

*Small-Scale
Research Report*

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Understanding Drug Use as a Social Issue

A View from Three Villages on the Outskirts of Battambang Town

**Analyzing Development Issues
Trainees (Round 13) and Team**

April 2004

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Abstract

This study conducted by the Analyzing Development Issues (ADI) project team and Round 13 trainees seeks to understand the social implications of drug use in three villages just outside of Battambang town. More specifically, the research explores the trends of drug use among young people, examines its causes and consequences, and assesses its impact on family and community life.

The study reveals that most of the drug users were young single men who had been introduced and sustained in their habits by their friends. Peer group influence was a major reason why youth started, and continued, to take drugs. Invariably drug users suffered adverse effects from their addictions such as ill health, losing self-control, and dropping out of school. Families of drug users experienced a loss of economic productivity and conflicts among members. Community residents reported more thefts, more fighting, and a general lessening of security. Since parents and local authorities lacked in-depth knowledge about drug addiction, actions taken by them were largely ineffective. The study suggests that as long as law enforcement remained weak and community residents stayed immobilized, drug use in the three villages was likely to continue.

Understanding Drug Use as a Social Issue: A View from Three Villages on the Outskirts of Battambang Town

Problem Statement

Cambodia's transition to a market economy in the early 1990s opened up trade relations with other Southeast Asian nations and came to have far reaching consequences for the country. While most of this trade is legally sanctioned, there are products transported through Cambodia, and sold within the country itself, which are unquestionably illegal. The trafficking of illicit drugs is one such activity.

Until the mid-1990s drug use was primarily associated with foreigners and wealthy Cambodian youth. However, by the late 1990s drug use was on the rise among young Cambodians from all social strata. This was particularly true of drugs in the category of amphetamine-type stimulants (ATS), the most common known locally as *yaba* or *yama*. In the new millennium the flow of amphetamines into Cambodia has reached staggering proportions. The U.S. Department of State reports that: "Cambodia has experienced a significant increase in recent years in the amount of amphetamine-type stimulants (ATS) transiting from the Golden Triangle. The UNODC [United Nations Office on Drugs and Crime] estimates that 100,000 methamphetamine tablets enter Cambodia each day, some 75 percent of which are thought to be exported to Thailand."¹ This means that, even after discounting the drugs transported through the country, more than 9 million ATS tablets remain in Cambodia each year from this source alone.

In addition to the ATS trade that originates from the northeastern border of Cambodia, the UNODC reports that: "Methamphetamine is the major drug that continues to be trafficked from Thailand into the western and northwestern provinces of Cambodia.... Districts in Battambang and Banteay Meanchey provinces are believed to be 'hot spots' for such trafficking."² The UNODC report underscores that while the importation of ATS from Thailand into this region of Cambodia has existed for several years, the quantity appears to have increased due in part to greater local demand, especially in urban areas. The UNODC report further documents an apparent increase in the trafficking of precursor chemicals into Cambodia for the local production of ATS.³

The provincial town of Battambang in northwestern Cambodia lies along a major drug trafficking route. This ADI study endeavors to explore the trends of drug use among young people in three villages on the outskirts of the town. The research similarly attempts to identify the causes and consequences of drug use among young people,

¹ *International Narcotics Control Strategy Report, 2003*, Released by the U.S. Department of State Bureau for International Narcotics and Law Enforcement Affairs, March 2004.

² *Summary Report of the Illicit Drug Situation in Cambodia, 2002*, United Nations Office on Drugs and Crime Regional Centre for East Asia and the Pacific.

³ *Summary Report of the Illicit Drug Situation in Cambodia, 2002*.

examine the effects of drug use on family life, and assess the impact of drug use on community life.

Research Objectives

- To explore the trends of drug use among young people.
- To identify the causes and consequences of drug use among young people.
- To examine the effects of drug use on family life.
- To assess the impact of drug use on community life.

Key Questions

Trends of Drug Use

1. In the past five years has drug use among young people increased, decreased, or remained the same? What are the reasons for this? What are the age groups of the drug users? Their gender? Their social economic backgrounds?
2. What are the types of drugs used? Before and now? When did users start taking drugs? Reasons for taking these types of drugs? Access to drugs? Costs of drugs? Frequency of use? Time and location of drug use? How do drug users support their habit? Do they have legitimate jobs? Deal drugs? Steal? Become sexual workers?

Causes and Consequences of Drug Use

1. What are the circumstances that give rise to drug use? Circumstances within the family? Among peer groups? At school? At work sites? During migrant work? Between boy and girl friends? What makes drug use attractive? Do drug users try to persuade others to use drugs?
2. What happens to young people because of drug use? Are they still accepted by their families? By other villagers? Do they still attend school? Do they work? Do they still go out with their old friends or only with other drug users? Have they ever been arrested? Has their health been affected? Are they aware of HIV/AIDS? Do they use needles? Do they use condoms?
3. Have the drug users ever tried to stop taking drugs? Have they ever entered a drug center or drug program? Is it possible for them to stop taking drugs without any medical assistance?

Effects on Family Life

1. What are the social economic circumstances of the drug user households? Composition of household members? Biological parents or stepparents? Both parents living at home? Ages and gender of children living at home? Livelihood sources of households? Involvement in labor migration? Are the households better-off, medium, poor or very poor?

2. How many household members are taking drugs? When did they start taking drugs? What type of drugs do they use? How did they come to take drugs? Working away from the village? Going out with their friends at night? Getting drugs at school? Were parents aware that drug use was a problem in the village before their child started to take drug? Were parents aware of the consequences of drug use before their child began to take drugs? Are the parents aware of the consequences now?

3. How has drug use affected the behavior of young people? Have they become violent? Lost interest in life? Suffered health problems? Become involved in theft or other crimes? How has drug use affected other members in their household? How has it affected the relations of their household with other villagers? How has drug use affected the livelihoods of their households? Do they spend more money on health costs? Have their households become less productive?

4. Have parents been able to deal with the drug use problem of their children? What have they done? Is it possible for their children to stop taking drugs without medical assistance?

Impacts on Community Life

1. What is the social economic background of the village? What percentage of village households are better-off, medium, poor or very poor? What are the livelihood sources in the village? What have been major changes in the village in the past five years? What are the major problems?

2. Is drug use a problem in this village? When did the problem start? Who is involved? How did they become involved? What are the reasons for this? Are the households with drug users mostly better-off, medium, poor or very poor? Are they long time residents or recent arrivals?

3. What aspects of community life have been affected by drug use? Has security been affected? Has there been more theft? More fighting? Gang activities? Disruption of community events? Has there been a drop in school attendance? Are parents afraid that their own children might become drug users? Has there been an increase in HIV/AIDS or other health problems? Have young people left their homes? What has been the affect on household livelihoods? Have drug user households become less productive and poorer? What has been the affect on community development activities? Has drug use affected the involvement of users or members of their households in community development activities?

4. How have people responded to the problem? Parents? Teachers? Local authorities? Police? NGOs? What still needs to be done?

Research Methods

This Analyzing Development Issues (ADI) research was conducted by 15 ADI Round 13 trainees with assistance from 5 ADI facilitation team members. In all 10 men and 10

women were involved in the study. The field research was conducted from February 19-20, 2004 in three villages of Battambang district on the outskirts of Battambang town: Anchanch and Ocha villages in Ocha commune, and Romchek 1 village in Rattanak commune. The trainees were divided into three teams with each team responsible for gathering information in one of the three villages.

Two primary research methods were used: focus group interviews and survey questionnaires. Focus group interviews were conducted in the three villages with key village and commune leaders, and with non-drug using youth. Survey questionnaires were also conducted through purposive sampling in the three villages with drug users, drug user households (in most cases not those of the drug users interviewed), and non-drug user households.

In Anchanch village 11 drug users, 13 drug user households, and 17 non-drug user households were interviewed. Similarly, in Ocha village 9 drug users, 9 drug user households, and 22 non-drug user households were interviewed. In Romchek 1 village 10 drug users, 11 drug-user households, and 21 non-drug user households were interviewed. Thus in all three villages 30 drug users, 33 drug user households, and 60 non-drug user households were interviewed.

Findings and Analysis

Trends in Drug Use

Drug User Profiles

In the sample of drug users and drug user households, the taking of drugs was a fairly recent phenomenon starting predominantly from 1998 and increasing steadily thereafter (Table 1). All of the 30 drug users interviewed were male primarily between the ages of 15 to 22. Similarly, all of those taking drugs in the 33 drug user households were male, mostly from the same age group.⁴ Among the 30 drug user respondents, only 3 were still going to school. Four of the 30 drug users were married and two of these had children. Of note, nine of the 30 drug users interviewed had at least one stepparent. Seven of the 30 drug takers had at least one parent that was not living at home.

	Drug User	Drug User Household*
Before 1998	2	0
1998-2000	6	7
2001-2002	9	13
2003-2004	13	15
	n=30	n=33

*Some households had more than one child taking drugs.

⁴ A large-scale study undertaken by the NGO Mith Samlanh-Friends reports that girls in Phnom Penh were increasingly using drugs; a pattern that may emerge in the future in Battambang as well. See Mith Samlanth-Friends, *Drug Use and HIV Vulnerability*, Phnom Penh, July 2002.

In general, the drug users and drug user households ranked their households poorer than the non-drug user households ranked theirs, although there was, nevertheless, a wide variation of economic status within each group of respondents (Table 2). This indicated that while the non-drug user households were somewhat more well to do than the households of drug users, young people from medium and better-off households had likewise been involved in drug use. Similarly, while the educational attainments of drug users and drug user household respondents were slightly lower than those of non-drug user household respondents, several interviewees from the first two groups had reached higher grades. This indicated that low educational attainment was not a sole factor in drug use.

Table 2. Economic Status of Household, by Drug User, Drug User Household, and Non-Drug User Household, February 2004			
	Drug User	Drug User Household	Non-Drug User Household
Better-Off	1	4	8
Medium	6	8	26
Poor	17	15	22
Very Poor	6	6	4
	n=30	n=33	n=60

Livelihood sources pursued by households in the villages studied provided members with a degree of independence. Despite the slight differences in economic status, the drug user and non-drug user households both relied primarily on wage labor, petty trade, and small businesses for their subsistence. Only small numbers of households relied on rice and *chamcar* (cash crop) farming (Table 3). Unlike in farming where households usually work together as a unit and subsist on a clearly delineated harvest, wage work and involvement in small enterprises often means that household members work and earn separately from each other. While a portion of each member's earnings is pooled to collectively support the household, a portion is invariably retained as the disposable income of individuals. This enables even young people to have some independent buying power from their parents. Traditionally, young men in Cambodia have been given more freedom to work outside of the village than young women, although the custom to keep women at home has undergone some change.

The mobility of drug users and drug user households was underscored by their involvement in migrant work.⁵ Almost half (14 of 30) of the drug user respondents had worked as migrant laborers. While several had worked nearby in Battambang town, others had worked further away in Pailin, Poipet (Banteay Meanchey), Sre Ambel (Koh Kong), and Thailand. Similarly, nearly half (16 of 33) of the drug user households interviewed had members (not necessarily the drug users) who had worked as migrant laborers. These members had worked in Battambang town, Pailin, Samlot, Poipet (Banteay Meanchey), Kompong Chhnang, and Thailand. By comparison, only about one-

⁵ The Mith Samlanh-Friends study reports that in Battambang town families often sent their children to work in Poipet, Banteay Meanchey or Thailand without an awareness of the existence and easy availability of drugs. See Mith Samlanth-Friends, *Drug Use and HIV Vulnerability*.

fifth (13 of 60) of the non-drug user households had members who had worked as migrant workers.

	Drug User Household	Non-Drug User Household
Rice farming	1	5
<i>Chamcar</i> (cash crops)	4	3
Sell labor	14	0
Small business	3	26
Petty trade	7	11
Moto taxi	6	6
Carry Soil	1	0
Construction worker	7	6
Migrant labor	2	4
Make incense	18	0
Civil servant/soldier	2	6
Buy recycling material	5	0
Sewing	1	2
Motor repair	1	1
Carpenter	1	3
NGO	0	5
Retired	0	2
Washing clothes	0	2
Wash bottle	0	1
Rice mill worker	0	1
	n=33	n=60

Drug Use Behavior

All 30 drug users interviewed said that the first drug they started to use was amphetamines (*yaba*).⁶ Amphetamines still remained the drug of choice for these respondents, although four claimed that they had now stopped using, at least temporarily. Generally, users found the drugs accessible and affordable. Two-thirds (20 of 30) of the drug users said it was easy to buy drugs when they had money. This was largely because they knew the drug dealers well. The other one-third declared that it was difficult to buy drugs mainly because they feared being arrested by the police. Still this did not deter them from accessing the drugs. The price of amphetamines (*yaba*) too was relatively cheap. The 26 drug users who were currently taking *yaba* placed the cost per tablet at from 5000 to 7000 riels (about US\$ 1.25 to US\$ 1.75).

Among the drug users sampled the frequency of drug taking varied, as did the amounts used. Many respondents used drugs irregularly while others took drugs one, two, or three times a day. Similarly, some users shared one or two tablets among friends while others consumed more than five tablets per day. Most of the *yaba* was inhaled. A large majority

⁶ Comparatively, the Mith Samlanh-Friends study, which was undertaken with a large proportion of street children, reports that in Battambang town 89% of the drug users sampled had taken glue, while only 22% had taken *yaba*. See Mith Samlanth-Friends, *Drug Use and HIV Vulnerability*.

took drugs with others in groups, while only a few took drugs alone by themselves. The preferred places for taking drugs were quiet areas in the village such as in the rice fields or at the pagoda crematory, and the preferred time was normally in the evenings. Generally, the drug users did not want others to see them. Several were afraid of the police.

Notably, the persons who introduced drug users to drug taking in the three villages studied were predominantly their friends. This pattern was reported by the drug users themselves and observed by respondents from both drug user and non-drug user households (Table 4). Among the drug takers peer groups had emerged as an important focal point in their lives and the influence of their friends had come to have considerable bearing on their behavior. Perpetuating the trend, a few drug users in the sample (4 of 30) acknowledged that they had persuaded other people to take drugs.

Table 4. Persons Who Introduced You, Your Child, or Young People to Drug Taking, by Drug User, Drug User Household, and Non-Drug User Household, February 2004			
	Drug User	Drug User Household	Non-Drug User Household
Friends	25	29	48
Person themselves	2	0	0
Brother or sister	2	0	0
Drug dealer in village	1	1	11
Drug dealer in Battambang town	0	0	2
Boy friend or girl friend	0	0	2
Employer when migrant worker	0	0	2
Don't know	0	4	9
	n=30	n=33	n=60

Moreover, drug users relied primarily on their friends to support their drug habits through the sharing of money or drugs. This helped to mutually sustain their addictions. At the same time drug users acknowledged that they stole money from their own families and from other people to buy drugs. A small number also dealt drugs to get drugs. About one-third of the drug users spent earnings from legitimate work to support their habits. Respondents from drug user and non-drug user households observed these patterns among drug users, although the non-drug user households mentioned stealing as a source of support more often than those with drug users in their households (Table 5).

Tellingly, many of the drug users interviewed had tried to break their drug habits but they had little success. In all, 24 of the 30 drug users respondents declared that they had tried to stop using drugs. Of these, 14 said that they were able to stop temporarily, while 10 others admitted that they could not stop at all. Several strategies were tried. Some users stopped going out with their drug user friends. Some ate citrus fruit like mango and lemon to curb their taste for drugs. Some even moved out of the village for a while. Some also worked hard, exercised, smoked cigarettes, or tried to fill themselves with *yaba* to

the point where it would no longer be enjoyable. Half of those who tried to stop emphasized the need to be strongly committed to stop.

Half (15 of 30) of the drug users interviewed recounted that they did not realize it would be difficult for them to stop taking drugs when they first started. This revealed that, early on, they were rather ignorant about drug use and drug addiction. Even now a large majority (26 of 30) of the drug users maintained that it would be possible for them to stop taking drugs without medical assistance. While many of the drug users included in the survey were, by appearance, not heavily addicted, their confidence in their unaided ability to stop seemed misplaced. In cases of amphetamine addiction the cessation of drug use without medical treatment was highly unlikely.⁷ In Anchanh, village leaders reported instances of drug users without *yaba* cutting their arms and sucking their blood to forestall the effects of amphetamine withdrawal.

Table 5. How You, Your Child, or Young People Support Drug Habit, by Drug User, Drug User Household, and Non-Drug User Household, February 2004			
	Drug User	Drug User Household	Non-Drug User Household
Get money or drugs from friends	17	11	26
Have legitimate work	12	9	12
Steal from family	7	5	25
Steal from other people	5	6	31
Get money from family	3	6	25
Deal drugs	2	1	1
Sell sex	0	1	1
Don't know	0	6	14
	n=30	n=33	n=60

While most parents were anxious to help their children with drug problems, they had little in-depth knowledge of drug addiction and therefore their interventions were largely ineffective.⁸ Almost half (16 of 33) of the drug user households interviewed did not even know what kind of drugs their members used. Nonetheless, 20 of the 30 drug user respondents said that their parents had done something to help them stop. But this usually involved nothing more than parents advising their children to stop without giving them a clear method on how to stop. A few parents tried to keep their children at home and prohibit them from going out with their drug user friends. One parent even chained his child inside the house. Parents of two drug users entered their sons in drug center programs in other areas. One of the drug users enrolled said that he had stopped using

⁷ Medical studies report a high prevalence (about 87%) of amphetamine withdrawal among amphetamine users. This compares to a prevalent rate of 91% for opiate withdrawal and 86% for cocaine withdrawal. See Manit Srisurapanant, Ngamwong Jarusuraisin, and Phunnapa Kittirattanapaiboon, *Treatment for Amphetamine Withdrawal (Cochrane Review)*, The Cochrane Library, Issue 1, 2004.

⁸ See also Mith Samlanth-Friends, *Drug Use and HIV Vulnerability*.

drugs. The other simply reported that the program provided education on the consequences of drugs.

While local authorities were less involved than parents, their knowledge of drug addiction was similarly limited and their actions likewise ineffective. By contrast with parent intervention, only 10 of the 30 drug users interviewed stated that the local authorities had educated them about drug use. Usually, the authorities just told them to stop using drugs and causing problems in the village. They too provided no clear method to the users on how to overcome their amphetamine addiction.

Causes and Consequences of Drug Use

Reasons for Taking Drugs

Perhaps contrary to popular belief, drug users did not primarily take drugs because they were beset with problems but because they found it attractive. They wanted to be accepted by their friends, to try something new, and to be happy. This again underscores the influence of peer groups and the importance of social networks in supporting drug use. Intriguingly, the drug users interviewed often talked about "being pulled" into drug use by their friends. Meanwhile, modern lifestyles in other Asia countries, and particularly in Thailand, were depicted daily in television broadcasts and in movies shown regularly in public places in Battambang town. In this media exposure to new hairstyles, clothes, and body ornamentation drug use was often associated with being modern and cool.⁹ Young boys wanted to try or "taste" it. In addition, young men working as migrant laborers near the Thai border or in Thailand learned that they could work longer hours and earn more money by taking amphetamines. Observations made by respondents from drug user and non-drug user households, about why their child or why young people took drugs, were largely consistent with the reasons given by the drug users themselves (Table 6).

Table 6. Reasons Why You, Your Child, or Young People Take Drugs, by Drug User, Drug User Household, and Non-Drug User Household, February 2004			
	Drug User	Drug User Household	Non-Drug User Household
Be accepted by friends	20	24	41
Bored with life – Want to be happy	8	2	16
Want to try it	5	13	5
Able to work long hours without getting tired	5	0	2
Family problems	4	3	9
Don't know	0	4	19
	n=30	n=33	n=60

⁹ See also Mith Samlanth-Friends, *Drug Use and HIV Vulnerability*.

The Story of Rim Samath

Rim Samath was born in Siem Reap, the second child in a family of 10 siblings. He was 23 years old and still single. His parents were relatively poor petty traders who moved from Siem Reap to Phnom Penh to Battambang to deal with the jealousy of his father who was overly possessive of his mother. Frequent changes of residence disrupted Samath's education as did the recurrent domestic violence that plagued his household. At the age of 20 Samath migrated to Thailand to work carrying bags of sugar at a factory. It was at that time that he started to take amphetamines (*yaba*) everyday along with many of the other workers. He found that the drugs gave him energy and allowed him to work for long hours without feeling sleepy or hungry. But the drugs also made him feel weak and dizzy and he became thin and anxious. Although he wanted to stop his friends persuaded him to continue.

Samath was now back in Battambang living with his family in Ocha village. He worked irregularly in Pailin loading wood and logs and continued to take drugs. When he worked, he earned Thai Baht 100 (about US\$ 2.50) per day but spent much of this on drugs. Occasionally, he gave his mother some money to buy rice. Samath friends were mostly other drug users. Other people his age who did not use drugs largely avoided him. Some of his neighbors likewise were afraid that he would steal their belongings to buy drugs. His mother often complained about his drug use and threatened to have the police arrest him. He had tried to stop using drugs but when he was tired he needed the drugs to function. Samath had never entered a drug rehabilitation program.

Effects of Drug Use on Drug Users

While a large majority of the 30 drug users interviewed maintained that they had more fun as a result of their drug use, they were equally forthcoming about the adverse consequences they endured. Most had suffered health problems. These included becoming thin and pale, being tired, being unable to sleep, loss of appetite, and fever. Many had also experienced losing self-control, becoming involved in fights, and/or dropping out of school. Some users acknowledged that they had been arrested by the police, had stopped working, had been involved in crime, and/or had lost interest in life. While the responses of the drug user households about the effects of drug use were fairly consistent with the drug users themselves, the perceptions of the non-drug user households about the consequences of drug use were considerably harsher (Table 7).

Table 7. Effects of Drug Use on You, Your Child, or Young People, by Drug User, Drug User Household, and Non-Drug User Household, February 2004

	Drug User	Drug User Household	Non-Drug User Household
Have more fun	23	0	0
Suffered health problems	23	19	34
Lost control of self	14	13	14
Involved in more fights	9	8	38
Dropped out of school	8	12	36
Arrested by police	5	5	24
Stopped working	2	6	14
Lost interest in life	1	3	4
Involved in crime	1	1	11
Left home	0	0	16
Don't know	0	2	8

The Story of Heng Ly

Heng Ky lived in Anchanh village in Battambang with his wife and two children. He was 25 years old. He had taken amphetamines (*yaba*) since 1998 when he worked in Poipet, Banteay Meanchey loading and unloading goods. The drugs made him feel stronger and happier. He took the drugs three times a day and found that he did not need to sleep or to eat. Slowly, he became addicted to the drugs and suffered withdrawal when he stopped temporarily or reduced his normal intake. As he began to spend more of his earnings on drugs, he had little or no money to send home.

Ly continued to take drugs after he was married and back in Anchanh village. Unlike most other users, he normally took the drugs alone at his home to avoid drawing the attention of the police. He brought the drugs with money that he had earned himself but also with money that he had stolen from his family. Ly noticed that he was having more arguments with his parents and other family members, and that his neighbors were avoiding him. He decided to stop using drugs. He tried various treatments – filling himself up with *yaba*, eating fruits and sweets, taking baths – and although he suffered anxiety, body shakes, and exhaustion, he said that he was able to stop. Ly maintained that he was no longer taking drugs but that he felt like he was still addicted.

Clearly drug use had taken a toll on interpersonal relationships. More than half of the drug users interviewed reported that, as a consequence of their drug use, they had more arguments with their parents and other household members. Many had left home, at least for short periods, had fewer friends, and had problems with other villagers, local authorities, and the police. Some countered that they also had more friends now among their fellow drug users. Drug user households noted similar breakdowns in the relationships of their drug using children (Table 8).

Table 8. Effects of Drug Use on Your or Your Child's Relationships With Others, by Drug User and Drug User Household, February 2004

	Drug User	Drug User Household
Have more arguments with parents and other household members	16	13
Have fewer friends	13	2
Have left home/ escape from house	11	8
Have more friends	7	0
Have problems with local authorities	5	3
Have problems with other villagers	4	3
Have problems with police	3	6
Have normal relations with others	0	6
Don't know	0	6
	n=30	n=33

Effects on Family Life

The 33 drug user households interviewed revealed that the drug use of their members had serious adverse economic effects on their families. Many respondents acknowledged that their households were less productive than before and that their children who used drugs no longer contributed to household livelihoods. Meanwhile households were spending more money on health costs incurred by drug using members. Likewise disturbing, other children in drug user households had started to take drugs, no doubt influenced by their older siblings. Observations made by non-drug user households similarly noted these patterns. However, the non-drug user households furthered emphasized that the drug user households experienced loss of property through the theft of their children, more fighting among household members, and avoidance by other villagers (Table 9).

Drug user households (30 of 33) were particularly worried that their children who used drugs would introduce it to their other children who did not take drugs. Notably, a large majority (46 of 60) of non-drug user households were likewise concerned that their own children might become drug users. Most (54 of 60) non-drug user households claimed that they had talked to their children about the effects of drug use. The most common advice given was not to follow the drug users. But early parental warnings were not a guarantee against drug use. A large majority (29 of 33) of the drug user households sampled claimed that they had warned their children about drug use prior to their taking of drugs. Most (23 of 30) drug users interviewed likewise admitted that their parents had warned them about taking drugs before they had started to use.

Table 9. Effects of Drug Use on Drug User Households, by Drug User Household and Non-Drug User Household, February 2004		
	Drug User Household	Non-Drug User Household
Household less productive than before	16	17
Drug user children no longer contributed to livelihood	14	15
Other children in household have started to take drugs	6	12
Spend more money on health costs	6	8
Household avoided by other villagers	3	20
No effect	2	2
Household less involved in community development activities	1	4
Household lost property through theft of children	0	33
More fighting among household members	0	31
Don't know	3	15
	n=33	n=60

In general, the non-drug user households empathized with the parents of the drug users in the village. Of the 60 non-drug user respondents, 31 thought that the parents of drug users should be given counseling, 17 that they should be given support, and six that they should be treated normally. By contrast, among the 60 non-drug user households interviewed, only five thought that the parents of drug users should be avoided, four that they should not be trusted, and one that they should be blamed.

While non-drug user household attitudes towards parents of drug users were generally positive, attitudes towards drug users themselves were more mixed. Of the 60 non-drug user respondents, 24 thought that the drug users in the village should be encouraged to stop, nine that they should be given medical assistance, and three that they should be treated normally. By comparison, among the 60 non-drug user households interviewed, 18 thought that the drug users should be avoided, 16 that they should not be trusted, and 10 that they should be punished.

Impacts on Community Life

With respect to the effects of drug use on community life, security issues were paramount. Large numbers of drug user and non-drug user households reported that there had been more theft, more fighting, more gang activities, a disruption of community events, and a general worsening of security in the village as a result of drug use. Many drug users had also dropped out of school and left home, and parents were increasingly worried about their children. Some respondents noted an increase in HIV/AIDS and several indicated that there was more distrust among villagers (Table 10). While government and NGO programs sought to reduce poverty, promote education, and build solidarity among villagers, drug use had insidiously worked to undermine these efforts.

At present, drug use in the three villages did not appear to be a major factor in the spread of HIV/AIDS. Still the relationship between drug use and HIV/AIDS was of some concern. Of the 20 drug users interviewed who were sexually active, only 14 said that they used condoms. Moreover, one of the drug users interviewed shared needles with others. High-risk behavior among amphetamine users clearly had potential for increased HIV transmission.¹⁰

Strikingly, 56 of 60 non-drug user households sampled stated that drug use was a problem in their village. At the same time, most of those interviewed looked to parents and designated authorities to take action against the drug use of young people in their midst. Of the 60 non-drug user households interviewed 38 mentioned parents as those who should take action, 38 named the police, 35 cited the local authorities, 29 specified the district and provincial authorities, and 22 identified the teachers. Only 16 of the 60 respondents indicated that other villagers should take action about the drug use problem in their communities. This revealed a prevailing passivity among the non-drug user households about how to address the issue of drugs. At the same time only 8 of the 33 drug user households had asked assistance from others to help solve the drug problem of

¹⁰ See also Mith Samlanth-Friends, *Drug Use and HIV Vulnerability*.

their children. This too indicated a virtual helplessness among parents about how to reach out to others to deal with the drug affliction that had claimed their children.

Table 10. Effects of Drug Use on Community Life, by Drug User Household and Non-Drug User Household, February 2004		
	Drug User Household	Non-Drug User Household
More theft	20	43
Security in village has worsened	19	32
More fighting	18	30
More gang activities	15	19
Parents worried that their children might become drug users	14	25
Drop in school attendance	13	19
Children have left home	13	15
Disruption of community events	12	19
More distrust among villagers	12	7
Increase in HIV/AIDS	6	7
Less involvement in community development activities	4	3
Don't know	2	5
	n=33	n=60

Conclusions

Cambodia's transition to a market economy opened up borders and spurred trade with neighboring countries. In large measure this trade offered the promise of a better life for most Cambodians. But left unregulated it threatened to exacerbate existing social inequities and tear apart the very fabric of society. Together with the trafficking of human beings, the trafficking of drugs represented one of the most vile and despicable forms of trade to have emerged within the free market economy.

By all accounts, the flow of amphetamine-type stimulants (ATS) into Cambodia in recent years has reached staggering levels. Some of this originated from northeastern borders and some from northwestern and western borders. Import of precursor chemicals has likewise given rise to the local production of ATS. On the one hand, law enforcement activities in the country have increased with seizures of 210,000 ATS tablets in 2003 compared with seizures of 130,000 ATS tablets in 2002.¹¹ On the other hand, these seizures paled when compared to the estimated 100,000 ATS tablets per day which passed through northeastern borders alone. The U.S. Department of State linked the country's weak drug law enforcement to widespread corruption. It argued that: "Corruption remains pervasive in Cambodia, making Cambodia highly vulnerable to penetration by drug traffickers and foreign crime syndicates. Senior Cambodian

¹¹ *International Narcotics Control Strategy Report, 2003.*

government officials assert that they want to combat trafficking and production; however, corruption, abysmally low salaries for civil servants, and an acute shortage of trained personnel severely limit sustained advances in effective law enforcement."¹²

In the villages studied corruption was embedded in local networks which included drug sellers, district officials and police, village and commune authorities, and drug users. For example, village and commune officials complained that drug sellers handed over to the district police were released once they paid a fine. In one instance a local drug dealer was reportedly released after his family paid 20,000 Thai Baht (about US\$ 500) to the police. This represented a significant amount of money for local families and indicated that some drug sellers had access to large sums of money. Whether this money originated from legitimate family businesses, from drug sales, or from powerful persons involved in the drug trade remained unclear. What was apparent was that wealthy drug sellers considered themselves untouchable and even mocked village and commune authorities for their inability to keep those that were arrested in jail. No wonder that several local sources described the flourishing drug trade as one where “ money can buy impunity.”

In situations where police made serious attempts to arrest drug sellers, the local networks adapted in response and made accommodations to thwart the law enforcers. For instance, after several crackdowns at known drug outlets in one village, the drug dealers became mobile and enlisted young schoolchildren to make deliveries for them. The drug sellers would drive along the main road of the village on motorbikes or bicycles and distribute the drugs to the young schoolchildren who in turn would pass the tablets on to the drug users. As part of the delivery network the schoolchildren could earn 1000 riels (about US\$.25) per tablet sold.

The social networks emerging among the drug users likewise helped to sustain their drug habits. Drug users in the three villages studied were mostly young single men. Living on the outskirts of Battambang town they had been caught up in the broader urbanization process of this northwestern province. This included shifts from farm to off-farm work, from village to migrant work, and from family dependence to increased mobility and personal independence. Through the media these youth were exposed to modern lifestyles, often associated with frequent drug use. As the focal point of their lives shifted from their families to their peer groups, being accepted by their friends became an important rationale for their behavior.

Young men who took drugs relied on each other to sustain their addictions and often shared drugs, inhaling tablets together in groups. Drug taking likewise emboldened the users to steal property from their families and from public places in the provincial town. Stealing from others was often done with friends and the booty that was realized was normally converted to drugs for group consumption. When individual drug users tried to stop taking drugs, it was usually their friends that “pulled” them back into their drug habits.

¹² *International Narcotics Control Strategy Report, 2003.*

In general, parents of drug users had not been able to curb the addictions of their children. While awareness of drug use was apparently high among parents even before it became a problem in their families, they lacked an in-depth understanding of drug addiction and how to deal with it effectively. Similarly, local authorities lacked a thorough knowledge of drug addiction and were unable to respond adequately to the problem. On their part, villagers remained largely immobilized waiting for others to solve the problem. As long as these conditions prevailed, drug use in the three villages was likely to continue.

Implications

The findings and conclusions of this study call out for concerted action against drug use by government and civil society, particularly in the areas of policy, rehabilitation and education, and community development.

Policy Issues

- The Royal Government of Cambodia needs to enter into high-level talks with the Governments of the People's Democratic Republic of Lao, the Kingdom of Thailand, and the Socialist Republic of Vietnam to stop the flow of drugs across international borders. This entails tightening border controls and taking stronger steps to eliminate corruption.
- Government law enforcers need to arrest and detain all those involved in the drug trade, including local sellers, and prohibit their release after the mere payment of fines.
- Government law enforcers at national, provincial and district levels need to be given specialized training to enable them to deal more effectively with drug trafficking and drug use.

Rehabilitation and Education Issues

- Government agencies and NGOs need to establish drug centers in Battambang town to provide medical and psychological treatment to drug users. Community and household treatment approaches should also be explored.
- Government agencies and NGOs need to provide parents of young people, and especially those of drug users, with knowledge about drug addiction and strategies to cope with it more adequately.
- Government agencies and NGOs need to provide education to schoolchildren about the adverse effects of drug use. This includes both girls and boys. “Friend helping friend” approaches might well be initiated. Reformed drug users should be involved in educational sessions and be given an opportunity to share their experiences.

- Government agencies and NGOs need to provide high-tech and vocational skills training to young people in areas such as computer use and mechanical repair so that they can take advantage of opportunities in the changing job market.

Community Development Issues

- NGOs need to promote peer group involvement in constructive activities, such as the training of young circus performers by Phare Ponleu Selpak.
- NGOs need to assist local authorities to mobilize community action networks to enable villagers to take a more proactive role in monitoring and deterring drug use.

Appendix 1. Drug User Interview Questionnaire

Name of Interviewer: _____

Date of Interview: _____

Do not ask name of drug user

Checked by: _____

Drug User Interview Questionnaire

Background

1. Name of village Anchanh
 Ocha
 Romchek 1
2. Sex Male
 Female
3. Age Under 15 years
 15 - 18 years
write age _____ 19 - 22 years
 23 - 25 years
 over 25 years
4. Both parents living at home Yes
 No
5. Both parents biological parents Yes
 No
6. Civil status Single
 Married
 Widow
7. Number of children # _____
8. Educational attainment No formal schooling
write grade _____ 1-6 grades
 7-9 grades
 10-12 grades
 University

9. Are you still going to school?

- Yes
- No

10. Have you ever worked as a migrant worker?

- Yes
- No

11. Where did you work?

write name of place _____

- N/A

12. How would you describe the economic status of your household? (Check only one.)

- Better-Off
- Medium
- Poor
- Very poor

Drug Use History

13. What year did you start to take drugs?

- write year _____
- Before 1998
 - 1998-2000
 - 2001-2002
 - 2003-2004

14. What type of drug did you first start to use? (Check only one.)

- Solvent (glue)
- Amphetamine (*yaba*)
- Cannabis
- Ecstasy
- Heroin
- Other _____

15. What type of drug did you use mostly now? (Check only one.)

- Solvent (glue)
- Amphetamine (*yaba*)
- Cannabis
- Ecstasy
- Heroin
- Other _____

16. Who introduced you to taking drugs? (Check only one.)

- Friends
- Drug dealer
- Boy friend or girl friend
- Brother or sister
- Employer when migrant worker
- Other _____

17. When you have the money, do find it easy or difficult to buy drugs?

- Easy
- Difficult

18. Explain answer.

19. What is the current cost of the drugs that you use?

	Cost per unit
Solvent (glue)	_____
Amphetamine (<i>yaba</i>)	_____
Cannabis	_____
Ecstasy	_____
Heroin	_____
Other _____	_____

20. How often do you use these drugs?

	Amount per day
Solvent (glue)	_____
Amphetamine (<i>yaba</i>)	_____
Cannabis	_____
Ecstasy	_____
Heroin	_____
Other _____	_____

21. What are the reasons why you take drugs? (Check all that apply.)

- Be accepted by friends
- Bored with life – Want excitement
- Family problems
- School problems
- Able to work longer hours
- Other _____

22. Describe reasons in detail.

23. What makes drug use attractive for you? (Check all that apply.)

- It's modern - cool
- Friends take drugs
- Can forget about problems
- Other _____

24. How do you support your drug habit? (Check all that apply.)

- Have legitimate job
- Get money from family
- Get money from friends
- Deal drugs
- Steal from family
- Steal from other people
- Sell sex
- Other _____

25. When do you most often take drugs? (Check only one.)

- Morning
- Noon
- Afternoon
- Evening

26. When you take drugs, do you most often take drugs: (Check only one.)

- Alone by yourself
- With others in groups

27. Where do you most often usually take drugs? (Check only one.)

- At home
- At village rice fields or *chamcar*
- At central places in the village (school, pagoda, stores)
- Outside the village
- Quiet place
- Other

28. Explain answer.

29. Have you ever tried to persuade other people to take drugs?

- Yes
- No

30. Why did you try to persuade others to take drugs?

31. Do these people continue to take drugs?

- Yes
- No

32. Why?

Consequences of Drug Use

33. Before you first started to use drugs, did your parents ever warn you about their effects?

- Yes
- No

34. What have been the effects of your drug use? (Check all that apply.)

- Have more fun
- Dropped out of school
- Stopped working
- Lost interest in life
- Got involved in more fights
- Got involved in crime
- Lost control of self
- Have been arrested by police
- Have suffered health problems
- Other _____

35. Describe the effects above in detail.

36 How has drug use affected your relations with other people? (Check all that apply.)

- Have more friends
- Have fewer friends
- Have more arguments with parents and other household members
- Have left home
- Have problems with other villagers
- Have problems with local authorities
- Have problems with the police
- Other _____

37. Describe the effects on relations in detail.

38. Are you aware of how HIV/AIDS is spread?

- Yes
- No

39. Do use share needles with others?

- Yes
- No

40. Do you use condoms when having sex?

- Yes
- No
- Do not have sex

41. Are there other members of your family who also use drugs?

- Yes
- No

42. What year did they start to use?

write year _____

43. Why do they use drugs?

Prospects for Rehabilitation

44. Have you ever tried to stop taking drugs?

- Yes
- No

45. What did you do?

46. What was the result?

47. Are other people aware that you take drugs?

- Yes
- No

48. Who knows? (Check all that apply.)

- Parents
- Brother/Sister
- Friends
- Other
- N/A

49. How do they think about you?

50. Have your parents done anything to help you to stop?

- Yes
- No

51. Explain answer.

52. Have you ever entered a drug center or drug program?

- Yes
- No

53. If yes, explain answer.

- N/A

54. Have the local authorities ever educated you about the use of drugs?

- Yes
- No

55. Explain answer.

56. Is it possible for you to stop taking drugs without any medical assistance?

- Yes
- No

57. Did you realize it would difficult for you to stop taking drugs when you first started?

Yes

No

58. Explain answer.

Appendix 2. Drug User Household Interview Questionnaire

Name of Interviewer: _____ Date of Interview: _____
Name of Interviewee: _____ Checked by: _____

Drug User Household Interview Questionnaire

Background

1. Name of village Anchanh
 Ocha
 Romchek 1
2. Sex Male
 Female
3. Age Under 18 years
write age _____ 18 - 30 years
 31- 45 years
 46 - 60 years
 over 60 years
4. Civil status Single
 Married
 Widow
5. Spouse living at home Yes
 No
6. Number of children # _____ Female _____ Male
7. Educational attainment No formal schooling
write grade _____ 1-6 grades
 7-9 grades
 10-12 grades
 University
8. Has anyone in your household ever worked as a migrant worker?
 Yes
 No

9. Who in the household has worked as a migrant worker? (Check all that apply.)

- Respondent
- Spouse of respondent
- Son(s) of respondent
- Daughter(s) of respondent
- Parent(s) of respondent
- N/A

10. If yes, where did they work?

write name of places _____

- N/A

11. What are the livelihood sources of your household? (Check all that apply.)

- Rice farming
- Chamcar* farming
- Agricultural labor
- Buy and sell trade
- Small business
- Motor taxi driver
- Digging and carrying soil
- Construction
- Labor migration
- Other _____

12. How would you describe the economic status of your household? (Check only one.)

- Better-Off
- Medium
- Poor
- Very poor

13. How many years have you lived in this village?

write number of years _____

Awareness of Children's Drug Use

14. How many of your children are now taking drugs?

Write number _____

15. What are the ages and gender of your child/children who take drugs?

	Age	Gender
a.	_____	_____
b.	_____	_____
c.	_____	_____

16. Are your drugs user children:

_____ students
_____ dropouts
_____ workers
_____ unemployed
_____ other

17. Were you aware that drug use was a problem in the village before your own child/children started to take drugs?

- Yes
 No

18. Explain answer.

19. What year did your child/children start to take drugs?

write years _____

- Don't know

20. What type of drugs does your child/children take? (Check all that apply.)

- Solvent (glue)
- Amphetamine (*yaba*)
- Cannabis
- Ecstasy
- Heroin
- Other _____
- Don't know

21. What are the reasons that your child/children take drugs? (Check all that apply.)

- Be accepted by friends
- Bored with life – Want excitement
- Family problems
- School problems
- Able to work longer hours
- Other _____
- Don't know

22. Describe reasons in detail.

23. Who introduced your child/children to take drugs? (Check all that apply.)

- Friends
- Drug dealers in the village
- Drug dealers in Battambang town
- Boy friends or girl friends
- Brothers or sisters
- Employers when migrant worker
- Other _____
- Don't know

24. Explain answer.

25. What is the current cost of the drugs that your child/children use?

	Cost per unit
Solvent (glue)	_____
Amphetamine (<i>yaba</i>)	_____
Cannabis	_____
Ecstasy	_____
Heroin	_____
Other _____	_____

Don't know

26. How often does your child/children use these drugs?

	Amount per day
Solvent (glue)	_____
Amphetamine (<i>yaba</i>)	_____
Cannabis	_____
Ecstasy	_____
Heroin	_____
Other _____	_____

Don't know

27. How does your child/children support their drug habit? (Check all that apply.)

- Have legitimate jobs
- Get money from family
- Get money from friends
- Deal drugs
- Steal from family
- Steal from other people
- Sell sex
- Other _____
- Don't know

Consequences of Drug Use

28. Before your child/children first started to use drugs, had you ever warned them about the effects?

- Yes
- No

29. What have been the effects of drug use on your child/children? (Check all that apply.)

- Dropped out of school
- Stopped working
- Lost interest in life
- Got involved in more fights
- Got involved in crime
- Lost control of self
- Have been arrested by police
- Have suffered health problems
- Other _____
- Don't know

30. Describe the effects of drug use above in detail.

31. How has drug use affected the relations of your child/children with other people?
(Check all that apply.)

- Has fewer friends
- Has more arguments with parents and other household members
- Has left home
- Has problems with other villagers
- Has problems with local authorities
- Has problems with the police
- Other _____
- Don't know

32. Describe the effects of drug use on your child's/children's relations in detail.

33. How has the drug use of your child/children affected your household? (Check all that apply.)

- Other children in household have started to take drugs
- Spend more money on health costs
- Drug user children no longer contributing to livelihood
- Household less productive than before
- Household less involved in community development activities
- Household avoided by other villagers
- Other _____
- Don't know

34. Describe the effects of your child's/children's drug use on your household in detail.

35. Are you concerned that your child/children who use drugs will introduce your other non-user children to take drugs as well?

- Yes
- No

Actions Taken

36. How has drug use affected your community (Check all that apply.)

- Less security in the village
- More theft
- More fighting
- More gang activities
- More disturbances at village events
- More school dropouts
- More children leaving home
- More parents worry about their children
- More incidence of HIV/AIDs
- Less trust among community people
- Less participation in community activities
- Other _____
- Don't know

37. Who has helped to solve these problems?

- Teachers
- Police
- NGOs
- Local authorities
- Others
- Don't know

38. Do your child/children want to stop using drugs?

- Yes
- No

39. Have you ever tried to stop your child/children from using drugs?

- Yes
- No

40. What did you do? Describe in detail.

41. What was the result?

42. Has your child/children ever entered a drug center or drug program?

- Yes
- No

43. What was the result?

44. Is it possible for your child/children to stop taking drugs without any medical assistance?

- Yes
- No
- Don't know

45. Have you ever asked assistance from anyone or any organization to help you solve the drug problem of your child/children?

- Yes
- No

46. Who did you ask for assistance?

- Neighbors
- Teachers
- Monks/Archa
- Local authorities (village and commune officials)
- District and provincial authorities
- Police
- Other _____
- N/A

47. What was the result?

48. Did you realize that it would be difficult for your child/children to stop taking drugs when you first learned that they had started to use drugs?

Yes

No

49. Explain answer.

Appendix 3. Non-Drug User Household Interview Questionnaire

Name of Interviewer: _____ Date of Interview: _____
Name of Interviewee: _____ Checked by: _____

Non-Drug User Household Interview Questionnaire

Background

1. Name of village Anchanh
 Ocha
 Romchek 1
2. Sex Male
 Female
3. Age Under 18 years
 18 - 30 years
write age _____ 31- 45 years
 46 - 60 years
 over 60 years
4. Civil status Single
 Married
 Widow
5. Number of children # _____
6. Educational attainment No formal schooling
write grade _____ 1-6 grades
 7-9 grades
 10-12 grades
 University
7. Has anyone in your household ever worked as a migrant worker?
 Yes
 No

8. Who in the household has worked as a migrant worker? (Check all that apply.)

- Respondent
- Spouse of respondent
- Son(s) of respondent
- Daughter(s) of respondent
- Parent(s) of respondent
- N/A

9. If yes, where did they work?

write name of places _____

- N/A

10. What are the livelihood sources of your household? (Check all that apply.)

- Rice farming
- Chamcar* farming
- Agricultural labor
- Buy and sell trade
- Small business
- Motor taxi driver
- Digging and carrying soil
- Construction
- Labor migration
- Other _____

11. How would you describe the economic status of your household? (Check only one.)

- Better-Off
- Medium
- Poor
- Very poor

Awareness of Drug Use

12. How many years have you lived in this village?

write number of years _____

13. What have been the major changes in the village in the last five years? (Check all that apply.)

- Villagers becoming better off
- Villagers more involved in community activities
- Villagers becoming poorer
- More landlessness
- More labor migration
- Villagers less involved in community activities
- Drug use
- More villagers affected by HIV/AIDS
- Other _____

14. Do you think drug use is a problem in this village?

- Yes
- No

15. How did you come to know about the problem? (Check all that apply.)

- Own children are drug users
- Children of neighbors are drug users
- Informed by teachers
- Informed by local authorities
- Media (TV, newspaper, radio)
- Other _____
- N/A

Note: If own children are drug users, stop filling out this questionnaire for non-drug user households. Go to the drug user household questionnaire and start asking questions from #14 under Awareness of Children's Drug Use. After the interview copy the answers for the Background Questions from this non-drug user household questionnaire to the drug user household questionnaire.

16. What year did the problem start?

write year _____

- N/A

17. Is drug use in this village:

- Increasing
- Decreasing
- Remaining the same
- Don't know

18. Please explain.

19. How old are most of the drug users in the village?

- 11-15 Years
- 16-20 Years
- 21-25 Years
- 26-30 Years
- Over 30 Years
- Don't know

20. What is the gender of most of the drug users in the village?

- Boys
- Girls
- Don't know

21. Are most of the drug users in the village:

- Homeless
- Orphans
- Both parents are alive
- Other _____
- Don't know

22. Are most of the drug users in the village:

- Students
- Drop outs
- Workers
- Jobless
- Don't know

23. What is the most common drug used by young people in the village?

- Solvent (glue)
- Amphetamine (*yaba*)
- Cannabis
- Ecstasy
- Heroin
- Other _____
- Don't know

24. Where do drug users most often use drugs? (Check only one.)

- At home
- At village rice fields or *chamcar*
- At central places in the village (school, pagoda, stores)
- Outside the village
- Other _____

25. What are the reasons that young people in the village take drugs? (Check all that apply.)

- Be accepted by friends
- Bored with life – Want excitement
- Family problems
- School problems
- Able to work longer hours
- Other _____
- Don't know

26. What are the livelihood sources of drug user household? (Check all that apply.)

- Rice farming
- Chamcar* farming
- Agricultural labor
- Buy and sell trade
- Small business
- Motor taxi driver
- Digging and carrying soil
- Construction
- Civil Servant
- Labor migration
- Other _____
- Don't know

27. Who introduces young people in the village to take drugs? (Check all that apply.)

- Friends
- Drug dealers in the village
- Drug dealers in Battambang town
- Boy friends or girl friends
- Brothers or sisters
- Employers when migrant worker
- Other _____
- Don't know

28. How do young people in the village support their drug habit? (Check all that apply.)

- Have legitimate jobs
- Get money from family
- Get money from friends
- Get drug from friends
- Deal drugs
- Steal from family
- Steal from other people
- Sell sex
- Other _____
- Don't know

29. Are most of the households in the village with young drug users:

- Long time residents
- Newcomers
- Don't know

30. How would you describe the economic status of the households in the village with young drug users? (Check only one.)

- Better-Off
- Medium
- Poor
- Very poor
- Don't know

Consequences of Drug Use

31. Do drug users persuade others to use drug?

- Yes
- No

32. How did they persuade others to use drugs?

- Direct approach
- Mix in food
- Force to use
- Other _____
- Don't know

33. How has drug use affected the young people in the village? (Check all that apply.)

- Have dropped out of school
- Have stopped working
- Have lost interest in life
- Have got involved in more fights
- Have got involved in crime
- Have been arrested by police
- Have lost control of self
- Have suffered health problems
- Have left home
- Other _____
- Don't know

34. How has drug use affected the households where drug users are living? (Check all that apply.)

- Other children in household have started to take drugs
- Spend more money on health costs
- Have lost assets through theft
- Have more fighting in household
- Drug user children no longer contribute to livelihood
- Household less productive than before
- Household less involved in community development activities
- Household avoided by other villagers
- Other _____
- Don't know

35. What aspects of community life have been affected by drug use? (Check all that apply.)

- Security in village has worsened
- More theft
- More fighting
- More gang activities
- Disruption of community events
- Drop in school attendance
- Children have left home
- Parents afraid that their own children might become drug users
- Increase in incidence of HIV/AIDS
- More distrust among villagers
- Less involvement in community development activities
- Other _____
- Don't know

36. Do you know anybody/organization that has helped to solve the above problems?

- Teachers
- Police
- NGOs
- Local authorities
- Other _____
- Don't know

37. What did they do to help solve these problems?

38. What else needs to be done?

Attitudes Towards Drug Use

39. What is your own attitude towards the young drug users in the village? (Check all that apply?)

- Should be avoided
- Should not be trusted
- Should be punished
- Should be encouraged to stop
- Should be given medical assistance
- Other _____
- Don't know

40. What is your own attitude towards the parents of the young drug users in the village? (Check all that apply?)

- Should be avoided
- Should not be trusted
- Should be blamed
- Should be given support
- Should be given counseling
- Other _____
- Don't know

41. Are you concerned that your children might become drug users?

- Yes
- No

42. Explain answer.

43. Have you talked to your children about drug use?

- Yes
- No

44. What did you talk about?

- N/A

45. What have you done to prevent your child/children from becoming drug users? Please explain.

Actions Taken

46. Have you talked to drug users in the village about their drug use?

- Yes
- No

47. If yes, what did you talk about?

- N/A

48. Have you talked to the parents of drug users in the village about the drug use of their children?

- Yes
- No

49. If yes, what did you talk about?

- N/A

50. Have you talked to teachers, local authorities, police or NGOs about the drug use of young people in the village.

- Yes
- No

51. If yes, who did you talk to:

- N/A

52. If yes, what did you talk about?

- N/A

53. Who do you think should take action about the drug use of young people in the village? (Check all that apply.)

- Parents
- Teachers
- Monks/Archa
- Other villagers
- Local authorities (village and commune officials)
- District and provincial authorities
- Police
- Other _____
- Don't know

54. Explain answer.

Appendix 4. Focus Group Interview for Village Leaders

Name of Interviewer: _____

Date of Interview: _____

Name of Recorder: _____

Checked by: _____

Names and positions of the persons interviewed:

Focus Group Interview Questionnaire for Village Leaders (Village Chief, Village Development Committee, Village Association Group Members, Police)

Village Background

1. Name of village? When was this village established? How many households live in the village? What is the total population? What are the livelihood sources of the households in the village? Are village households involved in labor migration? Describe in detail. What percentage of village households are better-off, medium, poor or very poor?
2. What have been major changes in the village in the past five years? Describe in detail. What are the major problems? Describe in detail.

Trends in Drug Use

3. Is drug use a problem in this village? When did the problem start? Has the problem increased, decreased, or remained the same? Who is involved? What are the age groups of the drug users? Their gender? How did they become involved? What are the reasons for this? How many village households now have members who are drug users?
4. What are the types of drugs used? Before and now? How do users get access to drugs? Costs of drugs? Frequency of use? Time and location of drug use? How do drug users support their habit? Do they have legitimate jobs? Deal drugs? Steal? Become sexual workers?
5. What are the social economic circumstances of the drug user households? Are they long time residents or recent arrivals? Biological parents or stepparents? Both parents living at home? What are the livelihood sources of the drug user households in the village? Are the households with drug users mostly better-off, medium, poor or very poor?

Consequences of Drug Use

6. How has drug use affected the behavior of young people? Have they become violent? Lost interest in life? Suffered health problems? Become involved in theft or other crimes? Do they still attend school? Do they work? Are they still accepted by their families? How has drug use affected other members in their household? How has it affected the relations of their household with other villagers?

7. What aspects of community life have been affected by drug use? Has security been affected? Has there been more theft? More fighting? Gang activities? Disruption of community events? Has there been a drop in school attendance? Are parents afraid that their own children might become drug users? Has there been an increase in HIV/AIDS or other health problems? Have young people left their homes?

8. What has been the affect on household livelihoods? Have drug user households become less productive? Have they become poorer? What has been the affect on community development activities? Are they stronger, weaker, or the same as before? Is the solidarity among villagers stronger, weaker, or the same as before? Has drug use affected the involvement of users or members of their households in community development activities?

Actions Taken About Drug Use

9. How have people responded to the problem? Parents? Teachers? Local authorities? Police? NGOs? Describe the response of each group separately. Are there drug programs or drug centers available for village drug users? What still needs to be done?

Appendix 5. Focus Group Interview for Non-Drug Using Youth

Name of Interviewer: _____

Date of Interview: _____

Name of Recorder: _____

Checked by: _____

Names and positions of the persons interviewed:

Focus Group Interview Questionnaire for Youth Non-Drug Users

Trends in Drug Use

1. In the past five years has drug use among young people increased, decreased, or remained the same? What are the reasons for this? What are the age groups of the drug users? Their gender? Are drug users from households that are mostly better-off, medium, poor or very poor?
2. What are the types of drugs used? Before and now? When did users start taking drugs? Reasons for taking these types of drugs? Access to drugs? Costs of drugs? Frequency of use? Time and location of drug use? How do drug users support their habit? Do they have legitimate jobs? Deal drugs? Steal? Become sexual workers?

Causes of Drug Use

3. What are the circumstances that give rise to drug use? Circumstances within the family? Among peer groups? At school? At work sites? During migrant work? Between boy and girl friends? What makes drug use attractive? Do drug users try to persuade others to use drugs?
4. Have you ever been approached to take drugs? What were the circumstances? What was your response? Do you feel that young people, like yourselves, are under pressure to try drugs? What can young people do to resist taking drugs? Have you ever talked to your parents about drug use? Have you ever talked with your teachers about drug use?

Consequences of Drug Use

5. What happens to young people because of drug use? Have they become violent? Lost interest in life? Do they still attend school? Do they work? Do they still go out with their old friends or only with other drug users? Have they ever been arrested? Has their health been affected? Are they aware of HIV/AIDS? Do they use needles? Do they use condoms?

6. Are drug users still accepted by young people who are not taking drugs? Are drug users still accepted by their families? By other villagers? Have the drug users ever tried to stop taking drugs? Have they ever entered a drug center or drug program? Is it possible for them to stop taking drugs without any medical assistance?

Impacts on Community Life

7. What aspects of community life have been affected by drug use? Has security been affected? Has there been more theft? More fighting? Gang activities? Disruption of community events? Has there been a drop in school attendance? Are your parents afraid that their own children might become drug users? Has there been an increase in HIV/AIDS or other health problems? Have young people left their homes?

8. How have you as young people responded to the problem of drug use in your community? How have other people responded to the problem? Parents? Teachers? Local authorities? Police? NGOs? What still needs to be done?

Appendix 6. ADI Trainee and Team Researchers

ADI Trainee Researchers (Round 13)

Um Sok Chamroeun	Lutheran World Federation (LWF)
Prach Veary	Lutheran World Federation (LWF)
Pich Phou Rith	Lutheran World Federation (LWF)
Hort Seila	Veterans International (VI)
Kong Kosal	Urban Resource Center (URC)
Kong Socheat	Church World Service (CWS)
Lor Minirith	World Vision Cambodia (WVC)
Kong Ratha	Enfants et Developpement (E&D)
To Morokot	Salvation Center of Cambodia (SCC)
Chea Amara	Women Peacemaker
Kang Sovanna	Ponleur Komar
Chim Manavy	Open Forum
Chim Rina	Wathnakapheap
Tourn Rom	Outreach
Hong Sovanny	SILAKA

ADI Team Researchers

Oeur Il	Cooperation Committee for Cambodia/ADI Project
Seng Savuth	Cooperation Committee for Cambodia/ADI Project
Ang Sopha	Cooperation Committee for Cambodia/ADI Project
Hor Sakphea	Cooperation Committee for Cambodia/ADI Project
John McAndrew	Cooperation Committee for Cambodia/ADI Project