

# Being an Addict and Healing: Narratives and Practices in A Gospel Rehabilitation Center

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**Abstract:** As a social problem, addiction is especially troublesome in the southwestern border areas of China. This research explores how they became addicts and how to deal with it based on six months of ethnographic research in a gospel rehabilitation center in Yunnan. In rationality analysis and discussion, personal choices of drug users are often held accountable. However, it is necessary to take the geographic factor and historical background into consideration when reflecting on their way of being addicted. Besides, this study would, through personal narratives of drug addicts, attempt to introduce the irrationality factor of desire to analyze from the perspective of the subjects how their drug use experience is related to the society through desires. And then, by using participant observation of their daily practices in the center, this study makes an in-depth exploration of how such desires are handled through healing treatment at the Gospel Rehabilitation Center. And how they through healing practices to realize rebirth.

**Key Words:** drugs; addiction; desire; gospel rehab; healing

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Between March 2017 and August 2017, I conducted an ethnographic study of heroin addicts in a Gospel Drug Rehabilitation Center in the southwest of China. Launched in 2007 in Yunnan and also known as “Rebirth Center” among the local people, the Drug Rehabilitation Center primarily serves local addicts, although accepting some referrals from other churches outside Yunnan. The center mainly rehabilitates three categories of patients: drug addicts, alcoholics, and people with mental illness. Often with a high severity of heroin abuse, most of the drug addicts populating the treatment center have experienced an unsuccessful period of treatment before. Many of them admitted they have encountered some crime-related experiences. people, all men at an age of 19 to 65, stay at the center on any given day. Despite the wide age range of the rehab population, the drug addicts researched in this study would be 28 to 40 years old.<sup>[1]</sup> As to the ethnic composition of those admitted to the center, roughly one-third is minority groups and two-thirds are Han people. Due to the voluntary feature of the drug rehab center, although patients are asked to stay there for at least one and a half years, they still can leave if they insist. The primary funding is sourced from the local church.

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[1] Most of the addicts are between 28 to 40 years old in the center.

Besides, when admitted to the center, a patient needs to pay a 5000-yuan deposit, which would be refunded when the patient is discharged. However, if one asks to leave and give up the treatment, the deposit would be confiscated. After discharged, one can choose to study at church school or work at the “Halfway House” (mainly for planting and farming work).

In terms of substance use categories, most of the patients are high-frequency users of heroin No. 4. Unlike other treatment centers, this rehab center provides no medication. Rather, it claims that the patients can only be saved by believing in God. Thus, its therapy practices only include reading Bibles and praying. When I first came to the center, I met Sun, one of the critical reporters. After the formal research ended in August 2017, however, I went back to participate in the 10th anniversary of its establishment in September 2017, when Sun was just discharged. During the research, I experienced two relocations of the center. At the first time, I moved from the drug treatment center in a deep mountain to an old house in the countryside. Because of limited space, I moved to the “Halfway House”, which about 1km away from the center. Halfway House provides job opportunities to those just discharged but not well prepared to return to society. There, I met another reporter, Wu, who had been working at the “Halfway House” for about one year. Then at the second time, we moved from the old house to a new drug treatment center far away from the urban area. Therefore, the research sites include the rebirth center, “Halfway House” and the outside world, and the objects include both those who are undergoing detoxification and those who have experienced the whole process, as well as those who were discharged but chose to stay at the “Halfway House”. All of them were heroin addicts. To be specific, due to the limit of time, I followed several men from their entries into the center, while also tracing some others who were just discharged. In the center, I adopt the participant observation method to record their therapy practices which are embedded in their everyday routine activities. Additionally, out of the center, an in-deep interview allows me to collect their illness narratives and their drug dependency experience.

The main questions are direct: Why is the center called a “rebirth center”? And how does it make “rebirth” possible? In order to answer the question, it is essential to think about how the people here became addicts? How do they deal with their addiction? When they arrived in the center, how they trained their bodies and minds by certain practices in the healing process? The following content will try to answer these questions by focusing on the patients’ narratives and practices.

## 1. Colonial memory and “Chinese channel”

Both the geographic factor and historical background play essential roles for many reasons. For the research site I chose, it locates at the border between China and Burma, which provides accessibility to drugs much more accessible than other places. Besides, the southwest China regions have always seen drugs throughout the history, delivering many changes in the social pattern. Especially, opium and heroin often spark the recall of the colonial times when these regions became a “Chinese channel” to the world.

The southwest China is one of the frontiers of Chinese territory. When outsiders came here, they

attributed the discomfort and fear of its environment to “malaria”. The fear of malaria also made the European colonists panic. In fact, since the Qing dynasty, the rulers had been trying to find a cure for malaria, and finally the opium was regarded as a useful therapy.<sup>[2]</sup> Perhaps because the chilling bodies suffering from malaria can be warmed up due to the function of opium, it became the first choice in the prevention and treatment of malaria. Therefore, with the colonization of these areas, opium began to go across the southwestern border as medicine.

However, it turned to be a new problem as opium smuggling became prevalent. Especially, along the coast, smugglers imported expensive Indian opium and then transport it into Yunnan before gradually spreading to the interior land. At this time, it had a therapeutic value, instead of a new danger. In the 19th century, opium slowly became a luxury consumer product in the coastal societies and was not difficult to find in daily life. In fact, it had then become a symbol of social identities. By the era of the Republic of China, opium poppies had been grown as the main cash crop for people living in border areas, thus making the opium a pillar of local economic development. On the one hand, the profits made from poppy cultivation stimulated border consumptions and cross-border trades; on the other hand, because the state monopolized the opium trades, the tax revenues from opium had become the primary finance source of governments. It can be found that the flows of opium and the changes of its functions resulted in a series of social transformations that are deeply linked to colonial memories in the southwest border regions and even the entire China.

Since the 1950s, the government has started to launch hard efforts to combat poppy cultivation and opium trading. Nevertheless, the types of drugs were also changing; since the 1960s, the world drug market has expanded widely because the demand for drugs goes up, while the drug cooking technology has also been improved. Therefore, heroin appears in people’s lives and goes much popular in a short time. Consequently, by the 1980s, the huge international drug market has driven the birth of three essential drug sourcing places, i. e., the “Golden Triangle”, “Silver Triangle” and “Golden Crescent.” With no exception, China is also affected by the international drug environment. Moreover, after the reform and open-up policy, a new wave of drug abuse brought a resurgence of drugs. Unlike the traditional route for poppy seeds to move from India to Yunnan along southern Xinjiang, the primary source of heroin in China is the “Golden Triangle”, i. e., a triangle area located between the borders of Thailand, Burma and Laos. Especially, Burma, which borders Yunnan, grew into the “world powder” center in the 1970s. Besides, since Yunnan lacks natural barriers along its border, frequent border trades involve a huge quantity of goods and people, including drug dealers. As a result, the so-called “China Channel” was built up,<sup>[3]</sup> which is further extended to the mainland China, Hong Kong and Macao. As the entrance of the “China Channel,” Yunnan had seen massive flows of drugs through the border between China and Myanmar.

1. From Myanmar (Menggu, Baseball, Mujie and Nankan) to Yunnan (Wanding and Ruili), drugs are transported to Kunming via Baoshan and Shimonoseki;

[2] 沈海梅 Shen Haimei:《医学人类学视野下的毒品、艾滋病与边疆社会》Yixuerenleixue Shiyexiade Dupin, Aizhibing yu Bianjiangshehu [Drugs, AIDS and Frontier Society from the Perspective of Medical Anthropology], (昆明 Kunming: 云南大学出版社 Yunnan Daxue Chubanshe [Yunnan University Press], 2010), 1-21.

[3] 张绍明 Zhang Shaoming:《禁毒大视角》Jindu Dashijiao [A broad perspective of drug control], (北京 Beijing: 中国公安大学出版社 [Chinese people’s Public Security University Press], 2004), 253.

2. Along the Myanmar border, from Kuogan, Qingshuihe, Hongyan, Modai, Zhenkang, Gengma, Shuide, Shidian, Weishan, Xiaguan and other places to Kunming;

3. From the area near the border of Laos to eastern Myanmar, drugs go from Jinghong to Kunming. [4]

In addition, some drugs are also transmitted into China through the China-Laos border or the China-Vietnam border and further to the mainland.

Although Yunnan functions as a part of the channel, a considerable portion of heroin is still sold locally. In the 1980s, the underground drug consumption market in Yunnan gradually established. Despite the “Strike Hard (严打)” in 1983, the drug abuse in the border area of Yunnan remains severe. According to surveys, the number of drug addicts in Yunnan Province increased sharply from 1982 to 1991, and most of them had switched from traditional opium to heroin. By 1990, the total number of registered drug addicts in Yunnan reached more than 57,000. [5] In 2016, when I was conducting a fieldwork, the reporter Sun suddenly asked me what day that day was, and it turned out to be the day when his cousin was discharged from the drug treatment center. Sun’s cousin also used to take heroin for a long time. Sun told me: “Several men of my generation smoke (heroin), and many of our villages do,” While shrugging and speaking very casually. Nevertheless, I was shocked; as seen in the statistics, given there are many drug users, they should inevitably know that heroin is harmful, but they still to take it. However, Sun explained that it was as common as just daily life in the villages. Maybe they underestimated the effects of heroin. Or maybe their so-called choice was not a choice at all. So, I decided to sit down and listen to their stories about desires and choices. I mentioned the location and colonial history because living here; even such factors are not experienced directly, they remain inescapable. Somehow, it catalyzes for the problem of being an addict for every single individual.

## 2. Being an addict and pursuing a desire

When it comes to “desire”, people often immediately think of excessive or greedy needs. For drug addicts, accordingly, it is often alleged that the expansion of their personal desires leads them to this unfortunate scene. However, desire itself is not totally negative; as Deleuze believes, it is productive and constructive. [6] Without desires, this area would not have benefited from the reform and opening up policy, nor will there would have been subsequent development and transformation, because it is undeniable that the reform and opening up have brought many benefits to the southwest border and delivered economic development. For individuals living in this region, although with many profit-making opportunities, they have managed to improve their lives, they have also experienced the restlessness of transformation, which may be the dark side of desire.

[4] 牛何兰 Niu Helan:《当代云南禁毒史》Dangdai Yunnan Jindushi[Contemporary History of Drug Control in Yunnan],(昆明 Kunming:云南人民出版社 Yunnan Renmin Chubanshe[The Peoples Press of Yunnan],2012),33.

[5] 牛何兰 Niu Helan:《当代云南禁毒史》Dangdai Yunnan Jindushi[Contemporary History of Drug Control in Yunnan],(昆明 Kunming:云南人民出版社 Yunnan Renmin Chubanshe[The Peoples Press of Yunnan],2012),11.

[6] 高继海 Gao Jihai.《德勒兹的欲望概念》Delezi de Yuwang Gainian[Deleuze’s conception of Desire],《外国文学》Waiguo Wenxue[Foreign Literature],No. 5 (2013).

When rapid economic development triggers the rising of personal desires and reorganizes the social relations, the society is also easy to fall into disorder. “Since reform and opening up, Yunnan government has paid great attention to border governance.” Many programs have been implemented: the action of prospering the border and enriching the people’, the development plan of the ethnic groups with fewer populations, the frontier project of ‘Resolving the Five Difficulties’ to benefit the people, and the “3121<sup>[7]</sup> national demonstration site creation project, among others.” These initiatives gave birth to the most fashionable occupation at that time, truck drivers, which is the professional experience that all of the people I met in the center have in common. As they said, “it earns money quickly.” They all caught up with the good chance to make money and enjoyed a better life delivered by the market economy. However, they failed to realize it was a prelude to another life.

Wu described his experience as a truck driver: “At that time, in the 1990s, I could not put up with the boring life here anymore. I like to go around for free.” Just at that time, the government started to develop M city on the border, so he bought a truck with part of money he saved as well as his family’s support and finally became a long-distance transportation truck driver, almost a perfect job then. “With the truck you can go anywhere you want. You don’t know how many people were jealous of me.” Even today, when rethinking about the truck, he is still proud of it. At that time, the construction projects in M city were blossoming everywhere. Wu worked diligently and got a reasonable salary he deserved. “Hey, with money, I thought about enjoying. My friends and I tried a lot of ways to enjoy life, such as drinking, singing, smoking, playing cards, and even with women. . . Work hard and play hard, you know. So I’m not jealous or curious about what the young people are playing now, because I had tried all of them when I was at their ages. Nothing special, you know. Later, I also wanted to try something new, and then I did try.” He said with a gesture of injection, “You know, in M city, No. 4 (heroin) is so cheap that you could buy it on the street. I had been there for a long time.” Wu pointed to Sun and said to me: “We were all consumers. He was the dealer.” People laughed, while Sun was blushed and waved his hands to stop them from joking.

They like to make fun of him, partly because he is the youngest of them; but another important reason is his ironic and unexpected experience as a drug dealer. “My parents are famers. Around 1990, a close friend of mine in the village said that if you want to make money, you must go outside.” Later, Sun found that the beef jerky in his hometown was very popular, so he invited his family and friends to run the business together. He drove a van to transport goods between his hometown and a big city from time to time. “Then one day, when I was driving on my way, a few guys asked a pick-up. I heard they talk about fetching something (heroin). It was my first time to drive for them but not the last time. A few months later, I got acquainted with them. Afterwards, I thought it could be a profitable operation. Come on, just look at what they earned by selling drugs. While I was still selling the fucking beef jerky, I had, of course, changed some of my goods in the van. “ As Sun’s ambition was gradually expanded, he gave up his original small business, and his car was only used to carry his growing desires. “I thought very clearly at beginning. I said I only want to make money. So I definitely

[7] 李诚 Li Cheng、马树勋 Ma Shuxun:《改革开放与云南社会治理》Gaige kaifang yu Yunnan Shehuizhili, [Reform and Opening up and Yunnan’s Social Governan], 《中共云南省委党校学报》Zhonggong Yunnan Shengwei Dangxiao Dangbao, [The Journal of Yunnan Provincial Committee School of CPC] No. 1(2019).

would not try smoking. But... Well, my friends suggested...” Sun thought that he could control himself by playing the role of “drug dealer”. However, eventually he became an addict. “In fact, I didn’t think so much at first. If I didn’t leave for there, it would be fine. But the people who had come out to work earned much more money than farming. Besides, young people thought (work outside) means a good life,” Sun said. Though hesitating, he finally decided to go out. At that time, desire was expected from the market economy. It is true that social transformation is inseparable from rationality, but desire also plays an important role as an irrationality factor, which means that it cannot be calculated or measured. “Economy studies desires, especially those related to victories, which relate to temporary emotions. Besides, others relate to habits and only cause harms from time to time. And some other expectations will never come true.”<sup>[8]</sup> On the one hand, desire is an indispensable factor for market economy, although maybe with real harms to people. In this way, we can understand why there were many explosive “heats” in the 1990s, such as stock fever, real estate fever, and so on. For my reporters, they have experienced all these booms and they describe the atmosphere of the whole society then as “full of desire”. As long as they were willing to work through it, they would get profits, or even change their status and identity. However, the so-called choices and changes actually seemed to be overwhelmed by greater external forces; and once the so-called “heats” and desires were over-developed, they would inevitably fall out of control.

The stories with Wu and Sun seem to reflect the personal choices and the fate of the era in a specific context. In their narratives, they all mentioned “1990”, which relates to the reform and opening up policy and the market economy reform in China, while the globalization was advanced in the world. Consequently, in such a small city located on the border, when the new policy encountered the wave of globalization after the 1980s, heroin also began to find its way. When in “1990”, the situation was even worse than before. Thus, while people’s desires were inspired by the market economy here, they plunged into the piles of heroin that eventually caused people to lose themselves.

The colonial memory and “Chinese channel” provide the background of being an addict because location and history have something to do with the easy availability of heroin. Desire, on the one hand, allows an individual to upgrade his live standard. However, on the other way, the inappropriate way of pursuing a desire lead him to the disorder and chaos and finally being an addict, especially in here heroin is notoriously easy to procure. Moreover, being an addict implies that one has little hope for recovery in the frequent detoxification- relapse cycle. Namely, they have tried and failed many times in the methods of detoxification and treatment based on evidence-based medicine and governmental management. Being an addict and accepting the role also the partial reason that one comes to the gospel rehabilitation center.

### 3. Healing Practice in the center

Whether from the description of the drug addicts themselves or the research surveys, it is not difficult to find that all aspects of the society have made their attempts to explore effective ways of

[8] 马歇尔 Alfred Marshall:《经济学原理》Jingjixue Yuanli [Economics], 朱志泰等 Zhu Zhitai deng 译, (北京 Beijing: 商务印书馆 Shangwu Yinshuguan [The Commercial Press], 1991, 115.

dealing with addiction. And from the perspective of social management, the effort for detoxification cannot be ignored easily. For instance, after the Ministry of Justice deployed an initiative for the basic model of unified national drug rehabilitation in May, 2008, many cities have begun to explore and improve their local drug rehabilitation efforts in an attempt to find a unified drug rehabilitation model.<sup>[9]</sup> In addition to the government's compulsory drug dependency treatment, many local governments have also introduced social work to assess and intervene in the physical conditions, attitudes and performance of drug addicts.<sup>[10]</sup> Specifically, there are grouped drug addicts to conduct controlled experiments, so as to explore the impact of nursing intervention on drug withdrawal,<sup>[11]</sup> or from a psychological point of view, to explore the effect of Cognitive Therapy on detoxification.<sup>[12]</sup> Even intervening surgeons are operated. In terms of medical treatment, the replacement therapy with methadone instead of heroin has always been the mainstream treatment. As one of the mainstream detoxification drugs, Methadone has been used as an alternative medicine to treat drug addiction for more than 30 years at home and abroad.<sup>[13]</sup> And research on methadone maintenance treatment is also continuing. Buprenorphine, also an alternative therapy drug, was once expected to replace methadone and change the spatial mode of treatment.<sup>[14]</sup> There are also many clinical trials across the world, so as to decide their efficacy and compare them with methadone. In these experiments, however, drug users are all regarded as an objective object to be studied, i. e., to provide therapies that they think can get rid of the addiction. The philosophy behind this idea is: it is the individuals who have made the wrong choice, and the society is providing correction and treatment strategies. But the drug problem is still incessant, and the high relapse rate of heroin addiction is always a difficult problem to solve.

No matter the methadone maintenance treatment or the social management, it aimed to cure their illness related to addiction. However, when I reviewed their personal narratives, I found that heroin addiction is not just a physical dependence, but also a reflection of each vulnerable individual's ups and downs in the torrent of the times. After individuals struggled between the satisfaction and

[9] 新闻稿 Xinwengao [News press]《江苏推行统一戒毒工作基本模式》Jiangsu Tuixing Tongyi Jiedugongzuo Jiben Mushi [Jiangsu Implements Unified Basic Model of Drug Addiction Treatment],《中国司法》Zhongguo Sifa [Justice of China], No. 11, (2019).

[10] 赵芳 Zhaofang, 傅鹏鸣 Fu Liming,《社区戒毒社会工作分类评估研究》Shequ Jiedu Shehuigongzuo Fenlei Pinggu Yanjiu [A Study on the Classified Evaluation of Social Work in Community Drug Rehabilitation:],《社会工作与管理》Shehuigongzuo yu Guanli [Social Work and Management], No. 06(2019).

[11] 何艳杰 He Yanjie,《护理干预对吸毒者戒毒期间的影响分析》Huli Ganyu dui Xiduzhe Jieduqijian de Yingxiang Fenxi [Effect of nursing intervention on drug addicts during detoxification],《世界最新医学信息文摘》Shijie Zuixin Xinxue Xinxin Wenzhai [Journal of the world Latest Medicine Information], No. 85, 2019 :67+71.

[12] 张志浩 Zhang Zhihao,《内观认知疗法对女性强制戒毒人员毒品渴求的干预及机制研究》Neiguan RENzhiliaofa Dui Nvxing Qiangzhijiedu Renyuan Dupin Keqiu de Ganyu ji Jizhi Yanjiu [Intervention and Mechanism of Naikan Cognitive Therapy on Drug Carving of Female Drug Abusers on Compulsory Detoxification], (天津 Tianjin: 天津医科大学硕士论文 Tianjin Tike Daxue Daxue Shuoshi Lunwen [Master thesis in Tianjin Medical University], 2019).

[13] 刘杨 Liu Yang,《美沙酮维持治疗患者心理健康及影响因素研究进展》Meishatong Weichizhiliao Huanzhe Xinli Jiankang ji Yingxiangyinsu Ynaji Jingzhan [Research Progress on Mental Health and Influencing Factors of Methadone Maintenance Treatment Patients],《临床医药文献电子杂志》Linchuang Yiyao Wenxian Dianzi Zazhi [Electronic Journal of Clinical Medical Literature], 2019, 6 (80):192-193.

[14] 阿德里安娜·佩特里纳 Petryna, A 等,《全球药物》Quanqiu Yaowu [Global pharmaceuticals], 许烨芳 Xu Yefang 译, (上海 Shanghai: 上海译文出版社 Shanghai Yiyen Chubanshe [Shanghai Translation Publishing House]), 2009, 157. 林杰, 徐雨佳, 杜辉, 李洁, 王俊杰, 美沙酮与丁丙诺啡对海洛因依赖者脱瘾治疗效果比较[J]. 国际医药卫生导报, 2006(19):56-58

dissatisfaction of desire, they eventually fell into disorder. When too many similar individual stories continue to superimpose on each other, what is revealed is the depiction of the era, as those individual desires are also the social desires and their personal disorder is also the overall disorder. It can be seen that drug addiction itself covers too many complex aspects. Compulsory detoxification and methadone replacement therapy that only target detoxification itself are not difficult to predict and ultimately achieve the desired results.

Thus, it is necessary to reflect on the tension between cure and healing. “Canguilhem makes an important and necessary distinction: healing is fundamentally subjective and individual, following an etymology that includes protection and security, but also to defend. Cure, on the other hand, reflects forms of internal change adhering to external validation. Cure is the success of change within, verified statistically or otherwise from without. Stated simply, cure is a return whereas healing opens onto something new and previously unfamiliar or unknown. Healing does not restore a previously existing order; it does not return to an old norm.”<sup>[15]</sup> For the addicts in this study, after finding the failure of cure, they tried another way—healing to detoxification, which needs to explore something unknown and try to establish new order, while the unknown things are usually irrational and personal.

Moreover, it is time to switch ideas by analyzing the “choices” of drug users from their own perspectives. Desire is one of the important irrationality factors. As disclosed in the personal narratives and the life experience of the respondents from drug use to drug addiction, this is actually a question of how to deal with desire, because drug addiction is a “choice” driven by desire as well as a channel to deal with desire. Rebirth Center is seeking such changes. From this perspective, rather than a question of social governance or medical treatment, the problem of drug addiction is about how to deal with desire, which is not only personal but also social.

When detoxification became a social problem, people also began to work beyond the type of scientific rationality. For example, Professor Zhuang Kongshao of Zhejiang University filmed an anthropology movie, “Tiger Day”, which shows the process of Yi people using folk rituals, i. e., customary law, family support, moral power, etc., to be clean. In the movie, the “headman” was distressed that his family branch would be destroyed by heroin, so with the help of the family branch, he chose “Tiger Day” to hold the ceremony. The so-called “Tiger Day” is the day of war in Yi people; thus, the ceremony means that heroin is regarded as an enemy of the family to fight against, demonstrating the possibility of cultural forces defeating biological diseases. And the resulting “tiger day model” is also regarded as one of the successful detoxification practices in Asia.<sup>[16]</sup> The gospel drug rehab center, where my field site is located, is also an attempt outside the mainstream discourse, mainly relying on the power of religion and faith to detoxify. In their words, it means “not relying on drugs, not relying on one’s own strength, but on God.” As mentioned earlier, individuals in society struggle with desire and eventually go out of order; and when they come to the “rebirth center” for treatment, the “rebirth center” provides a way to deal with desire and the

[15] Todd Meyer, *Clinic and Elsewhere*, (Seattle and London: university of washington press), 9.

[16] 庄孔韶 Zhuang Kongshao, 杨洪林 Yang Honglin, 富晓星 Fu Xiaoxing, 《小凉山彝族“虎日”民间戒毒行动和人类学的应用实践》Xiaoliangshan Yizu “Huri” Minjian Jiudu Xingdong he renleixue de Yingyong Shijian [Revelation of the “Tiger’s Day” Initiative in the Yi Ethnic Region of Xiaoliangshan ], 《广西民族学院学报》Guangxi Minzu xueyuan xuebao [Journal of Guangxi University for Nationalities], No. 2, (2005), 38-47.



possibility to reorder their lives.

Therefore, the way to deal with the addiction here is a healing process to deal with a disorder caused by desire. To be specific, different from cure, healing means building a new order or pursuing something unknown. The practice in the center is to create the theological order for the addicts. It is not difficult to find in their daily routines and items they used.

Different from thinking detoxification as a kind of “treatment”, the “rebirth center” calls it a “transformation”, which is equal to a healing process. This is actually a different discourse expression under two sets of cognitive concepts. From the perspective of “cure”, drug addiction is regarded as a disease, whether it is a physical problem or a social problem, with a focus on its possibility of getting better or being well. But the staff and addicts in the “rebirth center” do not talk about “cure”, but only refer to “change”, because they believe that if they only came with the purpose of detoxification, they would definitely fail. Instead, they must set a further goal, such as seeking life changes. Getting away from addiction is just something that comes along in the process of such changes. The transformation of life is actually to establish a new order. From the point of view of healing, what happened has happened. Drug users have no way to completely return to life before they used drugs. On the contrary, they need to seek and accept a new order. At the individual level, the core is changed from a human-centered approach to a God-centered one. This is a change in cognitive concepts and a way of dealing with desire. Because of belief, the desire for disorder and restlessness will be calmed down by the God in the heart. The practice of this transformation mainly includes prayer and the establishment of the order of daily life. The former is more valued and is the key to realization of “changes”.

Wu talked about his memories of prayer: “I have been a Christian for a long time. However, I didn’t believe it. It seemed like following other’s steps, you know. My mother believed and I followed. Sometimes I went to church on weekends. However, when I was addicted to heroin, I didn’t go there anymore. When they prayed, I would listen and learn, but just like learning, just like making some noise. Later, I was still praying in the rebirth center and there was really something in my heart that I wanted to say. So I said that the most important thing I learned in the center was prayer, which allows me to know God.” For Wu, the acquisition of prayer is equivalent to accepting another set of cognitive concepts and accepting a set of words. His comportment changed in the center, and he picked up forms of speech with religious means. He used terms like “my weakness” and “lost my faith” phrases, so many of the other patients in the center deployed effortlessly after countless praying sessions. Sun also agreed with Wu’s statement: “It’s my sister-in-law who has belief in God, but I don’t believe it. When I first came here, they told me that faith can help with drug addiction. At that time, praying while having drug addiction was uncomfortable. I did not believe it. But then the teacher gave us lessons about theological knowledge. I think it is good. I asked him what a “good” method was. He said: Well, how can I say that? There is sustenance in my heart. I used to give up myself at home before; and after a while, I was sad. Looking at myself, my life was a mess. It seemed that after I used drugs, these troubles no longer existed. But now it is different. I can talk to God and pray. If not, I can go to the church to find brothers and sisters to pray together. I will not just think about how sad I am. I can pray if I do not feel well. In fact, it is difficult to say how much impression the theological courses in the rebirth center has delivered to them, but the behavioral way of prayer

does reflect the impact and change in life, so that they no longer focus only on their own desire.

In addition to prayer, the schedule of practice in the rebirth center manages the order of daily life, thereby returning the practitioners' bodies to an orderly state. For example, at six o'clock in the morning, when it is just dawning, with the bell, I heard footsteps from the dormitory of the students upstairs, followed by the sound of prayer: from gratitude for last night—"Thank you for your care and conservation overnight", to today's expectations—"Entrust today's life to the Lord's hands, and ask the Lord to lead." Then there were more messy footsteps and washing movements. As can be seen from their daily schedule of work and rest, except for Sunday, which is counted as a rest day, the same work and rest rhythms are repeated every day, with the same content including: Bible reading, spiritual devotion, prayer, etc. Moreover, they have to hand in their mobile phones, computers and other items from the day they enter the center. There is no Internet available, and they are basically in a state of isolation from the outside world. In this state, their daily practice is changing the original living habits. It can, of course, be understood as a kind of discipline. Their daily life behaviors fully comply with the regulations and their body needs to be present at the prescribed time. This itself is a process of discipline for the body. As commented by Sun, "In the (Rebirth Center), you don't need to think about anything. You know what you should do during the day and at night. But when I took drugs, I was unable to distinguish between day and night." Therefore, the order in the Rebirth Center has reshaped their concepts of time. Reordering not only exists as a management regulation, but also stabilizes their bodies through such a sense of order. The mind enables them to gradually get rid of chaos and disorder in their practice day after day, deal with their desires, and adapt to the new order of life.

#### 4. Conclusion

In this article, I'm not going to advocate the success of gospel detoxification. People often say "drug addiction in one day, and detoxification for life." How long after leaving the drug treatment center without drug addiction can it be regarded as a success? Maybe they should track their life for a definite result. I want to explore whether it is possible to rethink drug abuse by introducing irrationality factors (e. g., the desire). In previous researches, there is no lack of discourses about drug abuse and drug withdrawal from the aspects of policy implementation and management methods. From the perspective of managers, it is easy to attribute the road to drug use to personal wrong choices, but this idea fails to understand drug users. And this may be one of the reasons why the measures cannot achieve the desired effect.

When I try to start from the perspective of the subject of drug addicts, I find that the drug problem is actually an issue of desire, which is both personal and social. By integrating the specific historical background and geographical environment of the western Yunnan border with their personal experience of "being a drug addict", we can reach a conclusion that individual choices cannot exist independently of the times and social backgrounds, just as the personal desires are actually the social ones. When society is closely connected, desire itself is social. Especially, after the implementation of the policy of opening to the outside world, Yunnan's geographic location has

become a channel for international drug trade, and individuals living there have been drawn into the wave of the times. Under such a complicated time node, desire is both positive and dangerous. Yes, they eventually “became drug addicts” because of uncontrolled desires, which finally lead to disorders. When desire brings power to social development, it can easily cause individuals and societies to fall into a disorderly state, which may become a dark side under the pain of the transformation of the times.

For addicts, the process of detoxification is actually a program of dealing with desire. They experienced failures after the collision between individuals and the system. Whether as a subject requiring management or correction or a patient in need of treatment, they could not get the treatment that brought a real change in their lives under the traditional approaches. Unlike cure, it is a healing process because they cannot come back to their old order and previous lifestyle. Instead, the addicts in the center need to build a new order to guide the rest of their lives. In order to deal with problems caused by desire, a new order of life may be established on their body and mind by changing the cognitive concept. It is also a response by the locals to the trauma of the times. What is more, the practices of healing is full of the feeling of monastic. In service of recovery and rebirth, they have to follow routines such as praying and reading the Bible. Besides, even everyday rituals of eating, working, and sleeping are expected to follow the rules. During the healing experience, they are meant to establish new forms of behavior, new patterns of being, new performances of every day, a new order of daily life—eventually, rebirth as a new person without addiction.

中文题目:

## 成为瘾君子与疗愈——一所福音戒毒中心里的叙事与实践

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**摘要:** 成瘾作为一个社会问题, 在中国西南边境地区尤为棘手。本研究基于在云南一个福音康复中心为期六个月的民族志研究, 探讨了他们如何成为瘾君子以及如何应对自身的情况。在理性分析和讨论中, 吸毒往往归咎于成瘾个体的选择。然而, 在反思他们的成瘾方式时, 有必要考虑地理因素和历史背景所带来的影响。此外, 本研究试图通过对吸毒者的个人叙述, 引入欲望的非理性因素, 从被试的角度分析他们的吸毒经历是如何通过欲望与社会联系在一起的。然后, 通过使用参与观察的方式, 记录他们在康复中心里的日常实践, 本研究深入探讨了如何通过福音康复中心的治疗来处理这些欲望, 以及他们如何通过疗愈实践来实现重生。

**关键词:** 毒品; 成瘾; 欲望; 福音戒毒; 疗愈