



Punish and Cure

Forced Detox Camps,
Reeducation through Labour,
and the Contradictions of
China's War on Drugs

Methadone PC: Abulic
Monkey (@Flickr.com).

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By drawing on the life histories of 20 former and current heroin and methadone users in Yunnan Province, this essay explores the history, the logic, and the functioning of China's anti-drugs camps. It shows how the tight intertwining of public health and public security models to fight against drug use has given rise to a contradictory policy landscape, whereby medical support always coincides with physical violence, social exclusion, and continuous surveillance of the bodies and the movements of Chinese addicts.

Real names of people and places have all been anonymised to protect the privacy and safety of the interviewees.

‘This time of the year is so boring,’ grumbled Dr Lin while fidgeting on the keyboard, trying to download yet another episode of *Beijing Youth* on the methadone treatment clinic’s computer. Outside monsoon rain swept the narrow, leafy street just off the main road in Qilin, a county-level city in southern Yunnan province. On that hot afternoon in August 2012, Dr Lin and I had already binged five episodes of her favourite soap opera without ever being interrupted by a single methadone user. Cursing once again the slow Internet connection, Dr Lin said: ‘You see, in this period of the year there are so few people coming to drink methadone. There are periods in which we are so busy, we don’t even have time to say a word to each other.’ Pointing to Dr Liu, a moustached man in his forties, who nodded from his chair in the opposite corner

of the room, eyes fixed on the screen where he was busy playing a game of *Magic Farm*, she added: 'And then you have periods like this one, when there is literally nothing to do.'

Dr Lin was one of the longest-serving staff members of Qilin's methadone treatment centre. She had worked there since the centre opened, after leaving her job as a nurse in an infectious disease unit, due to the excessive pressure she experienced during the SARS epidemic. Although she used to be an employee of the state-led Centre for Disease Control (CDC), Dr Lin was never shy when it came to talking about the paradoxes of China's anti-drug system:

It's all because of the arrests. These two months, between August and September—these are the most critical ones, because they are the last two of the bureaucratic year.

At the end of the bureaucratic year each unit has to produce a report about its achievements. And for the police this means to report also about how many drug users they have made quit drugs. All units in China work towards a target—for the police one of the targets is the percentage of addicts they arrest and send to the camp based on the total number of addicts in a county or a prefecture.

In Qilin, the official numbers say that there are more or less 2,000 heroin users, so 20 percent of them have to be sent to forced detox camps (戒毒所) or reeducation through labour camps (劳教). What happens is that usually, at this time of the year, the police realise they have arrested far fewer people than their target is and they start arresting people like crazy, because they have to meet the target.

While we talked, Dr Lin, Dr Liu, and I sat behind the metal grill that separated doctors from users in the reception of the centre. Between 2011 and 2016, I spent many mornings and afternoons behind that grill. I saw busier and less busy days go by in the centre, while

being patiently introduced to the contradictions of what was commonly described as China's 'belated but bold' new wave of drug policies (e.g. Wu et al. 2007), by the people most directly involved in them—i.e. CDC employees on the one hand and methadone users on the other.

During my time in Qilin, the centre's staff allowed me to use one of their spare rooms to privately meet with 20 local current and former heroin users and to gather their life histories. All the stories I collected there had two things in common. Firstly, all the people I spoke with used more or less regularly the government-sponsored methadone substitution treatment offered in the centre—i.e. the jewel in the crown of China's new community-based responses to curb drug addiction, which also included clean needles exchange and peer education among registered addicts. Secondly, all my interlocutors had had direct experience of the other face of China's anti-drug policies, which historically tackled drug use as an essential matter of public security to be policed through the confinement of addicts in specific state-led facilities—i.e. the forced detox camps and rehabilitation through labour camps mentioned by Dr Lin.

As Dr Lin protested on that day in 2012, far from being replaced by China's new, public health-oriented approaches to drug control, forced detoxification and rehabilitation through labour still existed alongside them and still represented a huge part of addicts' lives in China. This had not changed one year later, when I visited the centre again. In 2013, China officially abolished reeducation through labour camps. However, as a report by Amnesty International (2013) pointed out, this move did little more than 'changing the soup but not the medicine', with more power and resources being now made available to other forms of extra-judicial detention and some reeducation through labour camps being simply renamed as forced detox camps (see also Bakken's essay in the present issue).

In fact, before and after 2013, the risk of being arrested was a constant worry for Qilin's registered addicts. The tight intertwining of

public health and public security models has given rise to a contradictory policy landscape, whereby medical support always coincides with continuous surveillance of the bodies and the movements of addicts. Over the years, this entrenchment has created patterns of structural violence that make breaking out of addiction in China almost impossible for registered drug users. To show the consequences of this entrenchment on the lives of Qilin's addicts, in this essay I dig deeper into the history, the logic, and the functioning of China's anti-drugs camps.

Drugs and Their Cure

Fighting drug use through confinement and forced rehabilitation is an old concept in China. Already a key part of China's anti-drug policies during the Republican era (Slack 2000), forced detox camps made a comeback after the reforms of the late 1970s, in the wake of the new diffusion of opiates in the country (Chouvy 2002, 2010; Chin and Zhang 2015). After almost 30 years in which Mao's war on drugs had made opiates vanish from China's social sphere, the establishment of new trade routes from Southeast Asia and the massive social changes of post-reform China made drugs—and opiates in particular—become once again popular pastimes among Chinese youth, especially in the country's southern and western borderlands (Zoccatelli 2014). In the ten years between 1988 and 1998, the number of registered addicts in China rose from less than 50,000 to a conservative estimate of 600,000—an increment of 1,200 percent (Lu and Liang 2008). Since then, the number of registered drug users in China has grown every year, with a report from the China National Narcotics Control Commission stating there were 2.51 million people using drugs as of late 2016 (Xinhua 2017).

Such a rapid diffusion of drug use has led to new legislation being enforced at the national level. Starting from late 1980s, counties and

prefectures with more than 1,000 registered drug users have been required to open forced detox camps run and managed by the local public security apparatus, as a subordinate unit of local public security bureaus. Funding for the construction of local forced detox camps is made available jointly from central, provincial, and prefectural governments. The need for their establishment has to be approved by the local governments, and the provincial government and Ministry of Justice must be notified. Forced detox camps are now almost entirely managed by local public security bureaus, with the central state only occasionally getting involved in investigating and cutting back the most blatant abuses. Sentences to forced detox camps are based entirely on decisions made by police, without requiring a court trial. A term in a forced detox camp can last to up to two years, and people who received a sentence have no rights to appeal.

Since the early 1990s, growing overcrowding in forced detox camps and the frequent overlap between drug use and other petty crimes unsuitable to be punished in forced detox camps—such as smuggling and small robberies—have led China to look for alternative strategies to add capacity to its anti-drug infrastructure. A solution emerged through the inclusion of the existing network of reeducation through labour camps into China's anti-drugs apparatus (Wang 2002). From 1957, reeducation through labour camps have been a system of administrative detention used to punish law infringements like sex work, mild political dissent, and illegal cults. Similarly to forced detox camps, the aim of reeducation through labour camps was to reform people deemed to have committed minor offences but not legally considered to be criminals. Sentences to reeducation through labour were also made directly by the police, without the need for a trial or judicial hearing. Terms in reeducation through labour camps were however longer than those in forced detox camps, and normally lasted up to three years.

Since becoming facilities used to hold and reform drug users, reeducation through labour camps have begun to identify more and more with their new function. Since 2004, quarters expressly designed to hold drug users were added in order to separate them from other types of inmates (Sapio 2010). As of 2013, when the reeducation through labour camp system was dismantled, nearly a third of all functioning camps were exclusively used to ‘reeducate’ addicts, with around 40 percent of all inmates in China detained for drug-related offences (Seymour 2005). Whereas sentences to forced detox camps were meant to punish people caught using drugs for the first time, condemnation to reeducation through labour camps was supposed to be used to detain relapsing addicts and first-time users found guilty of concurrently committing other mild offences (Zhang and Chin 2016). However, the fact that decisions regarding the type of detention rested entirely with unsupervised local police offices means that this dualism was often disregarded in practice.

‘When they arrested me, they sent me straight to reeducation through labour. I have never been to a forced detox camp,’ I was told by Li Man, a woman in her thirties who spent two three-years terms in reeducation through labour camps. Behind this decision there was a reason similar to that outlined by Dr Lin to explain the rising number of arrests in Qilin during August and September 2012. Li Man went on to say:

In certain periods of the year, when you are in a reeducation through labour camp you’re offered a shorter term if you are willing to indicate the name of people you know that regularly use drugs. It’s probably because the police need to boost the number of people they send to reeducation through labour, I don’t know. But I think this is how I got arrested the first time. Someone must have mentioned my name, because the police came straight to my house and arrested me, even if I wasn’t using drugs at that moment.

Despite how unfair Li Man’s story may sound, the consequences of having been sent straight to a reeducation through labour camp instead of to a forced detox camp were less severe in practice than one may think. Those of my interlocutors who had spent at least a term in both all remarked that the two systems were, as one of them put it, ‘basically the same’. ‘The main thing you do in both is working,’ explained Hu Jia, who spent two years in the prefectural forced detox camp before being caught using drugs again and being sentenced to three years in a reeducation through labour camp. Hu Jia’s words mirror evidence by scholars and human rights organisations, who have repeatedly denounced the way in which the lack of medical and psychological support in both systems has caused manual work to become the main—and often the only—detox strategy available to detained addicts (cf. e.g. Human Rights Watch 2008; Zhang and Chin 2016). The type of work performed in forced detox camps and reeducation through labour camps varies. All of my interlocutors in Qilin described having been engaged in two main types of activities: manufacturing jobs and agriculture.

In the following pages, I will draw on current and former addicts’ narratives of life in anti-drugs camps to highlight patterns of direct and structural violence against them. As we shall see, such violence was not confined behind the walls of the camps. Rather, it spanned well outside of them, imposing constant surveillance and enduring social stigma on the lives of people caught using drugs.

Living in and out the Camp

‘I have been to Shanshan and Shanshan is really the harsher of reeducation through labour camps (最苦的劳教);’ I was told by Zhao Yu, a man in his early forties, who was first arrested at the end of 1990s. Zhao spent a year in Shanshan before bribing some of the camp’s

guards and being allowed to leave two years before the end of his term. Like Zhao, many of my interlocutors in Qilin described Shanshan as a legendary place, the tougher and more isolated of all camps in Yunnan. People having spent a term there described surviving it with a mixture of horror and pride. Narratives about their lives there were the ones more strikingly filled with gruesome details of open violence against inmates.

‘In Shanshan the main activity is farming in the rice paddies,’ Zhao went on to describe to me.

But you have to understand that this is a terribly hot place. It’s up at the top of a mountain, there are just rice terraces and no shade, so the temperatures there are often higher than 40 degrees Celsius. So, often it would happen that due to the heat or due to the withdrawal symptoms you’d have from the drugs, many people would faint. However, in Shanshan there was this rule that if you were away for more than ten minutes, you’d have to report it to the guards. But if you fainted, that is all time that is considered like you’re not working and, since you fainted, you’d have no chance to report that you weren’t working. So, it happened to me that I fainted and then I woke up, I went to the guards and told them ‘I fainted.’ At that point, they complained that I hadn’t reported to them before doing so, so when I went back to work they beat the hell out of me, really the hell out of me. And this happened to everyone.

Zhao Yu was not the only one describing open violence at the hands of the guards in Shanshan. Bai Liang, the former wife of a police officer and a regular methadone user who spent two years in the camp, for instance described in the following terms her arrival in Shanshan:

Because I was the wife of a police officer, you could see that it was quite awkward for the guards. They didn’t know how to treat me, they tried to be a bit more respectful compared to what they would do to the others. But in Shanshan, when you arrive there is a standard

procedure: they ask you to undress, they shave your head, and then they rape you there, on the floor.

Conditions in other camps were little better than the extreme ones reported in Shanshan. Many former inmates in both forced detox camps and reeducation through labour camps reported to have been routinely abused and beaten up by camp guards, usually due to the poor quality of their work.

Other forms of less direct violence were also ubiquitous, like the one described to me by Niu Yin, a former heroin user and a sex worker from a neighbouring town. ‘See my hands?’ Niu Yin was missing two of her phalanges and she could not move most of her other fingers.

They became like this when I was in the prefectural forced detox camp. The main job we were doing there was massaging little stones—like those little stones you find in clothes, on shoes. Stones have usually irregular shapes, but in the camp they said they wanted them round. The only way of making them round is by manually massaging each of them, with your hands soaked in water. The problem is that spending all that time with your hands in the water is not good for people like us. We use fingers to inject heroin, so in those conditions it’s very easy to develop an infection. One day I woke up and I couldn’t lift my arms any more, I looked at one of my hands and it was all black. And these two phalanges I am missing, those were looking like dried ham. I was in terrible pain, I touched them, I started tearing them out and they literally popped out, without much effort. Nobody did anything to help.

Zones of Exception

Stories like the ones above speak of a disregard for inmates’ basic human rights that resonates closely with analyses of camps in the academic literature. For instance, Sapio (2010) has fittingly described the camps as a peculiar ‘zone of exception’ within the criminal

justice system of China. According to Sapio, and following Agamben's (2005) classical discussion, 'zones of exceptions' are elements of the legal infrastructure of the Chinese state which exist outside China's legal order but are at the same time functional to preserve it. They enable the system to maintain a space of flexibility that allows the state to protect its sovereign power from alleged threats and to deal with unforeseen circumstances. In the case of drug use, the resort to forms of arbitrary administrative detention of addicts has allowed the state to cope with a perceived public security emergency—i.e. the sudden and dramatic diffusion of drugs and their related public health consequences—by neatly and systematically separating the bodies of people deemed to be a threat from the ones of China's normal citizenry. This neat divide has little to do with camps' proclaimed aim of detoxing and reeducating drug users—these are at best rare collateral outcomes of the two systems. It has much to do instead with the need to show the efficiency of the state in preserving public order and in guaranteeing the safety and security of China's normal population.

A dramatic consequence of this approach in the long run is the fact that the separation created between addicts and the rest of society persists beyond the walls of the camps. Once caught using drugs, addicts are in fact permanently registered as 'drug users' by local public security departments, giving way to continuous forms surveillance—and the consequent widespread social stigma. Their status as 'drug addict' is revealed every time they use their ID—e.g. checking in at hotels, booking train or plane tickets, buying a phone, or applying for a job. Registered addicts may be requested to undergo a drug test at any time—often, reportedly, in public. Registrations last forever and nothing can change someone's status. It does not matter whether someone has never tested positive again or whether he/she is registered in a community drug detoxification and rehabilitation programme like methadone maintenance therapy.

The overlapping of arbitrary detention and surveillance with China's new public health-oriented strategies to control the spread of drugs naturally hampers the efficacy of the latter. Users have very few incentives to enrol in and stick to treatment, given their status and the consequent social stigma attached to it will not change consequently. It is worth concluding by citing one of Dr Lin's famously blunt outpouring of frustration against the system within which she worked:

Quitting drugs in China is almost impossible. And it is never a physical problem. Physically, people can quit drugs, they suffer for a few weeks, but then they are out The main problem is psychological. And this is true everywhere, but in China it is particularly so. There is a huge stigma on these people, it's impossible for them to find a decent job because everyone will know they used drugs. They are excluded from every aspect of society. How to say, they don't have a way out. So why would someone want to endure the pain required to quit when faced with this prospect? ■