the expansion of voluntary, community-based drug dependency treatment, including appropriate services for women and children.
- Direct support and capacity-building projects for drug dependence treatment to staff at the Ministry of Health and NGOs.

To United Nations Agencies

- Publically call for:
 - The closure of Somsanga
 - An investigation into the allegations of human rights violations occurring inside Somsanga
 - Holding those responsible for any violations to account
 - Appropriate remedy for detainees and former detainees for harm to their physical and mental health sustained while in detention
- Actively encourage the Lao government to expand voluntary, community-based drug dependency treatment and ensure that such treatment is medically appropriate and comports with international standards.
- Support and provide capacity-building projects for drug dependence treatment to staff of the Ministry of Health and NGOs.

To the UN Working Group on Arbitrary Detention, the Committee on the Rights of the Child, the Special Rapporteur on Torture, and the Special Rapporteur on the Right to Health

- Raise concerns with the Lao government regarding the allegations of arbitrary detention, cruel, inhuman or degrading treatment or punishment, and other abuses committed against people who use drugs (including children) by law enforcement officers and staff of Somsanga.

- Request an invitation to visit Lao PDR to investigate allegations of human rights abuses against people who use drugs by law enforcement officers and staff of Somsanga.
- Request further information from the Lao government in its periodic reports on the detention and treatment of people in drug detention centers in Lao PDR, including children.

To the ASEAN Inter-Governmental Commission on Human Rights (AICHR)

- Publically call for:
 - The closure of Somsanga
 - An investigation into the allegations of human rights violations occurring inside Somsanga
 - Holding those responsible for any violations to account
 - Appropriate remedy for detainees and former detainees for harm to their physical and mental health sustained while in detention
- Request information from Lao PDR regarding the allegations of arbitrary detention and cruel, inhuman or degrading treatment or punishment, and other abuses committed against people who use drugs (including children) by law enforcement officers and staff of Somsanga.
- Prepare a study on the human rights abuses against people who use drugs in drug detention centers in ASEAN member states.

Acknowledgments

This report was researched and written by a Human Rights Watch staff member. It was edited and reviewed by Joseph Amon, director of the Health and Human Rights Division. Bede Sheppard, senior researcher in the Children’s Rights Division; Aisling Reidy, senior legal advisor; and Danielle Haas, senior editor, all with Human Rights Watch, also reviewed the report. Production assistance was provided by Grace Choi, director of publications; Anna Lopriore, creative manager; and Fitzroy Hepkins, administrative manager.

Human Rights Watch is deeply grateful to the many individuals who shared their knowledge and experiences with us. Without their testimony this report would not be possible.

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Annex 1

www.hrw.org

July 15, 2011

Minister Soubanh Srithirath, Chairman
Lao National Commission for Drug Control and Supervision (LCDC)

Dear Minister,

Human Rights Watch is an international nongovernmental organization that monitors violations of human rights by states and non-state actors in more than 80 countries around the world.

I am writing to you in reference to research Human Rights Watch is conducting on human rights abuses in the Somsanga drug detention center. The center, also known as the Somsanga Treatment and Rehabilitation Center, is located in Somsanga village (Saysetha district) near Vientiane. Specifically, I am writing to request descriptive and programmatic information about compulsory drug treatment efforts in the Somsanga center.

Our research to date has documented a number of serious concerns in Somsanga center, including:

- People are detained in the center without due process. Detainees have no practical opportunity to access a lawyer, have a legal hearing, or to appeal the decision to detain them.
- The center detains a range of people for whom there is no clinical requirement of drug dependency treatment, such as beggars, the homeless people, children and the mentally ill.
- Physical abuse is meted out as punishment for infringements of center rules (including the prohibition on attempting to escape).
- Some detainees in Somsanga have attempted to commit suicide, and in some cases were successful.

Human Rights Watch is committed to producing material that is well-informed and objective. We seek this information to ensure that our report properly reflects the views, policies and practices of the Government of Lao PDR regarding Somsanga center and the system of compulsory drug treatment.

We hope you or your staff will respond to the attached questions so that the government's views are accurately reflected in our reporting. In order for us to take your answers into account in our forthcoming report, we would appreciate a written response by August 12, 2011.

In addition to the information requested below, please include any other materials, statistics, and government actions regarding the system of compulsory drug treatment in Lao PDR that you feel is important for us to have in order to understand the system.

Thank you in advance for your time in addressing these urgent matters.

Sincerely,

A handwritten signature in black ink, appearing to read "Joseph Amon". The signature is fluid and cursive, with a long horizontal stroke at the end.

Joseph J. Amon, PhD, MSPH
Health and Human Rights Division
Human Rights Watch

We would appreciate any information you can provide regarding the following:

Background and descriptive information

1. How many government-run drug treatment centers currently operate in Lao PDR? Please provide a list of all centers, their locations and current residential population, and maximum capacity.
2. Does the Government of Lao PDR plan to increase or decrease the number of drug treatment centers in the future? Please describe any plans to expand or decrease the number of centers or the capacity of existing centers and the time period for that change.
3. Please provide data (disaggregated by sex) for 2009, 2010 and 2011 – to date, indicating:
 - How many people were detained in government-run drug treatment centers in Lao PDR?
 - How many people under the age of 18 were detained in government-run drug treatment centers in Lao PDR?
 - How many people (or what percentage of the total detainee population) were detained on a compulsory basis?

e.g.

	2009	2010	2011-date
Total number of detainees in drug detention centers in Lao PDR			
Total number of detainees under 18			
Total number (or percentage) detained on a compulsory basis			

4. Please provide data (disaggregated by sex) for 2009, 2010 and 2011 – to date, indicating:
 - How many people were detained in Somsanga center?
 - How many people under the age of 18 were detained in Somsanga center?
 - How many people (or what percentage of the total detainee population) were detained on a compulsory basis?

e.g.

	2009	2010	2011-date
Total number of detainees in Somsanga center			
Total number of detainees under 18			
Total number (or percentage) detained on a compulsory basis			

Legal and policy framework

1. On what legal basis are people detained in drug treatment centers in Lao PDR? Please specify the provision(s) under Lao law and what legal authority authorizes this detention. Please also specify how decisions of that legal authority may be appealed.
2. Please specify how decisions whether to detain someone in a drug treatment center — as opposed to criminal prosecutions — are made, and by whom.
3. Please specify for 2009, 2010 and 2011 – to date:
 - The number of individual case files submitted by Heads of the Village recommending detention in Somsanga center;
 - The number of submitted individual case files (or a percentage of the total) in which management of Somsanga center in fact ordered detention in a drug treatment center;
 - The number of individuals who had legal representation during the process of taking the decision to detain them;
 - The number of people who formerly lodged an appeal of the decision to detain them, and the number of these appeals that were successful.

e.g.

	2009	2010	2011-date
Total number of case files submitted recommending detention in Somsanga center			
Total number of case files in which detention in Somsanga center was ordered			
Total number of individuals who had legal representation during this process			
Total number of individuals who lodged an appeal against their detention			
Total number of individuals whose appeals were successful			

4. Human Rights Watch understands that homeless people, beggars, street children, and the mentally ill are frequently detained in Somsanga center.

For 2009, 2010 and 2011 – to date, please provide the following information:

- In Vientiane, the number of arrests made for each of the following categories: people who use drugs, homeless people, beggars, street children, and mentally ill people. If you cannot provide such data, please explain why not.

e.g.

	2009	2010	2011-date
Total number of arrests of people who use drugs (in Vientiane)			
Total number of arrests of homeless people (in Vientiane)			
Total number of arrests of beggars (in Vientiane)			
Total number of arrests of street children (in Vientiane)			
Total number of arrests of mentally ill (in Vientiane)			

- The laws or policies which authorize police or village militia to carry out such arrests.
- In Somsanga center, the number of detainees for each of the following categories: people who use drugs, homeless people, beggars, street children, and mentally ill people. If you cannot provide such data, please explain why not.

e.g.

Total number of Somsanga detainees who are people who use drugs			
Total number of Somsanga detainees who are homeless people			
Total number of Somsanga detainees who are beggars			
Total number of Somsanga detainees who are street children			
Total number of Somsanga detainees who are mentally ill			

- The laws or policies which authorize Somsanga center to detain such people.
5. Human Rights Watch understands that people with a mental illness are detained in Somsanga center. Why are these people detained there? Please provide details about policies and practices for providing treatment, care and support specifically to detainees with a mental illness.

6. Human Rights Watch understands that children are detained in the same sleeping dormitories as adults. Does Somsanga center detain people under age 18 separately from adults? If not, why not? Please provide details about policies and practices for providing treatment, care and support specifically to people under age 18.
7. Please provide any specific rules, regulations, guidelines, etc. detailing the internal disciplinary regime for infringements of Somsanga center rules. Specifically:
 - What are the permitted types of discipline for infringements of center rules?
 - Are detainees permitted to discipline fellow detainees?
 - Are forms of corporal punishment permitted by either centre staff or fellow detainees? If so, under what circumstances is corporal punishment used?
8. Please specify for 2009, 2010 and 2011 – to date:
 - The (national government) budget allocation per Somsanga center detainee;
 - The percentage of the total budget allocation per detainee for food expenditures;
 - The percentage of the total budget allocation per detainee for health-related expenditures.

e.g.

	2009	2010	2011-date
Budget allocation per Somsanga detainee			
Percentage for food expenditures			
Percentage for health expenditures			

Previous reports of abuse and deaths in custody

1. How are reports of ill-treatment of detainees by center staff or fellow detainees addressed and investigated? What punishment or sanctions are given to those found responsible for ill treatment of detainees?
2. How many complaints of ill-treatment have been lodged since 2006? In how many cases have complaints been upheld and sanctions imposed? What sanctions were imposed?
3. Have there been any detainee deaths in custody (including suicides) since 2006? If so, how many? Have there been any investigations into detainee deaths in custody during this period? If so, what has been the outcome of these investigation(s)?
4. Please identify any actions adopted to prevent detainee suicides, such as protocols to identify detainees at risk, counseling of depressed and suicidal detainees, medical protocols to respond to suicide attempts, mitigation measures changing the physical setting of the detention center, suicide prevention training for staff, etc.

External involvement

1. Which external organizations (such as UN agencies, multilateral or bilateral donors or international and/or national NGOs) are currently, or have previously, provided funding support, operating programs or providing services inside Somsanga center? If funding, how much funding? If running programs or providing services, please specify the nature of these programs and/or services.

Drug treatment

1. UN Office on Drugs and Crime (UNODC) and the World Health Organization (WHO) recommend that compulsory drug treatment should only be forced on people “in exceptional crisis situations of high risk to self or others” and that treatment should only be mandated for specific conditions and periods of time. Does government policy take into account this recommendation? If so, please indicate how.
2. What is the Government of Lao PDR doing to increase access to voluntary, evidence-based drug treatment provided on an outpatient basis?

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SOMSAंगा'S SECRETS

Annex 2

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www.hrw.org

[Date]

[Recipient]

[Address]

[Fax]

[Email]

Dear [recipient],

I am writing to you in reference to research Human Rights Watch is conducting on human rights abuses in Somsanga drug detention center. The center, also known as the Somsanga Treatment and Rehabilitation Center, is located in Somsanga village (Saysetha district) near Vientiane.

We are contacting you to provide information on the findings of our research and to request your cooperation in making available information on your organization's involvement with this center.

Our research to date has documented a number of serious concerns in Somsanga drug detention center, including:

- People are detained in the center without due process. Detainees have no practical opportunity to gain access to a lawyer, demand a hearing, or to appeal the decision to detain them.
- In addition to suspected drug users, authorities arbitrarily detain beggars, the homeless people, children and the mentally ill in the center.
- Staff and detainee guards at the center physically abuse detainees as punishment for infringements of center rules (including the prohibition on attempting to escape).
- Detainees report that persons held in Somsanga regularly attempt to commit suicide.

With respect to dealings that your organization may have with Somsanga drug detention center, we would be grateful if you can provide us with the following information:

- A description of your organization's current and past projects with or in Somsanga drug detention center, including:
 - The total budget and donor for projects related to Somsanga, by year;
 - The specific type of activities conducted, by year, including:
 - Any funding or in-kind support of activities providing direct or indirect services to individuals held in Somsanga drug detention center, and the nature of that funding or in-kind support;
 - Any funding or in-kind support of activities providing direct or indirect services (including trainings, study tours, conference sponsorship, etc.) to staff in Somsanga, and the nature of that funding or in-kind support;
 - Any salary support to staff of Somsanga, or government of Lao PDR officials or employees (including Lao Commission on Drugs Control staff and healthcare providers) who work in (including on an irregular or part-time basis), or are responsible for, the Somsanga drug detention center, and the amount of that salary support;
 - Any support for the construction of new, or renovation of existing, physical infrastructure in Somsanga drug detention center (and a precise description of that infrastructure).
- The monitoring and evaluation mechanisms in place for activities related to Somsanga drug detention center. Specifically:
 - The indicators to measure progress regarding project goals and activities;
 - Whether staff of your organization routinely or periodically visit Somsanga drug detention center;
 - Whether your organization has any stated policy or procedures for the handling of reports of suspected human rights violations witnessed or received by your staff or those implementing your projects (if so, please provide a copy of this policy);
- Whether your organization has any stated policy outlining the legal and/or ethical principles for its involvement in drug detention centers (if so, please provide a copy of this policy).

Please also describe:

- Any reports of suspected human rights violations (such as arbitrary detention, ill treatment) or illegal acts against detainees in Somsanga drug detention center documented by your organization's staff and the steps taken by your organization in response to such reports;
- Whether your organization is aware of any reports of detainee deaths in custody (including suicides) in Somsanga. If so, please provide those reports, and any additional information you may have on the results of any investigations of detainee

deaths in custody, and in particular any actions adopted to prevent detainee suicides.

- Whether your organization is aware of any reports of beggars, the homeless people, children and the mentally ill detained in Somsanga, and the legal basis for such detentions;
- Please outline any other steps your organization has taken in response to concerns about suspected human rights violations (such as arbitrary detention, ill treatment), illegal acts against detainees, or detainee deaths in custody in Somsanga drug detention center.

We welcome your response and any other comments you may wish to bring to our attention regarding our findings, ideally within the next four weeks, by [date]. Any responses or comments you wish to make will be reflected in our reporting and we may publish these responses, and this request, in full.

Sincerely,



Joseph J. Amon, PhD, MSPH
Health and Human Rights Division
Human Rights Watch

Somsanga's Secrets

Arbitrary Detention, Physical Abuse, and Suicide inside a Lao Drug Detention Center

"It's a bad life in Somsanga: there was not enough food and not much to do. I was not happy there and I wanted to get out all the time."

PAHAT, A FORMER DETAINEE RELEASED IN MID-2010

In Vientiane, the capital of Lao PDR, police or village militia detain and bring people who use drugs to the Somsanga Treatment and Rehabilitation Center. Others enter because family members "volunteer" them out of a mistaken belief the center offers therapeutic treatment, or because they feel social pressure to make their village "drug free." Beggars, homeless people, street children, and people with mental disabilities may also be locked up there, especially before national holidays and international events.

Regardless of how they enter, their detention is not subject to any judicial oversight. Once inside, people cannot come and go. Most detainees remain in locked cells inside compounds with high walls topped with barbed wire. Some are held for as little as three months, others longer than a year. Those who try to escape may be brutally beaten.

Despondent at being locked up and abandoned by their families, some detainees attempt suicide. Former detainees described attempted and actualized suicides involving ingesting glass, swallowing soap, or hanging.

Since at least 2002, international donors have supported Somsanga by constructing or refurbishing buildings, training center staff, and providing vocational training courses. Donor support has come from the US government, the UN Office on Drugs and Crime, and a handful of other embassies in Vientiane and external organizations.

Somsanga's Secrets calls on the Lao government and the center's international supporters to end routine, long-term, *en masse* detention of people in the name of drug treatment by closing the Somsanga center. Human Rights Watch urges donors and government authorities to establish voluntary, community-based options available to anyone in the community who wants them.

All photos © 2011 Arantxa Cedillo

A detainee at the Somsanga center near Vientiane. The essence of Somsanga's purported "treatment" remains being locked up, at risk of physical abuse for infringing rules, or trying to escape.

