EXECUTIVE SUMMARY

Key Findings

- China faces a growing problem of illicit drug use. Drug addiction is considered personal failure and addicts are highly stigmatized. Drug addiction does not receive much public sympathy or priority in government funding.
- The number of officially registered drug addicts totals about 2.5 million, having increased every year since the government's first annual drug enforcement report in 1998.
- In recent years, synthetic drugs such as crystal methamphetamine and ketamine, have become more popular than heroin which was previously dominant.
- Illegal opium cultivation no longer exist in China because of strong state control of land use and extensive domestic surveillance.
- Myanmar is believed to be the single largest supplier of China's drug market. In 2013, 92.2 percent of the heroin and 95.2 percent of methamphetamine seized in China were traced to Myanmar.
- Intravenous drug use significantly contributes to the spread of Hepatitis and HIV.
- Drug treatment is mostly administered by the criminal justice system through enrollment in compulsory detoxification centers for first-timers and imprisonment in “education-through-labor” camps for repeat offenders.
- More humane approaches are emerging. Methadone maintenance therapy (MMT) clinics have been increasing rapidly across the country and needle exchange programs are being used to prevent the spread of HIV.
- The cost of delivering treatment is a key factor in developing effective substance abuse treatment.
- Penalties for drug distribution and trafficking remain harsh, and include a frequent use of the death penalty.
- Using an extensive network of informants, interdiction efforts focus on major drug trafficking organizations.

Policy Recommendations

- China should accelerate its experiment with the decriminalization of substance abuse and apply a public health approach to the treatment of addicts.
- China needs to promote evidence-based treatment programs based on scientific research and rigorous evaluation.
- China needs to establish a reliable drug market forecast system, which combines chemical composition analysis, reports and urine tests of arrested drug abusing offenders, and community informants on illicit drug use trends and pricing information.
- China should increase the efficiency of its international collaboration and insulate its counter-narcotic programs from global politics.
An Ever-Expanding Addict Population

Like its red hot economy, China also witnesses the use of illicit drugs growing at an unprecedented speed. Practically all psychedelic drugs known in the West have found their consumers in the country. Illicit drug dealing and consumption are highly stigmatized in China because of its bitter history. All Chinese governments in the past 150 years, irrespective of their political persuasions, have tried various harsh measures in curtailing drug use and trade, and the society at large holds drug addicts in disrepute and considers it a failure of the family. Still the problem persists.

China fought and lost two wars over opium in the 19th century. Following its defeat, China succumbed to large scale opium consumption by its populace. Historians claimed that by 1906, China was producing 85 percent of the world’s opium, some 35,000 tons, and more than a quarter of its adult male population regularly used opium. After the communists took over China in 1949, eradication wiped out the largest ever cultivation of poppy in the world, opium dens were shut down, opium manufacturing facilities closed, drug traffickers summarily executed or imprisoned, and drug addicts sent to labor camps. The massive prohibition campaign, widely supported by the public, was so effective that in less than three years the communist government declared China a drug-free country. Following China’s open-door policy and economic reform in the 1980s, illicit drugs quickly returned, starting in Yunnan Province bordering Myanmar and the rest of the infamous Golden Triangle. It should be noted that opium cultivation has not returned.

Although attempting to stamp out the problem quietly in the early years of its economic reform, the Chinese government in the past two decades has openly acknowledged that illicit drug consumption has infested every province. The central government has been issuing an annual report since 1998, through its National Narcotics Control Commission, publicizing information on the trends, law enforcement activities, and intervention activities of its narcotic control efforts.

One unique practice in China’s attempt to control illicit drugs is the extensive use of its criminal justice system, from combatting drug trafficking activities to treating drug addicts. Police agencies across the country are required to identify and register all drug users with whom they come in contact. A national registry has been established where all local police agencies routinely submit statistics on their drug enforcement activities including arrests, seizures, investigations, and contacts with drug addicts. Although somewhat inconsistent in its format as well as content, the official drug enforcement data are published in the Annual Report on Drug Control in China. To provide an idea of the extent of drug abuse in China, Table 1 is constructed using the data published in the official annual reports since 2001.

There are two clear patterns: (1) the total number of addicts is on a steady increase, and (2) the proportion of heroin using addicts is on a steady decrease. It is estimated that China, together with the Russian Federation and the United States, account for 46 percent of all intravenous drug users in the world. Ever since the drug user registration was established in the 1990s, the official figures have been on a continuous climb, some years more rapidly than others. Heroin is still the number one illicit drug in China, although the proportion of heroin users in the total addict population has been on a steady, albeit slow, decline over the past ten years. In comparison, the number

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1 Portions of this paper have been previously presented and published.
of registered users who were abusing synthetic drugs has been on a steady rise. Crystal methamphetamine (commonly known in China as bingdu or “ice drug”) and ketamine are the top two choices in synthetic drugs. Our field observations and interviews with community informants corroborate the official claims that these amphetamine-type stimulants are mostly consumed by groups of youths and often found in night clubs and karaoke bars.

In a recent survey of drug addicts in compulsory drug treatment centers, Huang et al. found that addicts were mostly young male and adults, unemployed and with an education of less than high school. These findings are consistent with those found with U.S. drug users. Huang et al. also found that Chinese drug users were likely to be single and come from poor families. Heroin was the most commonly consumed drug, followed by methamphetamine. In comparison, in the United States, the most commonly used drug reported by prison inmates and the general population is marijuana, followed by cocaine (crack and powder). Such differences in the choice of drugs may be due to geographical differences in the source of productions and supplies. While Southeast Asia has a long history of opium poppy cultivation, which provides the raw material for heroin production, coca leaves are mostly cultivated in the American continent. Synthetic drugs (e.g., methamphetamine and ketamine), however, are made with chemical precursors widely available in legitimate products, which are less constrained via global trades.

Another interesting trend revealed by China’s annual anti-narcotic reports is the proportion of registered users under the age of 35. As shown in Table 1, drug addicts appear to be aging. At the beginning of the decade, the vast majority of registered users were

<table>
<thead>
<tr>
<th>Year</th>
<th>Total registered addicts</th>
<th>Total heroin addicts</th>
<th>% heroin addicts</th>
<th>% users ≤ 35 years old</th>
</tr>
</thead>
<tbody>
<tr>
<td>2001</td>
<td>901,000</td>
<td>745,000</td>
<td>82.7%</td>
<td>77.0%</td>
</tr>
<tr>
<td>2002</td>
<td>1,000,000</td>
<td>876,000</td>
<td>87.6%</td>
<td>75.2%</td>
</tr>
<tr>
<td>2003</td>
<td>1,050,000</td>
<td>740,000</td>
<td>70.5%</td>
<td>72.2%</td>
</tr>
<tr>
<td>2004</td>
<td>1,140,400</td>
<td>924,864</td>
<td>81.1%</td>
<td>70.4%</td>
</tr>
<tr>
<td>2005</td>
<td>1,160,000</td>
<td>700,000</td>
<td>78.3%</td>
<td>68.1%</td>
</tr>
<tr>
<td>2006</td>
<td>*</td>
<td>*</td>
<td>*</td>
<td>*</td>
</tr>
<tr>
<td>2007</td>
<td>957,000</td>
<td>746,460</td>
<td>78.0%</td>
<td>62.1%</td>
</tr>
<tr>
<td>2008</td>
<td>1,126,700</td>
<td>877,736</td>
<td>77.9%</td>
<td>59.7%</td>
</tr>
<tr>
<td>2009</td>
<td>1,335,000</td>
<td>978,000</td>
<td>73.3%</td>
<td>58.1%</td>
</tr>
<tr>
<td>2010</td>
<td>1,545,000</td>
<td>1,065,000</td>
<td>68.9%</td>
<td>*</td>
</tr>
<tr>
<td>2011</td>
<td>1,794,000</td>
<td>1,156,000</td>
<td>64.5%</td>
<td>67.8%</td>
</tr>
<tr>
<td>2012</td>
<td>2,098,000</td>
<td>1,272,000</td>
<td>60.6%</td>
<td>*</td>
</tr>
<tr>
<td>2013</td>
<td>2,475,000</td>
<td>1,326,000</td>
<td>53.6%</td>
<td>*</td>
</tr>
</tbody>
</table>


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7 Substance Abuse and Mental Health Services Administration (SAMHSA), Results From the 2009 National Survey on Drug Use and Health: Volume I. Summary of National Findings (Rockville, MD: Office of Applied Studies, SAMHSA, 2010), http://www.oas.samhsa.gov/NSDUH/2k9NSDUH/2k9ResultsP.pdf.
9 SAMHSA, Results From the 2009 National Survey on Drug Use and Health: Volume I. Summary of National Findings.
under the age of 35. By 2009, the proportion decreased to 58.1 percent. No official explanations have been provided as to why drug users appear to be getting older when the number of synthetic drug (or club drug) users has been on an increase. After 2011, the Chinese government stopped reporting the age figure.

Chinese authorities claimed to have great confidence in their counts of active drug users, particularly the heroin users. One high ranking official at the Narcotics Control Bureau of China’s Ministry of Public Security claimed that:

I can tell you the registration of heroin users is highly reliable because of our local police work. Community-oriented policing is far more efficient than that of the U.S. because of our residential registration system. We comb through the neighborhoods of the entire country and knock on doors to interview residents to find out who the drug users are. Neighbors and even family members also tell us who the heroin users are. It is hard for them to escape the police attention.

However, the same can’t be said of synthetic drug users—those taking head-shaking pills (ecstasy), crystal meth, or ketamine—because these drugs are often consumed in entertainment facilities such as bars, karaoke clubs, and restaurants. Even when family members suspect their children are using drugs, they are never sure because these children often only tell their parents that they are going out with friends. For heroin users, their physical signs and living conditions easily give away their addiction problems. Synthetic drug users are often in good spirits and leave few physical traces. Therefore, we have great confidence on the number of heroin users in China. I would venture to say the accuracy is above 90 percent. But we don’t have an accurate count of stimulant drug users.

What is lacking in the official reports is any explanation on major statistical changes from one year to another or on historical trends. It is unclear whether the sharp increases in the number of addicts were due to increased police activities or worsening of the drug abuse situation.

Another way to explore the illicit drug situation in China is through the annual drug seizures. Table 2 reports the four main types of drugs seized annually by Chinese authorities. The total amount of drugs seized has also been on a steady increase over the years. Most interestingly the increase in methamphetamine and ketamine accelerated in the past three years. The seizure of methamphetamine in particular was increasing at an exponential rate, suggesting its wide availability. Heroin on the other hand was on a decline for a few years, reaching its lowest in 2008; then the trend was reversed.

Based on the chemical analysis of seized drugs, China accuses Myanmar of being the single largest source country to China’s drug market; in the most recent official report, China’s National Narcotics Labs claimed that 92.2 percent of the heroin and 95.2 percent of the methamphetamine seized by police in 2013 were from Myanmar.10 The Chinese authorities for many years have been monitoring through satellite images the opium cultivation areas in Northern Myanmar. For instance, China noticed a sharp increase in the area of opium cultivation: from 31,700 hectares in 2011 to 44,866 hectares in 2012, a 41 percent jump.11 These reported increases in opium poppy cultivation appeared to corroborate the increased heroin seizures.

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For years, China’s annual anti-narcotic reports also hinted that central Asia (also known as the Golden Crescent) could become a new supply source for heroin. Although China is physically connected with Afghanistan, our interviews with law enforcement officials suggest that it is unlikely to become a major source of supply to the Chinese market. The highest number of seizures reported in China’s annual drug control report was in 2013, in which a total of 173 kilograms of heroin were traced to sources inside Afghanistan. Our contacts inside Chinese law enforcement agencies seemed to downplay the potential of Afghanistan as a significant source, saying that China and Afghanistan share less than 100 kilometers of remote territories where few people live and few roads are fit for travel, thus hindering the development of any commerce, legal or illegal. Regardless of from where the drugs are imported, it is clear that China is fighting an uphill battle.

**Drug Treatment in China: Struggling to Keep Up**

The Chinese government is fully aware of the serious social and public health challenges posed by its expanding addict population. It was estimated that 50–70 percent of heroin users were injection drug users (IDUs). IDUs are now considered the most important source of Hepatitis C and HIV infections in China. More than a decade ago, at the turn of the millennium, 72.1 percent of all confirmed HIV cases were attributed to intravenous heroin injection. Needle sharing was a common practice among heroin users. Even after years of public campaigns and the expanding needle exchange programs, intravenous heroin injection continues to be a major contributor to the spread of HIV, accounting for 24.3 percent of all newly reported cases.

**TABLE 2. ANNUAL DRUG SEIZURES IN CHINA (IN METRIC TONS)**

<table>
<thead>
<tr>
<th></th>
<th>Heroin</th>
<th>Opium</th>
<th>Methamphetamine</th>
<th>Ketamine</th>
</tr>
</thead>
<tbody>
<tr>
<td>2001</td>
<td>13.20</td>
<td>2.82</td>
<td>4.82</td>
<td>*</td>
</tr>
<tr>
<td>2002</td>
<td>9.29</td>
<td>1.22</td>
<td>3.19</td>
<td>*</td>
</tr>
<tr>
<td>2003</td>
<td>9.53</td>
<td>0.91</td>
<td>5.83</td>
<td>1.76</td>
</tr>
<tr>
<td>2004</td>
<td>10.84</td>
<td>0.89</td>
<td>2.75</td>
<td>0.61</td>
</tr>
<tr>
<td>2005</td>
<td>6.90</td>
<td>2.30</td>
<td>5.50</td>
<td>2.60</td>
</tr>
<tr>
<td>2006</td>
<td>5.79</td>
<td>1.69</td>
<td>5.95</td>
<td>1.79</td>
</tr>
<tr>
<td>2007</td>
<td>4.59</td>
<td>1.18</td>
<td>6.62</td>
<td>6.00</td>
</tr>
<tr>
<td>2008</td>
<td>4.33</td>
<td>1.38</td>
<td>6.15</td>
<td>5.27</td>
</tr>
<tr>
<td>2009</td>
<td>5.80</td>
<td>1.30</td>
<td>6.60</td>
<td>5.30</td>
</tr>
<tr>
<td>2010</td>
<td>5.30</td>
<td>1.00</td>
<td>9.90</td>
<td>4.90</td>
</tr>
<tr>
<td>2011</td>
<td>7.08</td>
<td>*</td>
<td>14.32</td>
<td>*</td>
</tr>
<tr>
<td>2012</td>
<td>7.30</td>
<td>*</td>
<td>16.20</td>
<td>4.70</td>
</tr>
<tr>
<td>2013</td>
<td>8.55</td>
<td>1.46</td>
<td>19.52</td>
<td>9.69</td>
</tr>
</tbody>
</table>

* Figures not reported.

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Although private facilities exist in urban areas, drug treatment remains mostly under the control of the criminal justice system. Use of illicit drugs is considered an administrative offense and police make frequent detentions of anyone identified as a drug user. Individuals detained by the police, especially those involved in property crimes, are routinely interrogated for possible drug use. A female heroin addict and dealer in Yunnan Province that we talked to during our field work in 2005 described how the police identified drug users: “In the old time, police just asked you to roll up your sleeve and they looked for injection marks on your arm. So I learned to inject in the veins in my thighs because I knew the police wouldn’t check there. Now they use urine tests all the time if they suspect you are using drugs.” Aside from drug raids and property crime suspects, police also employ other strategies to screen for and rope in drug addicts, such as use of informants and neighborhood committees.

There are two main strategies for treating addiction in China: (1) enrollment in compulsory detoxification centers, and (2) sentencing to “education through labor” camps. Both involve locked-up residential stays, but the former typically lasts up to six months and the latter can last for one to three years. While first-timers are typically sent to the compulsory detoxification centers, repeat offenders are to enter labor camps for a longer “treatment,” regardless of how they are brought to the attention of law enforcement agencies (e.g., arrested for crimes, turned in by relatives). These treatment facilities are typically walled off from the outside world. “Patient” movement is restricted and daily schedules are highly regimented. All treatment facilities impose a paramilitary routine, along with manual labor, physical exercise, and education.

Addicts brought to the compulsory treatment center are kept in isolation for the initial seven to ten days to “cleanse their system.” Basic medical services are available at the better-financed facilities. Addicts going through withdrawal are supervised by medical staff and receive doctor visits and medications. In economically deprived regions, however, addicts are often forced to go through so-called “dry detoxification” (without any medication to alleviate physical pains). After “detoxification,” addicts undergo rehabilitation, which mainly involves physical labor, education, and group discussions featuring mostly self-criticism. Treatment usually lasts about three to six months at these centers.

Few compulsory treatment facilities offer Western-style counseling or behavioral therapy. In our interactions with public health officials as well as administrators in charge of the treatment centers, the need for psychosocial intervention was widely expressed. However, psychotherapy is underdeveloped in most such treatment facilities. For instance, during our field activities, we inquired about any systematic measurement of the severity of addiction for client assessment at intake. There were none. Clinical assessment tools commonly used in the West, such as the Addiction Severity Index and Hopkins Symptom Check, were unheard of in these government-run facilities. Instead, physical labor remained the most common treatment protocol. Addicts were required to participate in various production activities (e.g., growing crops, raising livestock, and manufacturing electronics), supposedly serving to distract from yearning for drugs as well as to support the facility financially.

For addicts who have gone through the compulsory detoxification centers once and are caught again by police, labor camps are the “treatment” option. These camps last anywhere from one to three years, and are usually located away from the cities. Most labor camps involve some form of farming activity, and are controlled by correctional agencies (as opposed to the police). Information on rehabilitation activities at these labor camps is scarce but is believed to be similar to that found at the compulsory detoxification centers. Starting in 2009, Chinese authorities declared that labor camps were no longer available for drug treatment purposes. Instead, chronic addicts are now “committed to community-based treatment programs” and reported as such in the Annual Report on Drug Control in China.

Central to drug treatment protocols in all government-run facilities is physical labor. All incarcerated people in China, whether in prison for a criminal
offense or in government-run drug treatment centers, must work to support themselves and their facilities. In our visits to drug treatment facilities, we were told that these “patients” were not paid a wage and their “collective” income was used to pay for their food and other amenities such as exercise equipment. Depending on the resourcefulness of the administrators, some treatment facilities have more money-making opportunities than others and the standard of living and equipment in the dorms thus vary enormously.

The effectiveness of these compulsory detoxification centers and labor camps has not been examined either by the government or independent researchers. We are not aware of any national depository of data related to substance abuse treatment or addiction research. However, in 2010 the National Narcotics Control Commission began to report the number of addicts who had not used drugs in the past three years. Only a total figure of those who “stopped using in the past three years” was provided, without any contextual information as to how many others of the same cohort were still using. The figure is nonetheless a step forward in the gradual improvement of the national report on drug treatment outcome assessment. Much more research is needed to assess the efficacy of these large scale compulsory drug treatment facilities on the nation’s drug use.

Upon completing the compulsory treatment or the labor camp, addicts are released back into the community where after support services range from inadequate to non-existent. In recent years, the Chinese government has stepped up its effort to improve reentry efforts and to establish the so-called “drug-free communities” (also called drug-free counties, drug-free cities, or drug-free districts) by implementing surveillance of released addicts, organizing support groups, and sponsoring various anti-drug education campaigns. Community-based organizations that are not affiliated with government agencies have begun to appear in urban areas to assist addiction recovery and coordinate “self-help” groups.

Drug treatment in China is becoming more sophisticated. As shown in Table 3, China started experimenting

<table>
<thead>
<tr>
<th>TABLE 3. COMPULSORY DRUG TREATMENT AND METHADONE MAINTENANCE</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Addicts committed to compulsory detoxification facilities</strong></td>
</tr>
<tr>
<td><strong>Addicts committed to community-based drug rehabilitation facilities</strong></td>
</tr>
<tr>
<td><strong>Methadone clinics</strong></td>
</tr>
<tr>
<td><strong>Active methadone clinic participants</strong></td>
</tr>
<tr>
<td>2001 *</td>
</tr>
<tr>
<td>2002 252,500</td>
</tr>
<tr>
<td>2003 220,000</td>
</tr>
<tr>
<td>2004 273,000</td>
</tr>
<tr>
<td>2005 298,000</td>
</tr>
<tr>
<td>2006 269,000</td>
</tr>
<tr>
<td>2007 268,000</td>
</tr>
<tr>
<td>2008 264,000</td>
</tr>
<tr>
<td>2009 173,000</td>
</tr>
<tr>
<td>2010 175,000</td>
</tr>
<tr>
<td>2011 171,000</td>
</tr>
<tr>
<td>2012 202,000</td>
</tr>
<tr>
<td>2013 242,000</td>
</tr>
</tbody>
</table>

* Total figures not reported.

with methadone maintenance therapy (MMT) as early as 2002, and the number of clinics administering methadone maintenance treatment has increased rapidly. Medical treatment other than MMT is also available, but mostly for those with financial means. By and large, methadone maintenance remains the main choice of medical intervention.\(^\text{18}\) The use of opiate antagonists such as Naltrexone, which block the effects of opioid substances, is not common. Again there has not been much research across the country on these MMT clinics with regard to their impact on public health issues or acquisitive criminal activities.

Needle exchange programs began to appear in limited regions for many years to prevent the spread of HIV infection among intravenous drug users. However, the practice has been controversial. During our field work in Kunming between 2004 and 2006, we visited one such needle exchange program. Although limited on scale, this organization obtained a license to purchase needles and syringes in bulk. In neighborhoods where addicts congregated, community outreach workers would put out the word about their upcoming events. On the day of an outreach event, agency staff and volunteers (mostly recovering addicts) would pass out educational pamphlets and hand out clean needles and syringes as well as collect used ones from addicts. The relationship between this community organization and the police was awkward at best. Using HIV prevention as the front, this community organization was pushing for greater access for injecting users to obtain clean syringes and needles at no or low cost. However, drug use is considered an administrative offense and addicts caught carrying heroin paraphernalia could be detained and sent to compulsory detoxification centers. As a result, community outreach workers must walk a fine line. For every outreach event, this community organization had to notify the local police so that drug users could come out without fearing arrest. On the other hand, staff at the organization also told us that some addicts took advantage of these outreach activities and claimed, when confronted by police, that they were with this organization for recovery services. While suspicious of the utility of such harm reduction approach, police agencies in China have not been reported to exploit these needle exchange programs as a cover to detain drug addicts.

Poly-substance use is also common in China. However, the combination of drugs seems quite different from those found in the United States. For instance, cocaine and marijuana are the most common combination for American heroin users. However, such combination is rare in China.\(^\text{19}\) For heroin addicts, other opioid analgesics, such as tramadol, and benzodiazepines, such as triazolam and diazepam, are often reported in China.\(^\text{20}\) In a study of heroin addicts attending MMT clinics in Yunnan, China, Li et al. found alcohol and tobacco were the most common combination in poly-drug users.\(^\text{21}\)

The cost of delivering treatment appears to be a key factor in the development of effective substance abuse treatment in China, as drug addiction does not receive much sympathy from the public and thus lacks urgency in government funding priorities. With limited funding, the chronically anemic treatment community struggles to cope with the throngs of drug addicts who are mostly destitute and looked down upon by the society in general as well as by their own families.


\(^{19}\) Li et al., “Multiple Substance Use Among Heroin-Dependent Patients Before and During Attendance at Methadone Maintenance Treatment Program, Yunnan, China.”


\(^{21}\) Li et al., “Multiple Substance Use Among Heroin-Dependent Patients Before and During Attendance at Methadone Maintenance Treatment Program, Yunnan, China.”
The Struggle to Combat Illicit Drugs: A People’s War

Annual public campaigns. Much in line with the political tradition of the communist party, propaganda campaigns are regularly launched in China as the main venue to indoctrinate and mobilize the masses to combat illicit drugs. The government has always portrayed its fight against illicit drugs as a people’s war, stirring up public sentiments and enlisting participation from the public. While some political campaigns may be met with skepticism and faked enthusiasm, anti-narcotic activities in general receive widespread support because of the cultural taboo toward drug addiction and the fact that Chinese people, young and old, have long been taught of the national humiliation brought about by the two Opium Wars. School-aged populations aside, governments in different parts of the country also design and organize anti-narcotic campaigns targeting specific geographical regions, such as villagers in rural areas and migrant laborers in the cities. It was estimated that in 2011, these mass-based outreach activities distributed more than 30 million copies of campaign materials such as pamphlets and covered more than 110 million people.22

The Chinese government is particularly enthusiastic about launching national campaigns against drugs around June 26 each year, the International Day against Drug Abuse and Illicit Trafficking, to showcase its resolve to combat drug problems. Massive events are held across the country, featuring visits by high-level government officials to drug treatment facilities and drug enforcement police units, public display and destruction of seized drugs, public gatherings, media blitz of major drug raids, presentations by former addicts, and public trials of drug traffickers.23

Each year one or more pieces of the central government’s drug policy are promulgated, while other themes are reiterated in these national campaigns. For instance, the main feature of the 2011 anti-narcotics campaign was the promulgation of the newly published Regulations on Drug Rehabilitation, which delineates the roles and responsibilities of all stakeholders in the identification and treatment of drug users. Other themes regularly appearing include: establishing and strengthening drug-free communities, and community-based drug treatment facilities. Most of the anti-narcotic slogans remain the same from year to year, casting the government in a paternalistic position that asks society in general to save the drug addicts and then urges drug abusers to treasure their lives and strive to become productive citizens. On and around June 26, the Chinese government also releases its Annual Report on Drug Control, summarizing major accomplishments for the previous year such as drug seizures, number of suspects arrested and prosecuted, addicts registered, and treatment facilities established. These annual reports and other accompanying announcements are typically delivered by ranking officials in the Ministry of Public Security in Beijing and carried by all major news media outlets in China.

Severe punishment as deterrence. Drug trafficking is among the few criminal offenses that that qualifies for the death penalty in China, and the threshold for the capital punishment is relatively low. According to Chinese criminal law, people who smuggle, sell, transport, or manufacture heroin or methamphetamine in an amount greater than 50 grams can be sentenced to 15 years in prison, life imprisonment, or death. Aside from the weight factor, other aggravating circumstances include being the head of a trafficking organization, using armed protection during transportation, or engaging in violent resistance against police inspection.

In the past, the death penalty was typically carried out in an open field as a public spectacle, where the condemned was forced to kneel and then shot in close proximity.

23 Chang Ting, China Always Says “No” to Narcotics (Beijing: Foreign Languages Press, 2004).
range with a rifle. Lethal injection is now the standard procedure and the execution is held away from public view. Prior to the execution, the condemned is allowed to have a final face-to-face meeting with his immediate family. On the final day, the inmate is allowed to order his favorite meal and pick out his favorite clothes before being sent away. A 45-year-old inmate we interviewed in a city in southern China, who was sentenced to death with a two-year reprieve for his role in trafficking 60 kilograms of heroin from Myanmar, described the final hours he spent with his brother-in-law, the leader of the trafficking ring:

On the day of the execution, my sister, her two children and I went to meet my brother-in-law. There were four groups of families in the visiting room. We had breakfast together. None of us were interested in eating. My brother-in-law was calm. He talked to us as if he was leaving on a long trip, asking his children to listen to his mother, to look after each other, and to never ever touch drugs. I think most of them on the death row would tell their families never to get involved in the drug business before they were executed. My brother-in-law was put to death by lethal injection.

Nobody knows how many are executed each year for drug offenses. Watts claimed that China executes 1,700 to 10,000 people each year, which account for seven out of every 10 executions in the world. The last time the Chinese government mentioned executing drug traffickers was in its 2000 annual report, in which brief statements were made on 54 executions in different parts of the country. The Chinese government has since stopped publishing any statistics on the executions of drug traffickers in its annual reports. However, one can still find local news outlets reporting on drug traffickers being sentenced to death. From time to time, stories of executions for drug offenses are also reported in official news outlets in foreign languages.

Three circles of barriers to combat drug trafficking. Based on our interviews with police officials, China’s anti-drug trafficking strategies at the tactical level rely on three major lines of defense, which one provincial official called the “three circles of barriers.” The frontline is along the borders, where border patrols and customs inspections strive to stop the traffickers from entering the country. For the second line of defense, the police attempt to set up blocks along major highways extending from the borders to all other provinces, such as Guangxi, Guangdong, and Guizhou. Around-the-clock checkpoints and random mobile inspections are strategically positioned to stop drugs from further traveling along major highways. Finally, the police establish inspections at all major ports of exits to other provinces and countries, including airports and train stations. One provincial official described that at these barriers: “We rely on a host of measures to catch drug traffickers: human inspectors, machines, drug sniffing dogs, and intelligence.”

Professionalization of drug enforcement. The first police force in China specifically trained and assigned to drug details was in 1982 in Yunnan Province. This was mostly due to the rampant influx of heroin because of Yunnan’s geographical vicinity to the Golden Triangle. As a result, Yunnan’s drug police are probably among the most advanced and well organized in China, as one senior provincial police official noted:

We have a special responsibility in this field. Since the 1980s till now, we have had 20 to 23 years of experience. In comparison, most other provinces started a lot later. We were the first to have a special anti-narcotics police force; many other provinces didn’t even have such specialized police forces until very recently.

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25 Ibid.
However, complaints were frequently voiced by front line police officials over the poor equipment and inadequate firepower. Because of their early and frequent encounters with transborder drug traffickers, drug police in Yunnan have arguably engaged in the most firefights and also suffered the most relative to police agencies in other parts of the country. According one news source, since the establishment in 1982, more than 360 police officers were injured and 40 died on drug enforcement duties. Relative to their Western counterparts, China’s drug enforcement is underfunded. For instance, despite decades of anti-narcotic efforts, China was only able to establish in 2010 a fully operational lab to conduct chemical assays of seized drugs; and the current analysis is limited to major drug ingredients such as opioids and amphetamine-type stimulants.

Drug trafficking organizations in China. With a large addict population, illicit drugs need to move from the border regions into the interior. Needless to say, there are numerous groups of drug traffickers in China that are willing to risk their lives to supply the drug market. However, our field work and existing literature suggest that most drug trafficking groups are loosely affiliated individuals with little hierarchical structure; these are mostly entrepreneurs who utilize their social networks and often times fortuitous opportunities to move drugs. Once any drug trafficking groups come into the investigative focus of the authorities, few can escape the eventual harsh punishment. Large trafficking groups, especially those with any name recognition in the drug business, are surely inviting attention from the authorities. With all the drug enforcement strategies in China, nothing commands a higher priority than identifying and breaking up criminal organizations in drug trafficking. As a totalitarian society, nothing poses a greater threat to the political establishment than extralegal organizations, let alone ones that engage in illicit drugs.

Almost without exception, crackdowns of major drug trafficking organizations are announced around June 26 each year to coincide with the rollout of annual counternarcotic campaigns. For instance in 2011, China broke up a 52-member criminal gang that organized HIV-positive people and juveniles to transport drugs. The group leader, Liu Fucheng, was sentenced to death. One unique feature in the drug trafficking business in China is the absence of widespread violence. Sporadic violence erupts when drug traffickers of large consignments are cornered by police; these traffickers may resort to violent resistance to avoid the certain death sentence. Though statistics on drug-related homicides are not available, violent rivalries or fights among drug traffickers or street vendors are almost unheard of. Unlike their counterparts in Latin America that are known for extreme violence and openly challenging the authorities, Chinese drug trafficking organizations consist mostly of low-key entrepreneurs who are doing everything possible to avoid detection by and confrontation with the police or each other. Making money quietly is their motto.

Extensive use of confidential informants. Most drug enforcement officials in China will be quick to admit that they operate an extensive network of informants, many of whom are developed from the arrested traffickers. These informants provide vital information about the flow of drugs and names of major players in the region. All officials we interviewed in this study agreed that without intelligence development and maintenance of large networks of informants, drug enforcement will not likely make any progress. One senior official in Guangdong Province put it bluntly:

Random inspections and checkpoints on major highways are basically useless. Even in the United States after the September 11, less than five percent of shipping containers are inspected. In Guangdong, which relies on ex-

port and import businesses, we have neither the manpower nor the equipment to inspect the millions of containers. Here is an example: a few years back, the Guangdong provincial government spent 1.2 million yuan (about $146,000) to set up checkpoints on all major trans-provincial highways to inspect passengers and cargo vehicles in an effort to stop the flow of drugs. Guess what the result was by the end of the yearly campaign? A total of about 500 grams of heroin were found on only two occasions. And in both incidents, we received concrete intelligence pinpointing the specific vehicles. In other words, without intelligence, nothing would have come out of this massive inspection campaign.

This observation seems to match what we learned from our conversations with convicted traffickers in prison. In all cases, someone had informed the police of their plans, and a trap was set up. Information sharing and joint investigations are considered the backbone of drug enforcement in China. Officials interviewed for this study were clear how their tasks differed from those of their colleagues in regular criminal investigations.

A Look into the Future: Reforms in China’s Drug Control Policy

Because of its growing drug addict population, China is struggling to stem the rising trends in both consumption and sales of illicit drugs. There are many things China can do better. Domestically, China needs to establish a reliable drug market forecast system, which combines chemical composition analysis, reports and urine tests of arrested drug abusers, and community informants on the trends of illicit drug use and pricing information. These vital signs are critical in understanding the direction of the illicit drug market and mobilizing resources.

In addition to drug use forecast, centralized efforts are also needed develop a treatment framework that is not only culturally sensitive but can also withstand rigorous empirical assessment. The Chinese government has recognized that a community of researchers and treatment professionals specialized in drug treatment and recovery is needed to augment the police-led compulsory treatment and labor camp approach in dealing with addicts. Moreover, China has banned the use of labor camps for the purpose of rehabilitating drug addicts. Needle exchange programs and medical treatment such as methadone maintenance clinics should be greatly expanded under the auspices of public health agencies not only because they are far more humane than the traditional compulsory treatment facilities but also because they reduce risks to public health for a host of infectious diseases. Systematic and rigorous research is of vital importance to assessing any treatment and recovery services. There are two major shortcomings in current drug treatment in China: (1) a lack of venues for practitioners and researchers to share and exchange ideas and experiences; and (2) a general lack of capacity in conducting rigorous clinical tests and assessment of treatment protocols in practice. Drug treatment in China remains either a fringe enterprise endeavored by a few do-gooders in the community or by the criminal justice system that believes in the simple method of manual labor and deprivation of personal freedom.

Internationally, China can improve its collaboration with neighboring countries and the United States by minimizing political interference. For years China has worked to increase collaboration with its neighboring countries to combat cross-border trafficking activities, such training drug enforcement police officers and providing financial incentives to encourage farmers to grow replacement crops in place of opium poppy. China also pressures its neighboring countries to be more forceful in eliminating opium cultivation and the trafficking of heroin and other drugs across their borders into China. Despite its eagerness to seek cooperation from neighboring countries to help reduce the influx of illicit drugs, China’s growing economic and political power in the region also make these neighbors nervous. Many of these neighboring countries have long been weary of China’s growing influence in the region. However, our interviews with the regional law enforcement representatives also suggest that when it comes to drug trafficking
in Southeast Asia, it is difficult to avoid running into Chinese criminal organizations. Trafficking groups made up of ethnic Chinese rely on their extensive contacts within the Chinese enclaves in the region to purchase and transport drugs to places where profits can be made.32

As a result, international collaboration is critically important in China’s effort to combat drug trafficking. However, such international efforts are often clumsy and bureaucratic. Although every provincial police agency has a foreign affairs office assigned to coordinate and assist with investigations involving international matters, all activities must go through the central government in Beijing. This significantly increases the complexity and burdens of all parties involved.

Despite the relentless and draconian counter measures, China’s drug problem does not seem to have subsided much. After a few years of progress in the mid-2000s, the Chinese government is now acknowledging that the country has a long way to go in controlling illicit drugs and faces increasing challenges from transborder drug traffickers because of its geographical proximity to the two most significant drug producing regions in the world—the Golden Triangle and the Golden Crescent. In short, China is surrounded by ample supplies of heroin and amphetamine-type stimulants (ATS) drugs.

The future of drug trafficking in China is caught between two conflicting forces. On the one hand, China’s booming economy and the frenzy among the populace to become rich will undoubtedly encourage entrepreneurship in all types of commercial trade, licit or illicit. Drug trafficking, with its tremendous profits, will continue to draw risk-takers who are limited in conventional opportunities for any substantial material prosperity. China is surrounded by cheap supplies of heroin and ATS drugs. Coupled with a growing economy and greater convenience in travel and commerce, it would be naïve to believe that the drug situation can improve quickly. On the other hand, the strong social stigma surrounding illicit drugs, coupled with an unforgiving penal system and totalitarian government, will likely limit the growth of the addict population and the number of daring entrepreneurs. There is little moral ambiguity about illicit drugs in China. Therefore, China’s anti-narcotic measures may seem draconian by Western standards, such as the use of the death penalty for drug traffickers and compulsory detoxification centers and labor camps. The question becomes what price is China willing to pay to curtail its drug problems? Harsh legal sanctions to scare off prospective risk-takers coupled with draconian treatment conditions to deter drug users are their current strategies in combatting the drug problem. However, neither seems to have worked particularly well, judging from the ever increasing size of addict population and amounts of drugs seized by police. While not a silver bullet, perhaps China perhaps should also consider experimenting with a more compassionate approach oriented toward harm reduction.

Sheldon X. Zhang is Professor of Sociology at San Diego State University. His research focuses on transnational organized crime and the evaluation of research on offender rehabilitation. He is the author or co-author of six books and edited volumes, and numerous articles. His forthcoming book, co-authored with Ko-lin Chin, The Chinese Heroin Market: Cross-Border Drug Trafficking Between Burma and China (New York University Press), focuses on drug traffickers in China and Southeast Asia, their social organization, and regional law enforcement practices.

Ko-lin Chin is Distinguished Professor in the School of Criminal Justice at Rutgers University. He has written extensively on issues related to Chinese crime groups and networks, human smuggling organizations in China and the United States, drug producing and trafficking groups in the Golden Triangle, and sex trafficking networks in Asia and the United States. He is the author or co-author of nine books and edited volumes.

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