

SEA Beat

Drug harms amongst youth in Shan State, Myanmar: Community responses and increased vulnerabilities

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This article analyses how families and communities in Shan State, Myanmar, have responded to rising youth drug use, and the impacts that these responses have on young people. It first examines the factors that have caused drug production and drug use amongst youth in Shan State to increase over the past three decades and places these phenomena in the context of wider political and economic transformations that have shaped Myanmar's borderlands since the late 1980s. Drug-related harms among Shan youth have overwhelmed family and community coping mechanisms in a context where state responses have been ineffective and inadequate. Consequently, families have resorted to increasingly desperate ways to try to protect young family members from drug use. This article focuses on two responses. First, the decision by rural families to send sons and daughters away to big cities or to neighbouring countries to avoid the local drug environment. Second, the decision to send children experiencing drug harms to treatment centres operated by ethnic armed organisations. Both responses, this article argues, expose young people to new forms of vulnerability. Finally, the article reflects on some of the challenges the drug problem poses for government and communities, and offers suggestions for alternative responses.

Worsening drug use among young people over the past three decades is of immense concern to families and communities in Shan State, Myanmar. Rising drug production, trafficking and consumption in this borderland region, and the ways that families and communities have responded to worsening drug harms over the last three decades, need to be understood in the context of broader political-economic transformations that have shaped Myanmar's borderlands since the late 1980s.

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These transformations revolve around processes of militarisation and capitalist development that have underpinned the Myanmar military government's campaigns to assert authority over the country's ethnically diverse borderlands, and to extract greater revenue from these regions through resource extraction and border trade with neighbouring China and Thailand. Furthermore, long-standing political grievances over the nature of the state and who has the right to exercise public authority, and militarisation and capitalist development policies have generated new grievances and insecurities in this region.

Amidst these transformations, Shan State has remained the world's second-largest producer of illegal opium (most of which is converted into heroin) and has become Asia's largest producer of illegal methamphetamines, more commonly known as 'Yama'¹ or 'Yaba'.² For example, seizures of illicit drugs in Myanmar have increased tremendously between 2005 and 2018. Methamphetamine seizures have risen from 8 million pills in 2005 to 106 million pills in 2018.³ Living in such proximity to vast levels of production of potent drugs has increased young people's vulnerability to drug use.

The type of responses enacted by the national government in response to rising drug use demonstrate clearly the priorities underpinning the Myanmar military's borderland development policies. Although vast amounts of revenue are being generated from resource extraction, agribusiness deals, and border trade, levels of investment in basic services remain woefully small. Despite the tragic consequences of rising drug abuse in this region, there has been very little support from the central government. Responses are inadequate, ineffective and harsh or even violent. The government's 'hardship approach' is used to punish people who sell and use drugs—often disproportionately targeting small-scale dealers—through criminalising drug-related offences and handing out long prison sentences.⁴ Myanmar's Drug Policy Advocacy Group points out that 'the implementation of harsh policies and penalties has caused immense additional harm to Myanmar people and community'. Drug issues have therefore resulted in complicated social impacts. For example, many

1 Yama is the original name of Yaba. Yama literally means 'horse drug', implying that it enables the user to be strong and work as tirelessly as a horse. In 1996, Thai authorities changed the name from Yama to Yaba (crazy drug) in order to convey its harmful effects. Bertil Lintner and Michael Black, *Merchants of madness: The methamphetamine explosion in the Golden Triangle* (Chiang Mai: Silkworm, 2009), p. 2.

2 International Crisis Group, 'Fire and ice: Conflict and drugs in Myanmar's Shan State', 2019, <https://www.crisisgroup.org/asia/south-east-asia/myanmar/299-fire-and-ice-conflict-and-drugs-myanmars-shan-state> (last accessed 3 Nov. 2020); Drug Policy Advocacy Group (DPAG)-Myanmar, 'Addressing drug problems in Myanmar: 5 key interventions that can make a difference', *Transnational Institute.org*, Feb. 2017, https://www.tni.org/files/publication-downloads/drug_problem_in_myamar_final_feb8_english.pdf (last accessed 20 Sept. 2020).

3 ASEAN Inter-Parliamentary Assembly (AIPA), 'Myanmar country report on the 2nd Meeting of the AIPA Advisory Council on Dangerous Drugs (AIPACODD)', 2019, <https://www.parliament.go.th/ewtadmin/ewt/aipa2019/download/article/AIPACODD/Annex%20N%20-%20Country%20Report%20of%20Myanmar.pdf> (last accessed 22 Oct. 2021); United Nations Office on Drug and Crime (UNODC), 'Myanmar Opium Survey 2005', *UNODC.org*, 2005, https://www.unodc.org/pdf/Myanmar_opium-survey-2005.pdf (last accessed 10 Oct. 2020).

4 Ernestien Jensema and Nang Pann Ei Kham, 'Found in the dark: The impact of drug law enforcement practices in Myanmar', *TNI Drug Policy Briefing*, no. 47, Sept. 2016, <https://www.tni.org/en/publication/found-in-the-dark> (last accessed 20 Oct. 2020).

young people have lost their future, wasting their years of youth in prison, and many family dependants have lost their breadwinners.⁵

Without state support, communities and families have been struggling with youth drug use problems. They have no choice but to find their own ways—often based on long-standing social norms and practices—to respond to drug problems. However, family and community responses often confront young drug users with new forms of vulnerability. Developing this core argument of the article, we focus on two key coping mechanisms. First, why rural families choose to send sons and daughters away from home to big cities or to neighbouring countries to avoid the local drug environment. Second, we investigate the reasons for sending sons and daughters who are experiencing drug harms to treatment centres operated by ethnic armed organisations.⁶ This article analyses how both responses expose young people to new forms of vulnerability.

The analysis presented in this article is based on 160 short interviews, 56 in-depth interviews and 4 life-story interviews which were conducted by a team of researchers led by the authors in 2018–20. Most of the interviews were conducted in Shan, with some also in Burmese and a few in English. The interviews were conducted across Shan State, particularly in Taunggyi, which is under full government administrative control, and two border towns, Muse and Tachileik, both contested by ethnic armed organisations (EAOs) and local militia groups. The interviews were conducted with family members of People Who Use Drugs (PWUD),⁷ young people who have been sent to treatment centres administered by the government or EAOs as well as personnel at these centres. The interviewees also included politicians, civil society organisation (CSO) workers, businesspeople, militia leaders and government officers as well as EAO leaders.⁸

The first section of this article sets out a conceptualisation of the relationship between drugs and the process of borderland development, and how this relationship frames coping mechanisms that are mobilised in response to drug harms. The second section contextualises drug production and drug consumption, particularly among young people, in Shan State. The third part analyses the coping strategies deployed by families and communities and the impacts these responses have on young people. The article concludes with the implications of the findings and recommendations for more effective pathways away from drug harms for young PWUD and their communities in Shan State.

Development, drugs and harm in the borderlands

Poverty, inequality, social ills and environmental degradation across Mainland Southeast Asia's borderlands are not the legacies of underdevelopment, but the

5 DPAG-Myanmar, 'Addressing drug problems', p. 1.

6 Various terms are used to describe these armed groups in Myanmar such as rebels, insurgents, non-state actors, ethnic revolutionary organisations and ethnic armed organisations. We use the term EAOs as it is widely used among peace negotiators, policymakers, and the media.

7 In this article the terms People Who Use Drugs (PWUD) and drug users are used interchangeably, but drug addict is only used in direct quotes.

8 This data has been generated from the four-year (2018–21) Drugs and (Dis)order research led by SOAS. See: <https://drugs-and-disorder.org/>. This research has been approved by the SOAS Ethics Board and the Ethics Review process conducted by SHAN. All research participants provided informed consent to be interviewed for this research and have also been anonymised to protect their identity.

outcomes of a particular development paradigm that narrowly targets growth-as-capital-accumulation.⁹ Following a series of political and economic changes since the late 1980s, borderland regions have become an important frontier for capital accumulation and are at the centre of development programmes by governments which aim at expanding cross-border trade and investment as well as transforming these borderland regions into resource extraction and production zones.¹⁰ Borderlands have increasingly been conceptualised as ‘economic corridors’ at the centre of regional development strategies rather than as barriers at the margins of Asia’s rapid growth. This transformation has been facilitated by legal changes such as land laws and foreign investment laws and the promotion of cross-border trade to attract foreign investment. This is exemplified by New Economic Zones in the western highlands of Vietnam and transnational investment in southern Laos and the China–Laos borderlands.¹¹ However, these political and economic changes have been accompanied by increased militarisation, human rights abuses, and a range of illicit activities.¹² These dynamics draw attention to how organised violence and armed conflict are inherent to capitalist development and reproduction, as understood by the concepts of ‘predatory accumulation’,¹³ the ‘development–insecurity nexus’¹⁴ and ‘accumulation by dispossession’.¹⁵ Furthermore, many writers note that organised criminal activity is a universal feature of modern states, and that organised

9 Jonathan Rigg, *Challenging Southeast Asian development: The shadows of success* (London: Routledge, 2015).

10 Keith Barney, ‘Laos and the making of a “relational” resource frontier’, *Geographical Journal* 175, 2 (2009): 146–59; Michael Eilenberg, ‘Frontier constellations: Agrarian expansion and sovereignty on the Indonesian–Malaysian border’, *Journal of Peasant Studies* 41, 2 (2014): 157–82; Rodolphe De Koninck and Steve Dery, ‘Agricultural expansion as a tool of population redistribution in Southeast Asia’, *Journal of Southeast Asian Studies* 28, 1 (1997): 1–26; Patrick Meehan, Sai Aung Hla and Sai Kham Phu, ‘Development zones in conflict-affected borderlands: The case of Muse, Northern Shan State, Myanmar’, in *Development zones in Asian borderlands*, ed. Mona Chettri and Michael Eilenberg (Amsterdam: Amsterdam University Press, 2020), pp. 141–64; Keith Sutton and Amriah Buang, ‘A new role for Malaysia’s FELDA: From land settlement agency to plantation company’, *Geography* 80, 2 (1995): 125–37; Philip Taylor, ‘Frontier commoditisation in post-socialist Southeast Asia’, *Asia Pacific Viewpoint* 57, 2 (2016): 145–53; Kevin Woods, ‘Ceasefire capitalism: Military–private partnerships, resource concessions and military–state building in the Burma–China borderlands’, *Journal of Peasant Studies* 38, 4 (2011): 747–70.

11 Pinkaew Laungaramsri, ‘Frontier capitalism and the expansion of rubber plantations in southern Laos’, *Journal of Southeast Asian Studies* 43, 3 (2012): 463–77; Pál Nyíri, ‘Enclaves of improvement: Sovereignty and developmentalism in the special zones of the China–Lao borderlands’, *Comparative Studies in Society and History* 54, 3 (2012): 533–62.

12 Lee Jones, ‘The political economy of Myanmar’s transition’, *Journal of Contemporary Asia* 44, 1 (2013): 144–70; Patrick Meehan, ‘Drugs, insurgency and state-building in Burma: Why the drugs trade is central to Burma’s changing political order’, *Journal of Southeast Asian Studies* 42, 3 (2011): 376–404; Patrick Meehan, ‘Fortifying or fragmenting the state? The political economy of the opium/heroin trade in Shan State, Myanmar, 1988–2013’, *Critical Asian Studies* 47, 2 (2015): 253–82; Woods, ‘Ceasefire capitalism’, pp. 751–63.

13 Philippe Bourgois, ‘Decolonising drug studies in an era of predatory accumulation’, *Third World Quarterly* 39, 2 (2018): 385–98.

14 Shahar Hameiri, Lee Jones and Yizheng Zou, ‘The development–insecurity nexus in China’s near-abroad: Rethinking cross-border economic integration in an era of state transformation’, *Journal of Contemporary Asia* 49, 3 (2019): 473–99.

15 David Harvey, *The new imperialism* (Oxford: Oxford University Press, 2003).

crime groups are frequently ‘tolerated’ by states in the pursuit of broader political agendas.¹⁶

In the case of Myanmar’s eastern borderlands, ceasefire agreements between the central government and various armed organisations in the late 1980s and early 1990s created growing stability. A series of new land laws and foreign investment laws that followed the ceasefires, as well as the gradual liberalisation of cross-border trade, paved the way for significant inflows of investment, especially in resource extraction and agribusiness development.¹⁷ Long-standing political grievances were not addressed and the Myanmar Army launched a sustained process of militarisation through the 1990s and 2000s in an attempt to wrestle further territory away from armed organisations. Alongside these political and economic transformations, drug production and consumption have been rife. As Patrick Meehan writes, those involved in illicit drug cultivation were not ‘left behind’ by development, but have been exposed to new forms of precarity and immiseration through processes of marketisation, which has necessitated or incentivised involvement in illicit cultivation. Similarly, several scholars working across other contexts have argued that drug use, illicit drug economies and accompanying violence do not necessarily represent failures of development or state authority, but are better understood as fundamental components of capitalist development and modern state formation.¹⁸ The expanding drug trade has been accompanied by increased state authority and reduced armed conflict in some contexts.¹⁹ Drugs, therefore, have provided huge profits for powerful groups in changing borderland political orders at the expense of their vulnerable populations.²⁰ Drug revenue and violence also enable land and asset acquisition by drug traffickers who form powerful new constituencies, which some have labelled the ‘narco-bourgeoisie’.²¹ States often delegate power to irregular armed groups while allowing them to produce drugs as part of the process of consolidating state

16 Jean L. Briquet and Gilles Favarel-Garrigues, ‘Introduction: Violence, crime and political power’, in *Organized crime and states: The hidden face of politics*, ed. Briquet Jean-Louis and G. Favarel-Garrigues (London: Palgrave Macmillan, 2010), pp. 1–14; Thomas Gallant, ‘Brigandage, piracy, capitalism, and state-formation: Transnational crime from a historical world-systems perspective’, in *States and illegal practices*, ed. J.M. Heyman (London: Bloomsbury Academic, 1999), pp. 25–61; Alfred W. McCoy, *The politics of heroin: CIA complicity in the global drug trade: Afghanistan, Southeast Asia, Central America, Colombia* (Chicago: Lawrence Hill, 2003).

17 Tom Kramer and Kevin Woods, ‘Financing dispossession: China’s opium substitution programme in northern Burma’, *Transnational Institute.org*, Feb. 2012, <https://www.tni.org/files/download/tni-financingdispossession-web.pdf> (last accessed 3 Nov. 2020); Woods, ‘Ceasefire capitalism’, pp. 749–63.

18 Teo Ballvé, ‘Grassroots masquerades: Development, paramilitaries, and land laundering in Colombia’, *Geoforum* 50 (2013): 62–75; Bourgois, ‘Decolonising drug studies’; Curtis Marez, *Drug wars: The political economy of narcotics* (Minneapolis: University of Minnesota Press, 2004); Carl Trocki, *Opium, empire, and the global political economy: A study of the Asian opium trade* (London: Routledge, 1999), pp. 1750–950.

19 Jonathan Goodhand, ‘Corrupting or consolidating the peace? The drugs economy and post-conflict peacebuilding in Afghanistan’, *International Peacekeeping* 15, 3 (2008): 405–23; Meehan, ‘Fortifying or fragmenting the state?’, p. 261.

20 Bourgois, ‘Decolonising drug studies’, p. 390.

21 Jasmin Hristov, *Paramilitarism and neoliberalism: Violent systems of capital accumulation in Colombia and beyond* (London: Pluto, 2014); Kendra McSweeney, Nazih Richani, Zoe Pearson, Jennifer Devine and David J. Wrathall, ‘Why do narcos invest in rural land?’, *Journal of Latin American Geography* 16, 2 (2017): 3–29.

power in unruly borderlands.²² The rise of illicit drug production and use has become a cause for great concern across Southeast Asia.²³ In Myanmar's Kachin and Shan States, drug use, particularly of methamphetamines and heroin, among young people has increased significantly in recent decades.²⁴ There are also high levels of HIV/AIDS amongst people who inject drugs and growing evidence of HIV-1 drug-resistant strains in borderland regions.

Within this wider political economy of drugs, violence, and borderland development, families and communities across Shan State have sought to find coping strategies to respond to the harms generated by rising drug use. The existing literature on harm reduction provides important insights into understanding debates around drug policy and community responses, especially critiques of authoritarian, militarised and criminalising counter-narcotics practices, as well as the importance of alternative approaches that prioritise human rights, health, local community needs and indigenous practices. For example, much research has documented how drug eradication programmes have exacerbated the insecurities facing vulnerable groups, by destroying livelihoods and causing environmental harm,²⁵ while failing to significantly suppress illicit drug production and consumption.²⁶ This literature also draws

22 Anshuman Behera, 'Insurgency, drugs and small arms in Myanmar', *Strategic Analysis* 41, 1 (2017): 34–48; Patrick Meehan and Sharri Plonski, 'Brokering the margins: A review of concepts and method', Borderlands, brokers and peacebuilding in Sri Lanka and Nepal project, Working Paper no. 1 (SOAS and University of Bath, 2017), http://www.borderlandsasia.org/uploads/1488349944_BROKERING+THE+MARGINS+-+Patrick+Meehan+and+Sharri+Plonski+-+February+2017.pdf (last accessed 7 Nov. 2020).

23 Kongpetch Kulsudjarit, 'Drug problem in Southeast and Southwest Asia', *Annals of the New York Academy of Sciences* 1025, 1 (2004): 446–57; Rebecca McKetin, Nicolas Kozel, Jeremy Douglas, Robert Ali, Balasingam Vicknasingam, Johannes Lund and Jih-Heng Li, 'The rise of methamphetamine in Southeast and East Asia', *Drug and Alcohol Review* 27, 3 (2008): 220–28; UNODC, 'South-east Asia Opium Survey 2010: Lao PDR and Myanmar', *United Nations Office on Drug and Crime.org* (2010), https://www.unodc.org/documents/crop-monitoring/sea/SEA_report_2010_withcover_small.pdf (last accessed 10 Oct. 2020).

24 Dan Seng Lawn, Ja Htoi Pan Maran, Mandy Sadan, Patrick Meehan and Jonathan Goodhand, 'The *Pat Jasan* drug eradication social movement in Northern Myanmar, part one: Origins & reactions', special issue: 'Drugs, Conflict and Development', ed. Jonathan Goodhand et al., *International Journal on Drug Policy* 89 (2021), <https://doi.org/10.1016/j.drugpo.2021.103181>; 'Myanmar facing 'public health disaster' as children as young as 9 get hooked on meth', *Straits Times*, 20 Feb. 2019, <https://www.straitstimes.com/asia/se-asia/myanmar-facing-public-health-disaster-as-children-as-young-as-9-get-hooked-on-meth> (last accessed 8 Aug. 2021).

25 Pierre-Arnaud Chouvy, *Opium: Uncovering the politics of the poppy* (Boston: Harvard University Press, 2010); Paul Cohen, 'Symbolic dimensions of the anti-opium campaign in Laos', *Australian Journal of Anthropology* 24, 2 (2013): 177–92; Philip Keefer, Norman Loayza and Rodrigo R. Soares, 'Drug prohibition and developing countries: Uncertain benefits, certain costs', in *Innocent bystanders: Developing countries and the war on drugs*, ed. Philip Keefer and Norman Loayza (New York: Palgrave Macmillan; World Bank, 2010), pp. 9–59; David Mansfield and Adam Pain, 'Counter-narcotics in Afghanistan: The failure of success?', Afghanistan Research and Evaluation Unit (AREU), Briefing Paper Series, Dec. 2008, https://www.ecoi.net/en/file/local/1064797/1002_1229784757_counter-narcotics-areu.pdf (last accessed on 8 Dec. 2020).

26 Dan et al., 'The *Pat Jasan* drug eradication social movement', pp. 3–4; Alfred W. McCoy, 'The stimulus of prohibition: A critical history of the global narcotics trade', in *Dangerous harvest: Drug plants and the transformation of indigenous landscapes*, ed. Michael K. Steinberg, Joseph J. Hobbs and Kent Mathewson (New York: Oxford University Press, 2004), pp. 24–111; Peter Reuter, 'The mobility of drug trafficking', in *Ending the drug wars: Report of LSE Expert Group on the Economics of Drug Policy* (London: London School of Economics and Political Science, 2014), pp. 33–40, <https://www>.

attention to how punitive responses to drug use that focus on incarceration and concentrate on policing drugs rather than providing treatment and support services do little to address drug use but generate further harm.²⁷

The harm reduction literature emphasises the importance of understanding and addressing the broader structural forces that shape the ‘risk environment’ in which people experience drug harms.²⁸ Within such debates, the ‘risk environment’ framework has been conceived as a way to shift ‘the responsibility for drug harm, and the focus of harm reducing actions, from individuals alone to include the social and political institutions which have a role in harm production’.²⁹ This approach has powerful resonance for understanding drug harms in Myanmar’s borderlands, which are so clearly a product of a wider political economy environment in which widespread drug production and selling are embedded within structures of power and modes of accumulation, although drug use often continues to be understood—by PWUD and wider society—as indicative of personal failings, individual weakness and poor character.

The risk environment framework provides an important entry-point for understanding drivers of drug harms, although it also reveals the profound challenges that face drug mitigation efforts. None of the structural factors that drive drug harms in Myanmar’s borderlands are likely to change in the near future and, in light of the February 2021 military coup, will most probably worsen. There exists a stark gulf between models of harm reduction best practices to reduce risk and the scope to implement such models or to address the structural drivers of drug harms. It is imperative to understand the coping strategies that families and communities have developed in the face of severe structural constraints, and how these are based on existing social norms and practices. As Ardeth Maung Thawngmung argues in her study on the coping strategies that poor communities in Myanmar deploy to mitigate economic hardship, ‘grassroots practices ... have emerged and evolved in response to constraints and opportunities imposed by specific political and economic conditions’, although these are often overlooked because of ‘a restricted view of politics’ that is ‘limited to activities initiated by national governments’.³⁰

Exploring grassroots practices shaping responses to drug use provides three important insights, which the rest of this article will now explore. First, it offers scope to better understand the decisions that families make in response to drug harms (even when these responses appear problematic or counter-productive).

lse.ac.uk/ideas/Assets/Documents/reports/LSE-IDEAS-Ending-the-Drug-Wars.pdf (last accessed 5 Oct. 2020).

27 Jensema and Nang, ‘Found in the dark’, pp. 4–10.

28 Philippe Bourgois, *In search of respect* (Cambridge: Cambridge University Press, 1995); Hilary Pilkington, ‘Beyond “peer pressure”: Rethinking drug use and “youth culture”’, *International Journal of Drug Policy* 18, 3 (2007): 213–24; Tim Rhodes, Merrill Singer, Philippe Bourgois, Samuel R. Friedman and Steffanie A. Strathdee, ‘The social structural production of HIV risk among injecting drug users’, *Social Science & Medicine* 61, 5 (2005): 1026–44; Tim Rhodes, ‘Risk environments and drug harms: A social science for harm reduction approach’, *International Journal of Drug Policy* 20, 3 (2009): 193–201.

29 Rhodes, ‘Risk environments and drug harms’, p. 193.

30 Ardeth Maung Thawngmung, *Everyday economic survival in Myanmar* (Madison: University of Wisconsin Press, 2019).

Second, it reveals how such responses can increase vulnerability of young drug users. Third, it offers a starting point for bridging the disconnect that currently exists between externally imagined visions of harm reduction best practices and local responses to drug issues in order to support better informed, collectively owned and locally appropriate approaches for addressing drug-related harms.

Development, governance and the drug economy

For the past 30 years, drug production and consumption in Shan State have been on the rise. Drugs have been an important part of borderland political economies shaped by the Myanmar military government. Drugs have been incorporated into the Myanmar Army's counter-insurgency campaigns, state consolidation and economic development. In the late 1980s the military regime made ceasefire deals, most notably with Myanmar's strongest EAOs which had splintered from the Communist Party of Burma—the United Wa State Army, Kokang's Myanmar National Democratic Alliance Army and Eastern Shan State's National Democratic Alliance Army—granting these groups the rights to govern self-administration zones and business concessions. These ceasefire groups and the military have built strong business relationships, including in illicit trade and drug production. The Myanmar Army's efforts to secure firmer control over contested regions have also seen the emergence of militia groups whose aspirations vary—some groups are motivated by economic interests and others are motivated by ethno-nationalist ideology; however, most of them have been set up by the military to perform various security and counter-insurgency roles in their respective areas. These groups have become heavily involved in the drug trade across Shan State, and some of them are the most powerful actors shaping the social, political and economic dynamics in the borderlands.

The drug economy plays a vital role in shaping borderland development. While most communities in Shan State continue to face severe economic hardship, border towns, notably Muse and Tachileik, have experienced increasing wealth and prosperity. Both border regions have become boomtowns because of a vast expansion in both licit and illicit border trade since the early 1990s and have also become key sites of investment, much of it generated from the drug trade. Both border towns have become business hubs for the EAO groups and military-backed militias, and a transit point for licit and illicit goods to neighbouring countries and international markets as well as money laundering zones. These EAOs and military-backed militia groups do not only spend their drug income on arms and strengthening their manpower but also invest (launder) the money in other businesses such as casinos, hotels, petrol stations, gold shops and construction companies.³¹ Likewise, as Jinhee Lim and Taekyoon Kim argue, in Shan State, borderland elites strategically accumulated wealth by building conglomerates such as Asia World Co., Ltd owned by Lo Hsing Han, and the Hong Pang Group founded by Wei Hseuh-Long and Wei Hseuh-Kang, notorious for their involvement in the drug trade.³² The borderlands became a safe haven for

31 Meehan et al., 'Development zones', pp. 145–62.

32 Jinhee Lim and Taekyoon Kim, 'Bringing drugs into light: Embedded governance and opium production in Myanmar's Shan State', *Oxford Development Studies* 49, 2 (2021): 105–18.

operating ‘dark grey business’,³³ hence many EAOs and militias run their businesses and activities in the border towns.

In Tachileik, for instance, there are a lot of casinos, most of which are owned by militias. They are very influential, both politically and economically. This has ensured that their activities—including their involvement in drug production, cross-border trafficking and local selling—have largely gone unchallenged. Consequently, drugs have become more easily accessible throughout Shan State. Youth drug use has become widespread across various settings, including nightlife venues, at home, or even on farms and by the roadside.

During the 2000s, Tachileik, which is situated within what is known as the Golden Triangle, has become the main export route for illicit drugs to neighbouring countries. The city’s residents have witnessed how the drug business has contributed to the town’s development. In addition, local residents reveal that Tachileik border’s economy is good or bad depending on how well the drug business is doing. Drugs such as ICE, Ecstasy and Happy Water³⁴ are widely available, especially in nightclubs. As one CSO worker reflected,

You could tell who is using drugs or who is not by looking at the way they dance and talk. Most of the people going to clubs or using drugs are young people. Both male and female youths would use drugs, both Meth and Ice. In Tachileik drugs are sold even from people’s houses. They are also available in restaurants and KTV [bars].³⁵

The severity of drug issues is not unique to Tachileik, but is also prevalent in another border town, Muse, which is the backbone of Myanmar’s trade with China,³⁶ and shares a border with Ruili, the Chinese town across the border. Both Ruili and Muse also share some characteristics in common such as the fact that many powerful militia groups operate businesses there. From interviews conducted by the authors and participant observation, it appears that drugs are more visible in Muse than in Tachileik. According to local residents, the selling and buying of drugs, especially methamphetamine and heroin, is conducted quite openly like selling vegetables at the market.

In Muse, what I have learned is that many young people use drugs because they are depressed and some of them become drug addicts because they are curious. Especially young people would do drugs because their friends are doing [this], and they want to show that they have also tried and do it in order to fit in. After trying [drugs] several

33 The term ‘dark grey business’ refers to the fact that businesses in this area are concessional deals and operated by military elites, cronies, militias and border guard forces. Major businesses are related to illicit activities and are illegal but they operate openly. For example, the casinos, hotels, gas stations, and gold shops are used for money laundering.

34 Happy Water is a kind of mixed liquid containing methamphetamine, amphetamine, and ketamine. Locally known as ‘Happy Wor’.

35 Interview with female, aged 31, CSO worker in Taunggyi Township.

36 Muse is Myanmar’s most significant border development zone, handling more than 80% of licit transnational trade between Myanmar and China. For example, the official border trade through Muse topped US\$3.36 billion in 2015. Myawaddy, Thailand’s second-largest commercial border site, has a volume of US\$411 million. Xiangming Chen, ‘China’s key cities: From local places to global players’, *European Financial Review*, 1 Dec. 2015, <https://worldfinancialreview.com/chinas-key-cities-from-local-places-to-global-players/> (last accessed 28 Oct. 2023).

times, they become drug addicts. Nowadays, not only young men but also women are using drugs. Young women would use drugs because they want to be slim and to be able to sing better. There are even cases where the entire family are drug addicts.³⁷

Muse is a transit town for goods imported from and exported to China, but as noted, is also a business hub for militia groups and EAOs. The militias own petrol stations, hotels, casinos and KTV (Karaoke) bars. Furthermore, the militias are supported by the Myanmar Army, giving them 'extralegal' possibilities to trade in illicit narcotics. A militia leader bluntly revealed that 'All the gun holders are involved in drugs, direct or indirect, little or small. Otherwise, they cannot survive.'³⁸ An EAO liaison officer in Keng Tung echoed these sentiments, stating that 'If I can speak frankly, all are involved in drugs. Those who were in power, all are involved with drugs.'³⁹ According to informants, some militia groups directly grow opium while others do not, but collect taxes from opium farmers instead. Also, some militia groups produce methamphetamine, others do not, but they provide protection and allow the illicit business to be produced in territories under the militia's control. Furthermore, the militias make use of their 'good relations' with military authorities to expand their protection to small dealers. In this way, drugs have become widespread in this region.

The production of drugs, especially of methamphetamine, has dramatically increased since the early 2000s⁴⁰ and has skyrocketed after the formal peace process initiated in 2010 and the Nationwide Ceasefire Agreement.⁴¹ Seizures of methamphetamine—both yaba and crystal meth—have increased significantly in recent years. For example, in January 2018, the Myanmar army and police raided an abandoned house in Kutkai Township in northern Shan State, seizing 30 million yaba pills, 1750 kg of crystal meth, more than 500 kg of heroin and 200 kg of caffeine powder.⁴² In March 2019, the Myanmar army and police raided and seized one of the largest ever hauls of drugs at the Kong Kha militia base. The seized drug haul included almost 43 million methamphetamine pills, as well as heroin and Ice.⁴³ Shan State is now known as the centre of drug production in Southeast Asia and produces at least 90 per cent of Myanmar's entire drug output.⁴⁴

Unsurprisingly, young people who live amid violence, armed conflict and widespread drug production are vulnerable to drug abuse, while labour migration

37 Interview with female, aged 31, CSO worker in Taunggyi Township.

38 Interview with male, aged 60, militia leader in southern Shan State.

39 Interview with male, aged 47, EAO liaison officer in Keng Tung Township.

40 AIPA, 'Myanmar country report', pp. 5–6; UNODC, 'Myanmar Opium Survey 2005', pp. 7–8, p. 13.

41 ICG, 'Fire and ice', pp. 17–18; Karen Human Rights Group (KHRG), 'Chapter: Drug production, use and the social impacts in Southeast Myanmar since the January 2012 ceasefire', *KHRG.org*, 13 May 2014, https://www.khrg.org/sites/khrg.org/files/chapter_-_drug_production_use_and_social_impacts_-_english.pdf (last accessed 4 Nov. 2020).

42 ICG, 'Fire and ice', p. 6.

43 Hla Hla Htay, '\$100m in drugs seized in Myanmar raids: Haul of 43 million meth tablets in "biggest seizure of year"', *Asia Times*, 7 Mar. 2020, <https://asiatimes.com/2020/03/100m-in-drugs-seized-in-myanmar-raids> (last accessed 7 Dec. 2020).

44 United Nations Office on Drug and Crime, 'Myanmar opium survey 2018: Cultivation, production and implications,' UNODC Regional Office for Southeast Asia and the Pacific, 2018, https://www.unodc.org/documents/crop-monitoring/Myanmar/Myanmar_Opium_Survey_2018-web.pdf (last accessed 10 Oct. 2020).

associated with economic transition results in the formation of new communities in border towns where informal economies and drug use are often prevalent.⁴⁵ Drug use appears to have increased markedly within the last decade (although publicly available accurate data does not exist) and is perceived by many to have become more normalised in everyday society. This is reflected in the testimony of a young man in his twenties in Taunggyi Township:

Nowadays, the use of drugs is also increasingly taking place amongst young women of around only 16–17–18. After they finish their high school, they are less controlled by their parents. Those young ladies who are hanging out more with male friends are more prone to the use of drugs.⁴⁶

Agricultural activity is also a context where young people come into contact with drug use as the agrarian economy continues to be the primary and main working sector for the majority in Shan State. Farming is physically challenging and monotonous, especially as levels of mechanisation are low, so they require energy to work. Many young people are self-employed, working on their own farms and rice fields. Many of them choose to use drugs to enable them to work longer hours, as the drugs costs less than employing other labourers to work with them.⁴⁷

Though there are many factors that make young people prone to harmful drug use such as peer pressure, family background, lack of education (including on drugs), hard labour and financial conditions,⁴⁸ low income and unemployment in the inner townships⁴⁹ (rural and central Shan State) appear to be the key factor for drug taking in these areas. Low wages and unemployment lead to rural young people having no choice but to migrate to big cities and border towns to seek new opportunities. However, it is in the cities and border towns that they come into contact with drugs, while away from family oversight or support. For example, the majority of young people in Eastern Shan State from Keng Tung, and Mong Ywang move to Tachileik to find work. They find jobs in the service sector at hotels, restaurants, KTV bars, casinos and Thai-owned online-gambling companies. These jobs also create new vulnerabilities for young people. They are at risk from widespread drug use, the sex trade and human trafficking. Many young people have become victims of the sex trade and illicit drug economy.⁵⁰ Also, at these workplaces, employers often provide drugs so that staff can work longer hours. However, when the teenage employees

45 Dan et al., 'The *Pat Jasan* drug eradication social movement', pp. 3–4; Patrick Meehan, Mandy Sadan, Sai Aung Hla, Sai Kham Phu and Nang Muai Oo, 'Young people's everyday pathways into drug harms in Shan State, Myanmar', *Third World Quarterly Journal* 43, 11 (2022): 1–19.

46 Interview with male, aged 28, PWUD, Taunggyi Township.

47 In 2020, daily wages in Shan State were about K5,000–7,000. Yaba costs about K200–500 per tablet.

48 Ministry of Health and Sport, 'National Strategic Framework on Health and Drug: A Comprehensive Approach to Address Health, Social and Legal Consequences of Drug Use in Myanmar', 2020, <https://www.mohs.gov.mm/page/13766> (last accessed 6 Dec. 2020); Nader Navabi, Afshin Asadi and Nouzar Nakhae, 'Impact of drug abuse on family quality of life', *Addict Health* 9, 2 (2017): 118–19.

49 Inner townships here refer to central Shan State and the townships which do not share a border with neighbouring countries, for example, Keng Tung, Mong Peng, Kar Li and Kung Hing townships.

50 Saw Yu Mon, Thu Nandar Saw, Junko Yasuoka, Nyein Chan, Nang Pann Ei Kham, Wint Khine, Su Myat Cho and Masamine Jimba, 'Gender difference in early initiation of methamphetamine use among current methamphetamine users in Muse, northern Shan State, Myanmar', *Harm Reduction Journal* 14, 1 (2017): 21; *Straits Times*, 'Myanmar facing "public health disaster"', p. 1.

begin to suffer drug-related health or behavioural problems they are sacked by their employers. The employer can always find teenagers to replace those addicted to drugs. There is a vast discrepancy between the ease of accessing drugs and the difficulty in accessing medical and other necessary support or services.⁵¹

Thus, both the youth and communities are hampered in their efforts to mobilise drug-related awareness activities or to stem drug-selling networks because these activities challenge the interests of influential and powerful groups. Families and communities are fearful of mobilising against drugs in cities where personal security is poor and those responsible for policing are often linked to the drug economy.

Informal coping strategies

Efforts to address drug issues have been severely hampered by the difficulties surrounding social mobilisation. This is a region where sovereignty is highly fragmented coupled with a low concern for drug harms on the part of the military government, which has primarily used the drug economy as a means to finance state consolidation and counter-insurgency. Therefore, the government's limited campaigns to dismantle the narcotics trade in recent decades have been inefficient and ineffectual.⁵²

Ameliorating the drug problem has become a desperately important issue for many poor rural families and communities experiencing hardship due to the predatory activities of Myanmar's military government and its proxy forces. There has been a lack of support for social welfare services, and communities have had to respond to drug issues informally themselves. They have deployed coping strategies through existing social norms and practices. As Thawngmung writes, these practices are 'socially shared rules that are created, communicated, and enforced outside officially sanctioned channels' and these have been used or developed because 'state policies and legislative and electoral rules are incomplete, cumbersome, and costly to change'.⁵³ This article explores how norms and practices have shaped responses to the drug problem among Shan communities amidst wider structural, environmental and institutional challenges.

Long-standing distrust of state authority

It should be noted that Shan families and communities are unwilling to seek assistance from the government for drug treatment due to their long-standing distrust of state authority. Deep-seated distrust of the central government is rooted in the ways in which the government has long ignored and failed to invest in the welfare needs of the population, and has responded to drug issues through punishment in ways that exacerbate insecurity, exploitation and discrimination.

Although widespread drug use is a critical issue in Shan State, the government's response has been very limited—health and education services are woefully underfunded. It is reported that there are 11 government-run drug rehabilitation centres in Myanmar and only 9 of them are actively providing services.⁵⁴ In Shan State,

51 Interview with female, aged 30, PWUD's sister in Tachileik Township.

52 Jensema and Nang, 'Found in the dark', pp. 4–11.

53 Thawngmung, *Everyday economic survival in Myanmar*, p. 9.

54 'Drug rehab center reopened for drug addicts', *Kantarawaddy Times*, 15 July 2020, <https://www.bnionline.net/en/news/drug-rehab-center-reopened-drug-addicts> (last accessed 4 Nov. 2020).

there are only two rehabilitation centres—for a region with a population of more than 5 million people; one in Kutkhai Township in northern Shan State and one in Phekon Township in southern Shan State.⁵⁵ The quality of treatment is deficient because it is not tailored to support individual needs but is still expensive. Drug treatment is primarily restricted to detoxification and rarely do drug users receive drug rehabilitation treatment or support after leaving treatment centres. Field research data shows that the majority of young people who seek treatment go back to using drugs when they return to the community. A mother of a PWUD shared her experiences of using government drug treatment services several times in the hope her son could be cured:

I continue admitting him to the hospital so that he can stop using drugs. It's very expensive to be hospitalised ... We spent around K1.5 million (approx. US\$1,100) per treatment for his hospitalisation fee. However, he falls back to using drugs not long after he is discharged from hospital.⁵⁶

Data from families interviewed for this research showed that, in many areas across Shan State, responses by local state authorities—police and administrators—to drug issues are often designed in a repressive and violent way and focus on enforcement by arresting or even beating drug users and forcing them to go to treatment centres or even prison. Distrust of the state government has increased due to its ineffective and insincere responses to addressing drug problems. For example, in 2012, the Restoration Council of Shan State/Shan State Army (RCSS/SSA), an EAO that had reached a ceasefire with the government in 2011 signed an agreement with the military government and United Nations Office on Drugs and Crime (UNODC) to cooperate on a drug eradication programme. Both sides had already agreed to cooperate on drug issues in the Bilateral Ceasefire Agreements (BCAs) and reiterated this commitment in the 2015 Nationwide Ceasefire Agreement (NCA). However, in the years that followed efforts at cooperation were never implemented. The data from the interviews conducted in 2018–20 suggests that the state government was not willing to collaborate with the local community in dealing with drug issues. An excerpt from an interviewee described how the state authorities tackle the drug problem.

There are drug dealers, but the police arrest only small dealers. People also do not dare to inform [on the dealers] to the police. If we inform the police, the drug dealers would fight us. Sometimes, the police arrest drug users. They are fined and released. They also only arrested the rich kids to fine them.⁵⁷

Living within these kinds of local governance systems, many families thus opt not to seek support from state services. There are other reasons; for instance, they are afraid that they will be in trouble and that the criminalisation of drug use would heavily

55 Nang Hseng Phoo, 'There are two rehabilitation centres in Shan State: One is in Kutkhai Township and another one is in Hpekon Township', Shan Herald Agency for News, 7 Aug. 2017, <https://www.bnionline.net/en/news/shan-state/item/3337-drug-rehab-center-to-relocate-to-lashio-due-to-security-concerns.html> (last accessed 8 Oct. 2020).

56 Interview with female, aged 52, mother of PWUD, Taunggyi Township.

57 Interview with female, aged 50, family member of a PWUD, Hin Tek village tract, Thai–Myanmar border.

impact on drug users themselves and their families. When their children are charged with drug-related issues, they have to hire a lawyer to deal with the case, which is very expensive. Moreover, many Shan people do not speak Burmese and so are not aware of government treatment centres.

Drugs are a taboo in Shan society

There is a strong desire to contain drug problems within the family. Families try to conceal and resolve drug issues themselves without recourse to external agencies. This is because of the commonly-held notion in Shan society that drugs are a taboo subject—PWUD are perceived as bad, weak and failures, and drug use is viewed as shameful and degrading in Shan society. Therefore, families view drug dependency as an issue they have to deal with by themselves. This has become a common practice among Shan communities. Data from families interviewed in this research showed that, in some cases, families locked up their children in their rooms with chains. An official from an EAO's treatment centre in Eastern Shan State reflected on the state of some of the young people who had been sent to the centre:

Their addiction was so serious that in some of the cases, their parents would tie them up before they could seek help from the authorities, whom they have no idea where and how to approach. Finally, they find their way to us and get the patient admitted to our rehabilitation centre. Once they get here, you can even see purulent discharge from the wounds that the patients' got from being tied around their wrists and hands.⁵⁸

Despite the stigmatisation of and discrimination against drug users, communities continue to make broader efforts to tackle the problem themselves, such as by forming sports, dancing and education groups. All or most of these support groups are informally established and self-funded. Generally, they turn out to be ineffective and unsustainable. Nevertheless, some families felt these support mechanisms are helpful. But PWUD still feel that they are excluded from society or treated differently, causing a loss of self-esteem, especially for women. Responses from PWUD we interviewed like this female journalist in her mid-twenties epitomise these concerns:

I also think that young people who are addicted to drugs should not be abandoned and left like this. Sometimes we can see young people who are dying by the roadside due to a drug overdose. In some cases, the family abandons their drug addict son. So, we need some kinds of organisation that would help young people with the rehabilitation process and help raise awareness on the issue of drugs in society.⁵⁹

Desperation from dealing with young drug users and the heavy burden on families and communities have led them to find other solutions. The Shan community largely opts to send its youth away from an environment where narcotics is widely available, believing that this would help their sons and daughters avoid engaging with drugs and have a better life.

58 Interview with male, aged 47, EAO liaison officer, Keng Tung Township.

59 Interview with female, aged 28, journalist, Taunggyi Township.

Norms of migration in search of a better life

While elites and wealthier households in urban areas have enjoyed rising living standards, the majority of rural families continue to live their everyday lives in an environment of poverty, inequality, armed conflict and coercive systems of rule in which powerful drugs are cheap and readily available. Families believe that if their children remained in the local environment where drugs are easily available, surrounded by the same friendship networks, and experiencing the continued lack of decent jobs, then they would never be able to stop using drugs. Thus, they choose to send their children to new environments in the hope that this would enable them to stop using. Many parents and guardians have sent their sons and daughters to big cities. This is a common practice as reflected by an interviewee whose brothers developed drug problems:

Sometimes, there was nothing to eat at my house. If our neighbours lost anything, they would come and search my house to see whether my younger brothers had stolen anything from them. We did not know whether they had stolen [anything] or not. At the time, I was depressed and stressed because of my brothers' situation. Sometimes, I thought we were not human like others. So, I decided to send my youngest brother to Taunggyi. If he could live far away from the situation, maybe he could avoid drugs.⁶⁰

In many cases, families and the parents of PWUD opt to send their sons and daughters to neighbouring countries—mainly China and Thailand—in the hope that this would enable them to avoid drugs, have a good job and live a better life. Migration for work—through networks or connections with friends and relatives who are working and living across the border—follows a long-standing Shan livelihood practice, which has now been adopted as a way to also try to protect the youth from drug harm. As one interviewee reflected, they hope that if children go to another country, drugs will be ‘out of sight, out of mind’.⁶¹

Engagement with armed organisations

Rather than seeking support from the state government for drug treatment, many Shan families and communities choose to send their sons and daughters to treatment centres organised by EAOs. This is rooted in a long history of engagement between communities and EAOs that has developed over decades of armed conflict against the central government. Communities and EAOs interact with each other through taxation, recruitment and provision of goods and services. As they share ties of ethnicity, culture, and religion and the same long-standing political grievances, it is said that it is a citizen's duty to serve in the EAO. Many young men join as volunteers, however, forced conscription is still practised. Communities are also expected to pay taxes to EAOs as a contribution to these organisations' political goals—sometimes termed a ‘revolution fee’. In return, it is expected that some of the tax revenues collected are used for providing protection and security to the community. Some of the EAOs have also sought to implement initiatives to demonstrate their sincerity to the communities they claim to represent. For example, the largest Shan EAO group—the

60 Interview with female, aged 30, PWUD's sister, Keng Tung Township.

61 Interview with male, aged 40, CSO worker, Taunggyi Township.

RCSS/SSA—has a strong anti-drug policy and set up a drug eradication programme which provides drug treatment at its main bases across Shan State to show their commitment to tackling drug problems and to respond to claims of their own involvement in the drug business. The RCSS/SSA has set up liaison offices in cities across Shan State through which they have engaged with Shan communities regarding drug issues. This has encouraged families of PWUD to seek assistance for drug treatment from RCSS/SSA treatment centres because of the latter's long-standing links with local communities and because there are no other treatment services available in most parts of Shan State. According to data collected between 2018 and 2020, the number of people sent to treatment centres operated by the RCSS/SSA has been increasing each year. In one treatment centre close to the Thai border, an RCSS/SSA liaison officer explained to the authors that less than 100 people joined the treatment in 2016. However, the number rapidly increased in 2018 with more than 400 people sent to the centre, and in 2019, more than 500 people came for treatment.⁶²

The treatment methods used at these EAO treatment centres take a military approach. Still, according to many interviews, families and communities have continued to send their sons and daughters to these treatment centres even though they know their children will face a difficult environment because they feel it is somehow effective and the only option that can help solve their problem. One woman who sent her younger brother to an EAO treatment centre expressed her feelings:

With the help of doctors, I also tried many times to help stop my brother from using drugs, but it was not successful. He kept falling back to using drugs, and each time his condition became serious. The kind of drug that he used was a mixture of opium with cough medicine. Finally, I decided to send him to Loi Tai Leng [the HQ of RCSS/SSA] to serve as a soldier there [to help him stop using drugs].⁶³

Such informal coping strategies deployed by families and communities continue to be problematic. These kinds of responses have not yet solved youth drug use issues; rather they have significantly increased vulnerability for young drug users.

New risks and vulnerabilities

Despite their best intentions, the responses to drug use by families and communities create a vicious cycle of violence and vulnerability for young PWUD. Families and communities continue to encounter a range of challenges in their efforts to tackle drug use because the wider structural risk environment continues to exacerbate the inequalities and insecurities that fuel the drug problem in Shan State. The majority of Shan still live in poverty and cannot afford to send their sons and daughters to treatment centres in the big cities. They have limited access to information as most of them do not speak or read the Myanmar language. Following a long-standing practice of work migration, young people are sent to border towns or across borders, in the hope that moving out of their home environment and having opportunities to earn an income will enable them to avoid drugs. Young Shan men generally work

62 Interview with male, aged 47, EAO liaison officer in Keng Tung Township.

63 Interview with female, aged 28, Taunggyi Township.

as day labourers or construction workers as well as in low-end jobs in the entertainment industry. However, drugs are easy to access in all these environments and are sometimes even provided by employers. There is a widespread culture of taking drugs in these kinds of jobs to work longer hours and earn more,⁶⁴ while others end up becoming small-scale drug sellers as a way to generate further income or to ensure a steady supply of drugs for themselves. The interviews with a sister of a drug user in Tachileik Township in eastern Shan State illustrated how her younger brother got into the drug business:

He was addicted since 2007–08. At the time, he sold and used. In the beginning, he worked for a businessman. They gave away drugs that were free to use. They also smuggled drugs. At the time, it was easy to make money. When I asked for money, say THB500–1,000, he could give it to me immediately. Later on, [after he became addicted] he even had no money to buy drugs. So, he stole things in the house to sell [to get money to buy] drugs.⁶⁵

Teenage girls and young women face similar experiences to their male counterparts. Their jobs are almost always in factories, shops and restaurants, sex work (directly or indirectly), in the entertainment industry (bars, pubs and KTV lounges), or as domestic workers—cleaning and caretaking. Sexual abuse was commonly reported among young women, particularly among those involved in sex work and domestic service.⁶⁶

The vulnerability to exploitation that young people face in big cities and border towns exacerbates rather than mitigates the risks that they face and demonstrates the ineffectiveness of the kinds of responses that families across Shan State have tried to mobilise in response to worsening youth drug use. These coping mechanisms have invariably failed to reduce the enormous strain on families created by drug harms, and illustrate the need for government action to address the structural forces that generate risk environments in which young people live and work. However, such government action has yet to materialise, and seems increasingly unlikely amidst the worsening political crisis that has engulfed Myanmar since the February 2021 military coup.

Poor rural youth who face financial insecurity due to unemployment also migrate further afield, primarily to neighbouring China and Thailand—in the hope of finding economic opportunities. China's rapidly growing border towns attract unskilled irregular and regular migrant workers from Myanmar. However, the majority of these young migrant workers end up working for low wages in difficult and dangerous environments. The Chinese government still has not taken a strong stance in protecting the rights of migrant workers. A Shan youth working in China shared his experience of job exploitation and discrimination by local authorities:

64 *Straits Times*, 'Myanmar facing "public health disaster"', p. 1.

65 Interview with female, aged 30, PWUD's sister, Tachileik Township.

66 Therese M. Caouette, 'Small dreams beyond reach: The lives of migrant children and youth along the borders of China, Myanmar and Thailand', Save the Children, 2001, <https://resourcecentre.savethechildren.net/pdf/2987.pdf> (last accessed 20 Sept. 2020); Kelli Rogers, 'A Kachin ceasefire could help end the sale of Burmese women and girls, experts say', *Devex.com*, 10 Dec. 2018, <https://www.devex.com/news/a-kachin-ceasefire-could-help-end-the-sale-of-burmese-women-and-girls-experts-say-93982> (last accessed 8 Aug. 2021); *Straits Times*, 'Myanmar facing "public health disaster"', p. 1.

I no longer work in the fruit business. Only my brother still works there because I had a bitter experience with the Chinese authorities. Once, when I scanned my finger at the gate, the Chinese authority said I looked like a murderer. I said I've never committed a crime. If I looked like him, could they show me the picture of the murderer? They didn't show it, they instead scolded me by telling me to 'shut up and stand still'. They really oppressed the Myanmar people, so I did not want to work in China.⁶⁷

In addition to the risks faced by youth who migrate, our research shows that young people who are sent by their families to EAO treatment centres also experience new forms of vulnerability and harm.⁶⁸ Drug users are treated with a military-style regime including forcing them to go 'cold turkey', which creates risks of adverse physical and mental consequences from the stresses associated with a combination of hard physical training and sudden drug withdrawal. Living conditions are poor, overcrowded and insecure, while drug users often have their legs put in chains to ensure they do not run away. If they disobey orders or experience loss of control as a result of withdrawal symptoms, they are often beaten. The rules set out in one of the EAO treatment programmes state that the patients must remain in the programme for five years, during which time they are not allowed to return to their homes.⁶⁹ The following interview illustrates the perspective of a mother whose son is being treated at an EAO treatment centre:

I know, it is suffering, but I can do nothing. If I take no action, if I die, he would live with relatives. Living with relatives is unlike living with parents. When his father passed away, we asked for permission for him to come back to attend the funeral, but he was not allowed to come back. I wanted him to ordain⁷⁰ for his father. We have only one son, that's why we wanted him to ordain for his father.⁷¹

The mothers of PWUD feel guilty and pained by their decision to send their sons and daughters to EAO treatment centres. One of the mothers shared her experiences with the authors while she was visiting her son at an EAO treatment camp about the struggles her family has gone through:

I met him yesterday. He came back from the jungle. He brought some herbs. He told me, take these herbs for my father. Take these herbs, boil them and take the water for my father to shower. Then, your grandmother told him that 'Your father has died. He died two months ago.' Then he was weeping. I could not come and tell him. He did not know. So, he could not go and attend the funeral.⁷²

67 Interview with male, aged 22, truck driver in Muse.

68 Other non-state actors or EAOs and militia groups use similar approaches such as 'cold turkey' and chaining drug users' legs. This research only focuses on the RCSS/SSA drug treatment programme among the Shan community.

69 The RCSS/SSA treatment centre policy requires the drug user and family members to sign an agreement for the treatment.

70 In the Theravada Buddhist practice, a son or male relative has to ordain as a novice monk to honour family members or relatives who have passed away in the belief that souls can be given extra merit.

71 Interview with female, aged 50, mother of a PWUD, Tachileik Township.

72 Interview with female, aged 60, mother of a PWUD who was visiting her son at the EAO treatment centre in Loi Kaw Wan, Shan State.

Thus, being sent to the EAO treatment camp can have serious social, emotional, and psychological impacts on young people and family members. One EAO treatment officer admitted to the authors that the treatment is not addressing the root of the drug problem, conceding:

What we are doing for young drug addicts is only a band-aid treatment. It is not a cure. But we will need lots of band-aids until we can reach a political solution with the government, especially with the Tatmadaw [Myanmar military].⁷³

Conclusion

The drug business makes large profits for certain groups, and high volumes of production combined with major socioeconomic transformations have led to drugs becoming widespread throughout Shan State and borderlands in neighbouring countries. Inevitably, the primary victims are local communities, families, and vulnerable individuals. Despite this, there are very limited resources available for tackling drug-related harms, and consequently, the community's responses are ineffective and inadequate. This has led communities, families, and individuals to search for their own solutions. However, these solutions have caused Shan youth to face new risks and vulnerabilities, which have contributed to a vicious cycle of harms related to drug use.

Given the complexity of the drug problem and the current lack of resources and state support, finding solutions to this issue will be extremely difficult. However, the state must take responsibility for supporting youth groups and community activities, especially in areas of health, education and employment. Current policing approaches should also be reformed, as drug users are being heavily criminalised, which brings many negative impacts while failing to tackle the drug issue.

Another possibility is for the government to collaborate with EAOs to strengthen the reach and quality of treatment services for PWUD. The so-called 'Interim Arrangements' of the 2015 Nationwide Ceasefire Agreement (NCA) created opportunities for such collaboration on drug issues; however, such collaboration has yet to materialise, and appears ever more unlikely following the 2021 military coup.

Given the realities of the situation in Shan State, these findings have three significant implications. First, this research draws attention to the important role that international organisations could play in providing support to PWUD and their families in light of the severe limitations of state treatment services. Many families have no other option but to use EAO treatment services, despite knowing that the treatment itself is harsh and poorly conducted. Therefore, international organisations should search for ways to provide technical support or expertise and facilities for EAO drug rehabilitation services in light of the extensive networks that these centres already have with drug-affected communities throughout Shan State. Operating through existing EAO networks offers greater scope to reach marginalised populations most in need of support, and who are unlikely to access the kinds of services that international organisations could otherwise offer in urban centres. Moreover, international organisations could use their influence and neutrality to mediate and unify the existing network

73 Interview with male, aged 50, EAO drug treatment officer at Loi Kaw Wan, RCSS/SSA controlled area.

of uncoordinated treatment services provided by state and non-state actors in order to make such services more effective and accessible.

Second, in light of the fact that EAOs acknowledge that their current treatment services are little more than a band-aid, they should review their treatment practices and cooperate with professional and international organisations to improve their drug rehabilitation programmes. For example, EAOs could avoid hardline approaches or violent methods, which often have adverse moral and physical impacts on both drug users and their communities.

Third, considering that drug users are seen as bad people, failures and criminals in Shan society, CSOs should work to change these perceptions by promoting the rights of drug users and greater understanding of the challenges they face. CSOs should empower PWUD and communities to advocate drug users' rights to policy-makers and targeted stakeholders (especially the Ministry of Social Welfare and Sport, Ministry of Health, EAOs) so that they are able to access proper treatment, and are treated as patients, and so that they have greater scope to re-integrate into society after treatment. This could include working with drug users to establish new drug user groups—or strengthening existing ones—to ensure their voices are heard so that they have greater scope to influence stakeholders in the design and implementation of treatment services. These forms of mobilisation could also offer an important mechanism through which to address the stigma that surrounds drug use and to support drug users to find new ways to overcome the vulnerabilities they face.