

The Akha and Social Suffering:
The Unintended Consequences of
International and National Policies
in Northern Laos

Paul T. Cohen

บทคัดย่อ

บทความนี้ตั้งอยู่บนความเชื่อว่าการศึกษากับสุขภาพไม่ควรจะจำกัดเฉพาะการศึกษาโรคในมิติทางกายภาพเท่านั้น หากควรพิจารณามิติทางจิตใจและความเป็นอยู่ดีทางสังคมร่วมด้วย การศึกษาสุขภาพในความหมายกว้างนี้สะท้อนอย่างชัดเจนในทฤษฎีความทุกข์ทางสังคม ซึ่งแสดงถึงพลังทางสังคม เศรษฐกิจและการเมืองที่เกิดขึ้นจากนโยบายของรัฐ (ซึ่งบางครั้งดูเหมือนว่า นโยบายและการพัฒนานั้นจะก่อให้เกิดผลดีต่อประชาชน) ที่ส่งผลทางลบต่อประสบการณ์ร่วมของชุมชนและปัจเจกบุคคล บทความนี้เน้นศึกษาชาวอาข่า 2 อำเภอที่อาศัยอยู่ในประเทศลาวตอนเหนือและศึกษาผลทางลบและประสบการณ์ความทุกข์ทางสังคมที่เกิดจากนโยบายการพัฒนาทั้งในระดับชาติและระดับนานาชาติ เช่น การจำกัดการทำไร่หมุนเวียน นโยบายการย้ายชนกลุ่มน้อยที่อาศัยอยู่ในพื้นที่สูงมาสู่การตั้งถิ่นฐานใหม่ในพื้นที่ราบ และสถานการณ์ความต้องการที่ดินและการลดลงของปริมาณดิน เป็นต้น

คำสำคัญ: ความทุกข์ทางสังคม นโยบายการพัฒนา สุขภาพ ความเป็นอยู่ดีทางสังคม

Abstract

This article is based on the premise that the study of health should not be conned to physical disease, but should also encompass mental and social well-being. This broad, holistic perspective is exemplified in the theory of ‘social suffering’, a theory that explores the harmful impact that socio-political and economic forces (including seemingly benevolent development policies) have on collective and individual experience. The article focuses on the Akha people in two districts of northern Laos, and will investigate the deleterious effects of, and social suffering caused by international and national policies, such as the elimination of shifting cultivation, the resettlement of highland minorities to the lowlands, and opium demand and supply reduction.

Keywords: Social suffering, development policies, health, social well-being.

Preface

Kleinman, Das and Lock argue that ‘social suffering’ is the result of ‘the devastating injuries that social force inflicts on human experience’ (1996:1). Elsewhere Kleinman adds: ‘Suffering, in this anthropological perspective, is the effect of the social violence that social orders – local, national, global – bring to bear on people’ (1996: 226). He notes that this suffering may not only arise from the inequities caused by the unequal distribution and brutal use of economic and political power but ‘also seen in the response to human problems by the institutions of social policy and programs that are in principle organized to ameliorate the problem’ (1996: 226). And elsewhere he and Joan Kleinman add: ‘The starting point of policy makers and program builders needs to be the understanding that they can (and often unwillingly do) do harm’ (1996: 14). The theory of social suffering, as expounded by Kleinman and others, has a close affinity with critical medical anthropology that attempts to synthesize macro-political economy and micro-phenomenological analyses of illness and focuses on the ‘sufferer experience’ (e.g. Scheper-Hughes 1986; Singer 1990).

This paper aims to examine the devastating effects on the human experience of the highland Akha of northern Laos of the global War on Drugs and of the development policies of the Government of Lao PDR (GoL). All these policies may be considered in some ways benign in intention; yet I argue that ideological and policy dogmatism and inflexibility have had the unintended consequence of causing various forms of social suffering for the Akha – economic deprivation, physical disease and collective and personal trauma.

The Akha are speakers of a Tibeto-Burman language. According to Akha legend, they have migrated slowly from Tibet over the past 2,000 years

into southern China and most recently into Burma, northern Thailand and northern Laos. Historically the Akha have depended on swidden agriculture (including opium cultivation for more than a century) and hunting-and-gathering in the highlands. This paper is based on periodic research since 1995¹ in the districts of Muang Sing and Muang Long of the northern province of Luang Namtha. In these two districts the Akha are by far the most populous ethnic group (comprising, in 2008, approximately 60 per cent a total population of just over 62,000) but they have for long been dominated economically and politically by the lowland Tai Lue and Tai Neua. Other highland minorities in the two districts include Hmong, Yao, Muser, Kui and Lanten.

Resettlement: Shifting Cultivation and Focal Sites

Resettlement of highland and lowland populations is by no means a recent phenomenon in Laos. Earlier population movements were a response to war and post-war emergencies and included nearly all lowland and highland ethnic groups. However, since the early 1990s resettlement has become much more subject to ongoing state planning and has been limited to highland groups. This has involved a process of ‘domestication’ of highland populations - increasing sedentariness, cultural integration and state control.

A significant impetus for resettlement of highland populations to the lowlands has been the GoL policy towards shifting (swidden) cultivation for their subsistence which is portrayed negatively as inefficient and unproductive, a major cause of deforestation and soil erosion, and a threat to timber resources as the primary source of government revenue. The policy has had the support of international aid organizations such as the World Bank, the Food and Agriculture Organization of the United Nations (FAO) and

the United Nations Development Programme (UNDP) (Baird and Shoemaker 2007: 873). In 1999 it was estimated that that some 280,000 families or 45 per cent of villages in Laos were dependent on shifting cultivation (Evrard and Goudineau 2004:938). The initial deadline for the elimination of shifting cultivation was the year 2000. In 2001 the Seventh Party Congress postponed the deadline to 2010, with a requirement of 50 per cent reduction by 2005.

The elimination of shifting cultivation has gone hand-in-hand with the GoL's policy of resettling highlanders in or close to the lowlands to pursue more sedentary forms of livelihood, in particular wet-rice agriculture. Actually the GoL rejects the term 'resettlement' and prefers the expression 'chatsan asib khong thi' (the 'establishment of permanent farming conditions' or 'stabilisation of production') (Evrard and Goudineau 2004: 945; Baird and Shoemaker 2007: 876). However, in practice this nearly always involved relocation of highlanders to the lowlands (or along arterial roads leading to the lowlands). The policy of resettlement has been reinforced by the GoL's Focal Site strategy initiated in the early 1990s as part of the government's Rural Development Programme. Focal sites involve the provision of essential services (roads, schools, medical facilities, market places) and the development of wet-rice land and commercial agriculture for relocated populations. In 1998 the GoL announced the establishment of 87 focal sites by 2002, comprising 1,200 villages and 450,000 people (12 per cent of the country's rural population) (Evrard and Goudineau 2004:945). It is noteworthy that international aid agencies (e.g. UNDP, ADB, World Bank) have played a key role in the funding of the Focal Site strategy (Baird and Shoemaker 2007: 875).

In Muang Sing the government's resettlement program resulted in the movement downhill to the edge of the lowland valley of more than half (35

out of 58) Akha villages by the mid 1990s. These ‘lower slope’ villages responded to a combination of pressure from local officials and the enticement of promises of government assistance. A number of these Akha villages were able to claim land and develop wet-rice elds in the Sing valley. However, Muang Sing was exceptional, with a relatively extensive and fertile plain and a low population density (due in part to the political turmoil of the 1960s and consequent exodus of large numbers of Tai Lue lowlanders). By 1999 only 2,965 hectares of wet-rice land had been developed out of a potential of 6,802 hectares (Lyttleton et al. 2004: 23). Elsewhere in Laos there was, and still is, a severe shortage of lowland areas suitable for wet-rice agriculture, with about 80 per cent of the country being hilly or mountainous. This is exaggerated in the northern provinces which have the highest ratio of swidden rice fields (hai) to wet-rice fields (na) (Pheng 1995:13). The limited potential for the development of wet-rice land highlights a major weakness of the GoL’s resettlement and focal site policies. This is highlighted in the case of Muang Long which has a total population roughly equal to neighbouring Muang Sing but only about a quarter of the area of wet-rice land in the small valley (Lyttelton et al. 2004: 25). Yet in 2003 the district authorities had planned to relocate 50 per cent of highland villages (65 out of 122 villages and 6,000 villagers) by 2005 either in the valley along the main road or along the 6 feeder roads. This was to be done with minimal economic assistance to displaced villagers from the local government and with limited prospects of gaining access to wet-rice land.

The War on Drugs: Opium Demand and Supply Reduction

Laos has been the third largest producer of opium in the world with the volume produced reaching an estimated peak of 380 tonnes in 1989 in the northern provinces. Production was still a high 167 tonnes in 2000 but had declined to a mere 9 tonnes in 2007. This substantial reduction was due

to UN collaboration with the GoL in the context of the US-led War on Drugs. For some years the GoL adopted a go-slow policy towards elimination. According to Baird and Shoemaker: ‘Until recently, opium eradication was not a GoL priority, though there was a willingness to institute development programs that would reduce the need for growing opium in upland counties. The GoL stressed that development must come first, before wholesale eradication could be attempted’ (2007: 870). However, increasing pressure from the UN and the US (the major donor to UN drug control programmes) pushed Laos into a more aggressive, “get tough” approach – a reaction of the highly symbolic and emotive nature of the prohibitionist War on Drugs and its obsession with meeting supply reduction targets (Cohen 2006). The United Nations Drug Control Programme (UNDCP), established in 1991, formulated a Comprehensive Drug Control Programme (known as the Masterplan) for Lao PDR for the period 1994-2000. In 1996 the GoL revised its drug control law (Article 135 of the Criminal Code on Drug Trafficking and Possession) and formally prohibited the production of opium.

In Laos the drug war first targeted opium addicts, especially in highland communities that cultivated the drug. In Muang Sing and Muang Long international aid agencies, German Agency for Technical Cooperation (GTZ) and Norwegian Church Aid (NCA) respectively, initiated opium detoxication programmes in 1997, focusing on the Akha which was the most populous ethnic group in both districts and also had the highest rates of addiction (almost 10 per cent of total population, according to a 1995 survey). These detox programmes, held in village schools or makeshift camps, were based on the principles of Community-Based Drug Abuse Control (CBDAC) – a form of drug-use control developed by the Thai-German Highland Development Program in northern Thailand. CB-DAC emphasises grassroots participation, ‘ownership’ of development projects by the

community, and dialogue between the community and development workers (Cohen and Lyttleton 2002; Lyttleton and Cohen 2003). However, in practice these programmes turned out to be quite authoritarian and punitive in a way that was consistent with the hard-line prohibitionist policies of the UN- and US-promoted War on Drugs. Whereas traditionally Akha myths extol the virtues of opium as a panacea for many ills, or at worst a mixed blessing, the village detox sessions demonised opium as an unmitigated evil – a cause of illness, sloth, immorality, and poverty. This new discourse on the evils of opium was accompanied by rigorous forms of social control – pressure on addicts to ‘volunteer’ for detox, regular surveillance of new or detoxed addicts by village leaders or members of youth groups, monetary and other fines for those who relapsed, and even exile of relapsed addicts from the village. Notably Akha village headmen were often crucial intermediaries and surrogates for the policing of communities in their effort to create ‘model’ villages with exemplary opium-free reputations and thus ensure the continuance of development assistance from the foreign aid agencies. In Muang Long this rather punitive detox regime was clearly inconsistent with the programmatic statements of UNDCP-funded Long Alternative Development Project that CBDAC should avoid ‘drugs are dangerous’ messages and that relapse ‘will not be treated as criminal, and punishable by fines or arrests’ (UNDCP 2002: 26).

The campaign to eradicate opium cultivation in Laos came later. The US continued to criticise Laos for its position as the third largest opium producer in the world, despite the fact that the export of opium from the country was minimal compared Burma and Afghanistan (Baird and Shoemaker 2005:18). In 2000 the UNDCP stepped up this pressure by promising the GoL US\$80 million in aid to expedite opium elimination, reflecting the rather obsessive, deadline-oriented thinking of the UN and US prosecutors of the

drug war. In December 2000 the Prime Minister issued Decree 14 mandating the total elimination of opium by 2006 (later altered to 2005). The Masterplan also stipulated the need for ‘gradual elimination’ (UNDCP 2000: 26), though the 2005 deadline required an even shorter period than the quite stringent UN denition of ‘gradual’ (that is, from six to ten years).

In Muang Sing and Muang Long the campaign to eradicate opium took a while to get started. In August 2002 government ofcials raided highland villages to collect stockpiled poppy seeds. The campaign became more threatening and punitive in December 2002 to January 2003 when ofcials spent a month visiting opium-growing villages. They ordered poppy elds to be cut down and imposed nes for non-compliance. The result was a rapid decline in opium cultivation – in Muang Sing from 305 hectares in 2000/2001 season to only 28 hectares in late January 2003 and in Muang Long from 573 hectares to 54 hectares. In the province of Luang Namtha as a whole only 160 hectares remained in March 2003 out of a total of 1,164 hectares of poppy planted in the 2002/2003 season.

One unintended consequence of the opium eradication campaign was the spontaneous and uncontrolled migration of highlanders to the lowlands. In early 2004 the *The Economist* (2004) reported: ‘International NGOs are worried about the humanitarian cost of the war on drugs, which has already caused the displacement of some 25,000 Hmong, Akha, and other tribes from their traditional homes in the mountains to the valleys’. This displacement process is exemplified by events in Muang Sing. Here, as in most highland areas on northern Laos, opium was a key means of exchange for obtaining rice for subsistence, given the generally low yields of swidden rice. The opium eradication campaign and the rapid decline in household opium supplies thus threatened the economic survival of highland

communities and forced them to migrate in search of alternative sources of livelihood. In 2003 alone (between January and April) 338 or 522 in 13 villages, in response to the opium eradication campaign, moved from the highlands to join existing Akha villages in or at the edge of the lowlands or to establish new villages in the lowlands. Out-migration had a snowball effect. As more and more villagers left, the pressure on remaining villagers to follow increased, with the disruption of exchange and kinship ties. By early 2004 one whole highland sub-district had been abandoned except for one village! This uncontrolled migration forced the local district government into a policy reversal – whereas in earlier years they had either encouraged or pressured highlanders to move downhill to or nearer the lowlands, now they desperately tried to halt the mass exodus for fear of creating a depopulated and insecure border with Burma and also of being unable to provide large numbers of migrants with a secure livelihood in the lowlands.²

This process of abandonment of highland villages and migration downhill to the lowlands was accelerated by the lack of adequate alternative development. The rapid elimination of opium cultivation between 2000 and 2005 gave the GoL and international aid organizations little time to introduce substitute crops for opium (and the roads to help market these crops) and other forms of alternative development to ensure a sustainable livelihood in the highlands. Even the Lao Commission for Drug Control (LCDC) and the United Nations Ofce on Drugs and Crime (UNODC) had to acknowledge the crisis that had been created: ‘Laos is at a critical juncture...the fact that opium elimination had outpaced the provision of alternative livelihoods has not improved an already difcult situation’ (LCDC/UNODC 2006). By the 2005 deadline it was estimated that ‘more than 50% of the opium poppy growing communities did not yet have the means or time to develop new cash crops or staple food crops’ (UNODC 2006). This situation compares unfavourably

with the gradualist policy promoted by King Bhumipol in Thailand. Here opium cultivation and trafficking was prohibited in 1959 but eradication did not begin in earnest until the mid 1980s. In the interim about \$US200 million was spent on development work in the highlands by national and international organisations.

A notable development in northern Laos since 2003 has been a boom in rubber cultivation based largely on investment from China. The GoL has embraced rubber enthusiastically as a godsend solution to the problems of shifting cultivation, opium eradication and poverty reduction. Highlanders have generally shared this enthusiasm in their desperate search for alternative sources of income to replace opium as a cash crop. Rubber has also become a symbol of all that is modern and progressive, in contrast to the backwardness and primitiveness of opium. However, international aid organisations (such as GTZ and NCA) are very wary of the rubber boom, at least in its present unregulated, chaotic form. For example, reports (Alton et al. 2005; Weiyi Shi 2008) commissioned by GTZ warn of the threats of rubber to the environment, to the livelihood security of highlanders (given the volatility of the global rubber market) and to the social cohesion of highland communities as a consequence of wealth polarisation.

Policy impact on Akha economy and health

The national and international policies outlined above (elimination of shifting cultivation, resettlement, focal sites, and opium demand and supply reduction) can all be described as benevolent in purpose – the economic development of highland minorities and eradication of poverty, elimination of local opium addiction, and the cessation of opium cultivation as a source of local and global opiate abuse and as an assumed cause of poverty in Laos. However, I contend that these policies have serious flaws that have the

unintended consequences of causing manifold forms of harm to the Akha. Thus, the GoL's resettlement policy is guided by a plausible logic that it is less costly to bring highland villagers to lowland services and development (e.g. schools, clinics, markets, permanent agriculture) at focal sites than to deliver these services to remote and often inaccessible villages in the highlands. However, this reasoning is undermined by the fact that there is a severe shortage of land in the lowlands available for wet-rice development and therefore limited scope for livelihood improvement for relocated highlanders. Also, the emotive and obsessive nature of the prohibitionist War on Drugs has resulted in punitive demand reduction programmes and unrealistic deadlines for the eradication of opium cultivation.

Research demonstrates that the resettlement of highlanders has been economically disadvantageous for most. The National Poverty Eradication Programme, which surveyed a large number of districts in Laos, notes that for those who had relocated in recent years: 'In the villages where overall income had increased, it was found that increases in production were being realized by only a few families' (GoL 2003: 45). With regards to Muang Sing in the 1990s I have argued elsewhere (Cohen 2000) that some lower-slope Akha villages successfully adopted wet-rice cultivation in the lowlands but that this was largely negated economically by high livestock mortality and lack of government assistance. I also concluded that movement of Akha downhill proved to be of greater economic benefit to the lowland Tai by providing them with a pool of cheap and dependent wage labour (especially of opium addicts). Later UNDP/ECHO surveys of both Muang Sing and Muang Long found inadequate availability of land to establish wet-rice fields, conflict over land between ethnic groups and substantial rice deficits (Alton and Houmphanh 2004: 46-49). A study of Muang Long by the aid organisation Action Contre La Faim (ACF) highlighted the high costs of

resettlement ('decapitalization') with minimal government compensation and ensuing poverty, land conflicts and increased dependence on wage labour (Romagny and Daviau 2003). In Muang Sing as noted above the opium eradication campaign initiated in 2002 led to uncontrolled migration of Akha downhill and, given the increasing shortage of land in the lowlands, the creation of a new rural proletariat (Cohen and Lyttleton 2008: 130-132)

Resettlement has caused high levels of morbidity and mortality, particularly in the first couple of years after relocation. For example, in the Akha village of Ban Yang Luang of Muang Sing, which I studied in the late 1990s, 80 people died, mainly from malaria, within two years of the relocation of the village in 1990. Another Akha village in this district (Chapoukeun) suffered 199 deaths in 1985 from disease out of a total of 260 villagers following resettlement (Alton and Houmphanh 2004: 133). A survey for GTZ of Akha villages in 1995 (11 'traditional' mid-slope villages and 22 relocated lower-slope villages) also reveals the calamitous impact on health of resettlement, with epidemic deaths³ of 749 in lower-slope villages compared to 199 in mid-slope villages and a child mortality rate of 326 for lower-slope villages compared to 133 for mid-slope villages (Gebert 1995). The child mortality rate (deaths per 1,000 live births for children under 5) in the mid 1990s for lower-slope Akha villages was exceptionally high. Indeed, it then approximated the very highest rates in the world of about 300 and was in glaring contrast to the rate of only 70 for the Muang Sing lowlands, inhabited predominantly by the more prosperous Tai.

In Muang Long a 2003 survey of mortality over the preceding 5 years found much higher mortality rates in resettled villages (predominantly Akha), with up to 20 per cent mortality in the first year of resettlement (Romagny and Daviau 2003: 21,3).

High mortality in these two districts was caused by a number of interrelated factors: lack of immunity to mosquito-borne diseases (especially malaria), lack of access to clean water and poor sanitation, poorly developed primary health care and lack of village-based health services and government vaccination programmes.

Nevertheless, some improvements in health have been recorded. For example, in GTZ target villages (almost all Akha) in Muang Sing infectious diarrhoea and vector-borne disease decreased from 29 per cent in 1996 to 13 per cent in 2000 and under-5 mortality decreased from 311 per 1000 in 1997 to 105 per 1000 in 2001. Those treated for malaria by GTZ health staff declined from 10,144 in 1995 to 552 in 2000. In Muang Long the number of reported malaria cases in NCA's 26 target villages dropped from 1135 in 2003 to 485 in 2007 (NCA 2007). District public health figures in both Muang Sing and Muang Long also show some progress though much morbidity and mortality goes unreported to the district hospitals.⁴ However, it is worth emphasising that these improvements cannot easily erase the psycho-social trauma and suffering caused by the catastrophic epidemics in the early years following resettlement of highlanders.

HIV/AIDS is not as yet a major health problem in Laos, with only small number of cases reported in Luang Namtha province but there is considerable potential for the spread of the disease in Muang Sing and Muang Long. A crucial factor here has been the reconstruction in 2000 of the main road (17B) that bisects the two districts and traverses the lowland corridor that links China to the Mekong port of Xiangkok (Lyttelton et al. 2004). The 'new' road has generated a substantial increase in road traffic and in local and cross-border commerce. Increased vehicular traffic and human mobility has led to the proliferation of nightclubs, bars and commercial sex workers (from other provinces or China) in the towns of Muang Sing, Muang

Long and Xiangkok and elsewhere along the road. The male clients of the sex workers comprise visitors from other provinces (especially government officials), Chinese truck drivers, and local men (including Akha). Another risky development has been the expansion, particularly in Muang Long, of watermelon cultivation in the lowlands by Chinese and Akha Chinese from Yunnan. These immigrant farmers commonly visit nearby Akha villages at night and arrange to sleep with Akha girls with permission of the village youth group and with gifts of cigarettes and whisky. In some villages these relationships have become commercialised, with Akha women accepting nancial payment from Chinese men for sexual services. The potential for the spread of HIV/AIDs in these districts, particularly for the Akha, is thus a product of the intersection between, on the one hand, the process of Akha resettlement to or near the lowlands and, on the other, road development and its stimulation of commerce, human mobility and increasing interaction between culturally diverse ethnic groups.

The Akha and Social Suffering

Suffering is not new to the Akha. According to Alting von Geusau: ‘It is an essential part of the Akha experience that throughout their history they have been dependent on other ethnic groups, particularly on economically, militarily and politically stronger kingdoms or empires’ (1988: 223). This is exemplified in the case of the Tai kingdom of Muang Sing in the 19th century in which highlanders, including the Akha, had the status of kha (‘slaves’ or ‘servants’) and were administered separately by Tai officials who exacted tribute and corvee labour. It is this longstanding cultural experience of being a ‘perennial minority’ of inferior status that has engendered an Akha mythology of the ‘born loser’ – a self-image that has been ‘interiorized’ (Alting von Geusau 1988: 224,228).

By contrast, in the modern state of Lao PDR the Akha, at times referred to as ‘*Lao sung*’ (highland Lao), have full equality constitutionally in a multi-ethnic nation. And it is their current status as equal citizens that underpins state policies of economic development of highland minorities. However, lowland Lao dominate politically at the national level and have control over economic resources. The consequence has been a tendency for minority development to be subjected to a new form of cultural subjugation that assumes that progress is associated with speaking the Lao language, cultivating wet-rice and living in sedentary villages in the lowlands. This process of ‘Laoization’ has resulted in policies related to shifting cultivation, resettlement and focal sites that, as noted above, have ignored the reality of the limited area of land in the lowlands suitable for wet-rice development and have led to ‘clumsy efforts to foster rapid economic development that do not acknowledge the particular conditions, capabilities, and interests of different ethnic groups (Ireson and Ireson 1991:926). It is true that the GoL’s opium eradication campaign has its genesis in the global War on Drugs and in pressure from the United Nations and the United States. Nevertheless, drug war symbolism meshes well with the national cultural process of ‘Laoization’ in that opium is a drug used almost exclusively by highland minorities; it thus has become a convenient symbol of primitiveness and backwardness and viewed as an impediment to national development.

My argument is that the Akha’s longstanding cultural experience of ineluctable deprivation and suffering persists and is perpetuated by GoL and international policies that are ostensibly well-intentioned and benevolent. If we accept the World Health Organisation’s holistic definition of health (in the 1978 Alma-Ata declaration) as ‘a state of complete physical, mental and social well-being’ then it follows that we cannot simply confine the study of health to physical disease. I have noted already some significant recent

improvements for the Akha of Muang Sing and Muang Long in the reported incidence of diseases such as malaria and dysentery. However, government development policies, in particular those that have promoted highland-to-lowland migration, have had baleful consequences as manifested in various forms of social and personal dis-ease and distress. Resettlement and opium supply and demand reduction programmes have struck at the very heart of the 'Akha way of life' (Akhazang) that is the foundation of community cohesion. Alting von Geusau describes the Akha as being 'consistently egalitarian in their social organization' (1988: 218) over the centuries and that Akha texts give the impression that the Akha only view personal wealth as 'a situation of temporary good fortune' (1988: 223). In Muang Sing and Muang Long government resettlement and drug policies, often with the backing of international organisations, have had the unintended consequence of seriously undermining the egalitarian ethos of the Akha, leading to the marginalisation of some village groups, factionalism and social discord.

A critical factor contributing to the disruption of the Akha communities has been the proletarianisation of Akha labour in the wake of relocation. Until about the mid 1990s there were still opportunities for Akha who moved downhill to develop wet-rice elds in the lowlands, particularly in Muang Sing. Since then these opportunities have diminished and rapidly so following local opium eradication which triggered mass migration of highland Akha to the lowlands. Many of these recent Akha migrants were allocated land by the local government but generally the land was poor in quality and not irrigable. The effect has been the emergence of Akha villages in or at the edge of the lowlands that have become heavily dependent on wage labour for Tai, Chinese and wealthier Akha from long-established villages. Notably whereas in the 1990s almost all Akha who worked as wage labourers for the Tai were opium addicts, now addict and non-addict alike in these relocated

villages have become dependent on wage labour. Even more alarming and invidious has been the intensification of labour competition within these Akha villages as a consequence of the surplus of agricultural labour in the lowlands. For example, this surplus enabled Tai employers to hire only the youngest and healthiest workers, thereby disadvantaging older villagers. Also, other sub-groups, formed on the basis of origin from different highland villages, managed to gain preferential access to employment. Such competition engendered village factionalism and those excluded expressed feelings of resentment arising from the inequitable distribution of work (Lyttleton et al. 2004:60; Cohen and Lyttleton 2008:137-138). In this situation social suffering not only arises from the drudgery and insecurity of the life of the wage labourer but also in the loss of dignity, communality and egalitarianism.

Social suffering is also manifest in persistent and varying forms of drug abuse. Despite recent improvements in some health indicators drug abuse has remained a serious problem. In Muang Sing the resettlement of Akha to lower-slope villages in the 1990s led to higher addiction rates as a result of displacement, unfulfilled expectations, the trauma experienced from the many deaths from disease in the early years of relocation, and demoralisation of villagers (including village leaders) (Gebert 1998: 5). In Muang Sing, in recent years, there has been only a marginal decline in the number of opium addicts despite substantial price rises (due to reduced local opium production) and despite almost a decade-long detoxication programme covering more than 60 villages. In 1998 there were 745 opium addicts (almost all Akha) and in 2007 there were still 703 as a result of high relapse rates (of more than 60 per cent) and new addicts. Detoxication has been more successful in Muang Long where, for example, the number of opium addicts was reduced from 389 to 63 between 2003 and 2007 in NCA's latest

26 target villages. Irrespective of high or low relapse rates the consequences of the detox in both districts were rigorous and punitive programmes, described above, and a form of social discrimination within Akha communities manifested in a new identity of the ‘degenerate addict’ and in the stigmatisation and marginalisation of relapsed addicts (Cohen and Lyttleton 2002).

Moreover, a new drug problem has emerged to plague both districts in the form of the trafficking and use of amphetamine-type stimulants (ATS), known locally as ‘*ya ba*’ (‘crazy drug’). The main source of ATS production is Burma and the Mekong port of Xiangkok is a key conduit for the distribution of the drugs in Muang Long, Muang Sing and beyond. A 2003 survey by local officials of Muang Sing identified 800 local ATS users, of which 30 per cent were Akha. The survey also revealed that ATS use was concentrated in villages close to the town and the main road (including lower-slope Akha villages). No survey data are available from Muang Long but there are anecdotal reports of widespread ATS usage in villages along the main road (Route 17B). In an environment in which opium use was the target of increasing surveillance and punishment, many opium addicts switched to ATS as a drug that can be consumed quickly and easily concealed. This contrasts with Thailand where opium eradication led to widespread heroin use. However, ATS use among the Akha is not limited to former opium addicts. Lyttleton (2004) has argued that ATS is the perfect capitalist drug in that it heightens both ‘pleasure’ and ‘usefulness’. As a stimulant and performance-enhancing drug ATS has attracted increasing numbers of Akha engaged in the market economy based on sedentary cash-crop agriculture and wage labour in the lowlands. Akha labourers at the port of Xiangkok regularly use ATS for loading and unloading Thai and Chinese cargo and for work in rice, watermelon and sugar-cane fields throughout the lowlands; and Tai

landowners have been know to adulterate water with ATS to invigorate labourers and increase productivity. Furthermore, Surached (2004) reports the widespread use of ATS on rubber plantations in southern Thailand, particularly to combat fatigue during the tapping of latex at night, and this is likely to be repeated in northern Laos given the current boom in rubber cultivation here. However, while ATS may have considerable economic benefits in an expanding market economy these come at the cost of new individual health and social pathologies. Prolonged ATS use creates pernicious forms of psychosis and paranoia. Also, in Muang Sing police records indicate a rapid increase between 2000 and 2003 in violent crimes and thefts, often attributed to ATS users.

Conclusion

In this paper I have examined some of the outwardly benevolent policies and programmes of international aid agencies and of the Government of Lao PDR – detoxification of opium addicts, eradication of opium cultivation, elimination of shifting cultivation, the establishment of focal sites and resettlement of highland minorities in the lowlands. The conclusion drawn is that these policies have had unintended consequences of causing considerable harm and social suffering to these highlanders, in particular the Akha of Muang Sing and Muang Long of the northern province of Luang Namtha.

How might the harmful institutional effects of the policies of foreign aid agencies and the national government be minimized? The Kleinmans respond to the question as follows:

Humanizing development
means recognizing and
responding to the
needs and suffering of

ethnographic context. The request
 only engagement with what asks for
 participants to be involved in
 those participants that they rational
 experts in the process of developing and
 assessing programs. Subordinating the
 ground participants need to have these
 local voices reflected in projects to
 national and international discourses human
 potentials (Kumar and Kumar 1994)

With regards to Laos what is missed in this statement is that these ‘local worlds’ are indeed encompassed by national and international discourses which, however, are in contradiction with dominant discourses and policies. Bewley-Taylor has argued persuasively that the UN’s image as a benevolent organization has been sullied by the contradictions between its ‘rigidly prohibitionist’ drug control system and other UN policies such as human rights and harm reduction (2005). I have also highlighted elsewhere (Cohen 2006) the contradiction between the UN’s pronouncements on alternative development that emphasise local participation, dialogue and consensus and punitive programmes based on the ‘conditionality’ of aid to drug-crop cultivators and, in this paper, the contradiction between the principles of UN-supported Community-Based Drug Control and the punitive systems of social control that emerged in practice.

GoL policies regarding shifting cultivation, focal sites and resettlement have emerged more from domestic political and economic exigencies but these, too, reveal enduring contradictions, in particular between the new Lao

socialist ideology that, on the one hand, grants ethnic minorities equality in a multi-ethnic state and promises the preservation of minority cultural identity and, on the other hand, ‘Laoization’ that privileges Lao nationalism and the defence of national unity.

The resolution of these contradictions comes up against the harsh realities of political power at various levels. The capacity of the UNODC to modify its current hard-line, prohibitionist drug policy is limited by the fact that the major donors are zero-tolerance oriented states such as the US, Sweden and Japan (Bewley-Taylor 2005: 429). Similarly, the GoL’s switch from a policy of gradual to rapid elimination of opium cultivation and consumption was an outcome of US and UN political pressure (and some funding enticement). Again, international aid agencies, such as GTZ and NCA, have to operate within the policy mandates of the GoL and the UN and, in some cases (such as NCA in Muang Long) dependence on UN funding.

However, within the constraints of these power relations there is sometimes scope for manoeuvre and mediation. Bewley-Taylor recommends that ‘reform-minded nations’ could help negotiate changes to the UN prohibitionist drug-control system by highlighting inconsistencies in UN policies and between UN agencies and also to increase their donations to UNODC to counterbalance those of the conservative, zero-tolerance nations (2005: 427,429). In Laos, while some aid agencies have uncritically supported the government resettlement and focal site policies others, such as NCA and ACF in Muang Long, have bargained with district authorities to offer village-level assistance that reduces the necessity to move. Furthermore, both NCA in Muang Long and GTZ in Muang Sing have increasingly emphasised the need for livelihood security for the Akha within the highlands through promoting upland wet-rice terraces. Again, given the relatively decentralised nature of power in Laos even local government authorities sometimes ignore

or at least moderate policy directives of the national government; for example, in Muang Sing in the mid 1990s district officials temporarily abandoned the policy of resettling Akha in order to avoid conflicts over land between Akha, Tai and recent Hmong immigrants from other provinces and so preserve inter-ethnic harmony (Cohen 2000). All these various forms of mediation have the potential to soften the adverse policy impact of dominant discourses, to humanise and empower ‘local participants’ and mitigate social suffering.

Footnote

¹ Conducted independently and jointly with Chris Lytteton of Macquarie University.

² Migration to the lowlands in response to opium eradication was less problematic in Muang Long for a number of reasons (including NCA's food-for-work programmes in highland villages). For more details see Cohen and Lyttleton 2008: 129.

³ That is, human epidemics since resettlement or during the previous ten years.

⁴ For district health statistics 1998-2003 "see Lyttleton" et al. 2004, *Tables* 15-17, p.69.

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