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Sending Drug Addicts to Compulsory Addiction Facilities: Challenge of Protecting the Human Rights of Drug Addicts in Vietnam

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Abstract

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Several Southeast Asian nations, including Vietnam, enforce mandatory detoxification in detention facilities for individuals with substance abuse issues. Since 2010, growing concerns regarding human rights abuses associated with compulsory drug detention centres have been expressed by various United Nations agencies, human rights experts, and other stakeholders, prompting calls for their closure since 2012. Despite these concerns, the Vietnamese government persists in employing this strategy under the guise of the "war on drugs," and its discontinuation appears improbable in the near future due to numerous political and social hurdles. This study employs established legal research methods to assert that compulsory detoxification constitutes a breach of human rights. It aims to elucidate to the global academic community the reasons behind Vietnam's persistent use of this measure. By utilizing both Vietnamese and international legal frameworks alongside statistical reports on the outcomes of compulsory detoxification, the research argues that these practices can be viewed as violations of human rights. The article highlights the challenges impeding the prompt elimination of compulsory detoxification in Vietnam based on practical experiences, including insights from random surveys gauging public opinions. The findings indicate a prevalent concern among the majority of individuals who are unwilling to coexist with drug addicts in their communities. This study presents compelling arguments urging the Vietnamese government and policymakers to acknowledge compulsory detoxification as a violation of human rights. Simultaneously, it provides insights for the global community of human rights experts, helping them understand the complexities that hinder Vietnam from abolishing this measure despite objections from human rights organizations. The outlined initiatives in the article also serve as a guide for Vietnamese policymakers and international human rights organizations to comprehend and address the challenges faced by Vietnam in protecting the human rights of individuals struggling with drug addiction.

Introduction

Individuals involved in illicit drug use inherently possess the equivalent human rights as the general population. Nevertheless, in practical terms, this demographic frequently encounters challenges to the preservation of their human rights. A minority of global drug users have access to proper treatment, Harm Reduction measures, and protection against HIV and hepatitis. The anti-drug efforts often lead to severe human rights violations, including torture, prolonged imprisonment without trial, death sentences for suspected users or small-scale dealers, denial of basic medical care, and extrajudicial killings. Despite human rights being a fundamental requirement for development, these violations persist. Human rights form the bedrock of a dignified life, underpin equal rights, foster free societies, and serve as the foundation for sustainable development. The United Nations urges Member States to ensure drug control efforts align fully with internationally agreed human rights principles.

In June 2020, thirteen United Nations agencies, including the Office of the High Commissioner for Human Rights, the World Health Organization, the UN Office on Drugs and Crime, and UNICEF, jointly called for the closure of all compulsory drug detention and rehabilitation centres in the Asia Pacific region. This appeal, issued during the COVID-19 pandemic, reiterated a similar statement made by twelve UN organizations in 2012. The earlier statement followed investigations by NGOs and human rights monitors, revealing the involuntary detention of possibly half a million people globally for compulsory 'drug treatment.' The UN entities in both statements urge states operating such centres to promptly close them and release the detained individuals, emphasizing that arbitrary detention violates fundamental principles of international law (Rodley & Pollard, 2009). Article 9 of the Universal Declaration of Human Rights explicitly asserts that individuals should not undergo arbitrary arrest, detention, or exile. This fundamental right to be shielded from arbitrary arrest or detention is likewise codified in various international agreements, such as Article 9 of the International Covenant on Civil and Political Rights, Articles 37 and 40 of the Convention on the Rights of the Child, and Article 14 of the Convention on the Rights of Persons with Disabilities. In juxtaposition to drug treatment involving incarceration, community-based treatment emerges as the most efficacious approach for aiding individuals impacted by drug use and dependence.

In recent years, a growing number of Asian nations have embraced punitive, ostensibly anti-drug campaigns (Lasco, 2020). The mandatory detention of individuals involved in drug use is employed in various developing nations, notwithstanding its lack of ethical soundness and efficacy in addressing addiction. This practice constitutes a violation of the human rights of detained drug users, as it occurs without proper legal due process, review, or the element of choice (Ghani et al., 2015; Hall & Degenhardt, 2012; Klingemann & Storbjörk, 2016). In numerous countries, drug users face barriers to healthcare and are subject to arbitrary detention, harassment, abuse, and incarceration. Additionally, there are documented instances of severe punishments, forced labour, denial of food, custodial deaths, sexual abuse, and sleep deprivation (Ghani et al., 2015; Harvey-Vera et al., 2016; Lozano-Verduzco et al., 2016; Mohamed, 2012; Syvertsen et al., 2010; Wolfe et al., 2010).

In Vietnam, despite drug use being categorized as an administrative offense rather than a criminal one, individuals apprehended by law enforcement officers who decline voluntary participation in drug treatment are compelled to undergo forced "treatment" through placement in mandatory drug treatment facilities, as documented by Tran et al. (2019). This measure may extend up to a duration of two years, resulting in the mandatory isolation of drug users from society for the specified period, as indicated by Cao et al. (2016). In theory, this measure aims to detoxify and rehabilitate drug users within compulsory facilities, providing education and vocational training. However, in reality, it serves to curtail the freedom of drug users with the purported goal of community "purification." Individuals admitted to

mandatory drug treatment facilities may face prolonged detention without due trial processes, exposing them to potential physical and psychological abuse under the guise of "drug treatment." (Cohen & Amon, 2008).

The termination of drug use is not automatic upon incarceration (Carpentier et al., 2018; Mundt et al., 2018; Norman, 2023). On the contrary, sustained drug use post-detention is prevalent (Strang et al., 2006). In 2022, Vietnam witnessed the placement of 19,181 individuals (18,416 men and 765 women) in compulsory drug treatment facilities. Notably concerning is the persistently high percentage, occasionally reaching 30% of individuals who resume drug use subsequent to their compulsory detoxification.

Presently, there is an increasing international consensus advocating for the elimination of the detention of drug users, grounded in various arguments concerning the characterization and function of drug users, as well as the inefficacy of such measures in the context of drug control (Ma & Perera, 2016). Despite this global trend, numerous Asian nations, including China, Thailand, Cambodia, and Lao PDR, persist in upholding measures aimed at curbing drug addiction through the retention of detention protocols (Amon et al., 2014). The rationales behind their adherence to detention measures for drug users are multifaceted, encompassing cultural, political, ideological, legal, historical, and economic considerations.

This debate revolves around drug control and human rights protection. In Vietnam, drug control theory advocates for isolating drug users through detention to facilitate a secure environment for overcoming addiction. The premise is that individuals without drug dependencies cannot coexist with those struggling with addiction due to susceptibility to influence. Isolation of drug addicts from the community is posited to enhance security, order, and economic development (Ninh et al., 2019).

Contrarily, from a human rights perspective, addiction treatment is an enduring and intricate process requiring continuous support. Emphasizing the significance of individual will and community support, this approach encourages drug addicts to cease and recover within their familiar living environment. Isolating them from the community hinders reintegration and increases the risk of continued drug use. Furthermore, placing drug users in closed environments poses a potential violation of human rights, limiting living space, impeding access to treatment, and exposing them to potential exploitation as unpaid labour (Yang & Giummarra, 2021).

This study seeks to raise awareness among the Vietnamese government and policymakers regarding the violation of addicts' human rights through compulsory detoxification. Simultaneously, it aids the international academic community in comprehending the challenges hindering the elimination of compulsory detoxification in Vietnam. The research outcomes aim to facilitate a collective understanding of the issues faced by the Vietnamese government, paving the way for further research and solutions to address these limitations and protect the human rights of addicts.

After establishing the foundational requirements of a research article, the study utilizes the legal framework to demonstrate that compulsory drug treatment constitutes a human rights violation. Reasons include discrepancies in authority and procedures contrary to the 2013 Constitution, arbitrary time limits, forced labour in mandatory facilities, and a lack of evidence on treatment effectiveness. The article then delves into the challenges of abolishing compulsory treatment in Vietnam, citing operational secrecy, negative public perception due to riots and escapes, prolonged isolation leading to fear and criminal behaviour, and widespread public support for maintaining this measure. The conclusion summarizes the research findings and proposes avenues for further investigation.

Literature Review

The scholarly discourse on the implementation of compulsory detoxification draws upon a multidisciplinary approach, predominantly stemming from the realms of medicine and law. Legal and medical scholars on an international scale have scrutinized the characteristics of enforced drug treatment. Random surveys of individuals recently discharged from drug rehabilitation centres in China, Cambodia, Vietnam, and Laos have underscored the punitive nature of this practice, emphasizing its association with human rights transgressions (Amon et al., 2014; Werb et al., 2016). Numerous research endeavours have been undertaken to ascertain the efficacy of compulsory detoxification. The findings consistently indicate that prolonged isolation from the community poses challenges for individuals with addiction issues in their subsequent reintegration into society (Lunze et al., 2016). By highlighting the deficiencies in forced drug treatment, including the absence of a comprehensive drug treatment system encompassing social support, psychological intervention, and a proficient medical workforce, the researcher aims to critique compulsory drug treatment centres as infringements on human rights (Yang & Giummarra, 2021). An in-depth interview involving 19 injection drug users (IDUs) and 20 government and non-governmental organization officials in China revealed that drug addicts harbour significant fear of potential attacks. The absence of regular medical treatment or drug detoxification prompts arrest warrants and mandatory drug treatment. The evidence suggests that the policy of compulsory drug treatment through detention may violate human rights and jeopardize the health of individuals with addiction issues (Cohen & Amon, 2008).

In Vietnam, research on human rights has been ongoing since the endorsement of key international conventions. While there is systematic exploration of human rights, the focus is mainly on general human rights and the rights of specific groups, such as women, children, people with disabilities, and migrant workers. Notably, there is a scarcity of research on the human rights of drug addicts. Limited studies suggest that the coercive nature of compulsory detoxification in Vietnam resembles imprisonment, yet attention to application procedures and adherence to standards is lacking. There is a need for increased focus on the equalization process to safeguard the rights of individuals subjected to forced drug treatment (Tung Son et al., 2019).

Methodology

This study aims to elucidate the human rights violations associated with compulsory drug treatment in Vietnam and provide insights into the challenges hindering its swift elimination. The researcher employed analytical methods to comprehensively assess the legal framework governing compulsory detoxification measures, utilizing key documents such as laws and reports from competent authorities. The study adopted a qualitative approach, gathering secondary data from diverse sources, including scientific publications, journals, books, and online media. Additionally, primary data sources, consisting of statistics generated by the researcher, were utilized to further clarify the research objectives.

A random interview encompassing individuals aged 18 and above, representing diverse fields beyond the legal domain, yielded 1,108 responses. The interview structure, categorized into four sections, sought opinions on the elimination of compulsory drug treatment, including whether it should be eradicated from the Vietnamese legal system, constrained in its application, maintained as is, or follow other inclinations. Utilizing survey outcomes, the researcher employed analytical methods to deduce conclusions regarding the attitudes of Vietnamese individuals towards the abolition of compulsory drug treatment.

Results and Discussion

The Measure of Sending People to Mandatory Drug Treatment Facilities - A Sanction That Violates the Human Rights of People with Drug Addictions

Drug dependence, recognized as a chronic and relapsing medical condition, positions addiction treatment for both criminal and noncriminal offenders within the domain of medical health care. The imposition of mandatory treatment raises concerns in relation to human rights principles delineated in the International Covenant on Economic, Social, and Cultural Rights—an internationally binding treaty signed by over 160-member states, including Vietnam (Lunze et al., 2016). The United Nations Human Rights Committee underscores the state's obligation to abstain from the compelled administration of medical treatment, except under specific conditions for mental illness or the prevention and control of mental and infectious diseases. These exceptions are contingent upon adherence to explicit conditions and limitations in accordance with best practices and applicable international standards. Insufficient evidence supports the justification for mandatory treatment, with clinical experience indicating its efficacy is not assured (Lunze et al., 2016). In the Vietnamese context, the authorization to send individuals to compulsory detoxification facilities raises concerns over potential human rights violations, evident in the following indicators:

The authority and procedures for applying the measure of sending people with drug addiction to compulsory detoxification facilities are different from those of the 2013 Constitution, the document with the highest legal value in regulating human rights issues.

In Vietnam, until December 31, 2013, the Chairman of the People's Committee exercised the authority to employ the measure of consigning individuals to compulsory detoxification facilities. This administrative procedure lacked involvement from the judiciary, deeming individuals subjected to this measure as being detained under the pretext of treating drug users without undergoing trial procedures ([Kamarulzaman & McBrayer, 2015](#)).

Concerning the apprehension of individuals, Vietnam initiated its engagement with pivotal international human rights instruments from the early 1980s onwards, exemplified by its ratification of the International Covenant on Civil and Political Rights (ICCPR) in 1982 and the International Covenant on Economic, Social and Cultural Rights. These foundational international human rights accords, with a particular emphasis on the ICCPR, mandate state parties to uphold the rights of individuals to freedom and personal security. Article 9(4) of the ICCPR specifically addresses this commitment as, *“Anyone who is deprived of his liberty by arrest or detention shall be entitled to take proceedings before a court, in order that that court may decide without delay on the lawfulness of his detention and order his release if the detention is not lawful”*. Consequently, the act of restricting an individual's liberty by consigning them to a compulsory drug treatment facility without undergoing legal proceedings contravenes the principles outlined in the ICCPR.

In September 2011, Human Rights Watch (HRW) released a comprehensive 121-page report censuring Vietnam for the application of coercive measures, involving the involuntary quarantine of drug users without legal adjudication ([Human Rights Watch, 2007](#)). This report incited strong disapproval from numerous political figures within the country ([Phung et al., 2011](#)). Nonetheless, an irrefutable reality remains that the absence of judicial involvement in the process of sending drug users to compulsory treatment facilities constitutes a significant drawback, challenging justification.

Hence, upon the enactment of the Law on Sanctions for Administrative Violations in 2012, the National Assembly delegated the authority to district-level People's Courts to determine the procedures for implementing the measure of sending individuals with drug addiction to compulsory detoxification facilities, a regulation that persists to the present day. Consequently, the evaluation and determination of the application of this measure are undertaken by a judge through a convened session presided over by said judge.

Vietnamese law ostensibly aligns with international standards on limiting individual freedom, but the provision empowering a judge to consider this measure merely superficially adheres to such standards. This process diverges significantly from the judicial procedures involved in criminal cases. Despite being labelled as a court resolution, it lacks the attributes of a traditional court hearing and is instead conducted as a brief meeting, lasting about 30 minutes. The judge, serving as the chairperson, autonomously decides on the application of this measure with minimal debate from participating parties, deviating from a procedural framework conducive to legal contestation when restricting individual freedom. This streamlined approach results in the swift approval of most applications for sending drug users to mandatory detoxification facilities.

In practice, spanning from January 1, 2014, to December 31, 2021, Vietnam accumulated 172,910 documentation submissions urging district-level People's Courts to implement the measure of consigning individuals with drug addiction to compulsory detoxification facilities. The assigned judge opted to enforce this measure in 161,755 cases, reflecting an average approval rate of 93.5%. Notably, each annual iteration consistently exhibited a high acceptance rate, surpassing 87%. Further specifics are delineated in Table 1 (Data compiled by the author from the annual report on the Electronic Information Portal of the Department of Social Vices Prevention under the Ministry of Labour, War Invalids and Social Affairs).

The time limit for applying the measure of sending people with drug addiction to a compulsory detoxification facility is arbitrary, without a clear and precise legal basis. While general regulations suggest a time frame ranging from 12 to 24 months for the application of this measure, there is an absence of specific principles within the law delineating the precise determination of this time limit. Typically, judges opt for an average duration of 18 months, but instances exist where a maximum period of 24 months is imposed without a discernible rationale (Luu et al., 2017). Despite the right of the affected individual to present evidence during the proceedings, they remain uninformed about the specific duration for which the measure will be applied. Currently, there is an absence of documentation elucidating how many among the 161,755 individuals were subjected to compulsory detoxification facilities for periods exceeding 18 months. In a survey conducted by the author group across six Mekong Delta provinces (Tien Giang, Ben Tre, Can Tho, Soc Trang, Bac Lieu, and Ca Mau) from 2019 to 2022, over 56% of individuals were sent to mandatory detoxification facilities with terms exceeding 18 months, as detailed in Table 2. The survey in table 2 was conducted by the author, by tallying up all decisions to apply mandatory detoxification measures issued in 6 Mekong Delta provinces. Decisions are compiled from each province's electronic information portal and combined with data provided by the Department of Labour, War Invalids and Social Affairs of each province to document this research.

Table 1: Results of the Number of Applications and The Number of People Being Sent to Compulsory Detoxification Facilities Nationwide from January 1, 2014, To December 31, 2021.

Year	Number of Proposed Application	Number of People Being Sent to Mandatory Drug Treatment Facilities	Acceptance Rate
2014	1,124	1,032	91.8%
2015	14,028	13,157	93.7%
2016	15,480	14,144	91.3%
2017	21,769	20,584	94.5%
2018	25,312	24,068	95%
2019	24,680	21,569	87.3%
2020	27,511	25,735	93.5%
2021	23,244	22,285	95.8%
2022	19,762	19,181	97%
Total	172,910	161,755	93.5%

Table 2: Duration Of Application to Mandatory Drug Detoxification Facilities in the 06 Mekong Delta Provinces: Tien Giang, Ben Tre, Can Tho, Soc Trang, Bac Lieu, and Ca Mau From 2019–2022.

No	Province	Total	Mandatory Detoxification Period			
			12 Months	From 13 Months to 17 Months	From 18 Months to 23 Months	24 Months
1	Tien Giang	1,276	14	512	685	65
	Percentage	100	1.2	40.1	53.6	5.1
2	Ben Tre	1,031	21	402	571	37
	Percentage	100	2	39	55.4	3.6
3	Can Tho	1,750	34	695	948	73
	Percentage	100	1.94	39.7	54.2	4.2
4	Soc Trang	1,171	26	482	635	28
	Percentage	100	2.2	41.2	54.2	2.4
5	Bac Lieu	1,050	25	424	584	17
	Percentage	100	2.4	40.4	55.6	1.6
6	Ca Mau	1,855	41	676	1,062	76
	Percentage	100	2.2	34.6	57.1	4.1

Drug Addictions Do Not Have the Right to Appeal Against the Decision to Apply the Measure of Being Sent to A Compulsory Detoxification Facility

Presently, there exist two global modalities for compulsory drug addiction treatment. Firstly, in jurisdictions following the first approach, legal provisions do not afford individuals with drug addiction the autonomy to consent or dissent from treatment or choose the preferred treatment modality. This protective measure often involves confinement in correctional facilities or similar establishments, and the detoxification process typically transpires without medical oversight (Hall et al., 2012). In contrast, the second approach permits individuals with addiction the choice between confinement and voluntary informed consent (Pritchard et

al., 2007). In this scenario, individuals with drug addiction face the prospect of detention should they decline alternatives to criminal justice sanctions, presenting an opportunity for them to accept some form of assistance (Hall & Lucke, 2010). Termed as drug courts, this system provides multiple treatment, rehabilitation, education, and healthcare options without subjecting offenders to involuntary treatment.

In Vietnam, the application of the measure of sending individuals to compulsory detoxification facilities aligns with the first form. Ordinance No. 03/2022/UBTVQH15 governs the procedures for considering and deciding on the application of this measure, omitting the recognition of the right to appeal for individuals subjected to compulsory detoxification. This denial of the appeal right underscores the coercive and non-judicial nature of the measure, indicating forced isolation without trial proceedings. Although Article 3(2) of Ordinance No. 03/2022/UBTVQH15 allows reconsideration for those sent to compulsory detoxification facilities, this is restricted to filing complaints with the Provincial People's Court. However, the review process follows a relatively closed mechanism and lacks a formal litigation procedure.

There is no Evidence That Mandatory Treatment is Effective at Treating Drug Addiction

Official reports reveal that in numerous Asian regions, over 400,000 individuals endure detention periods spanning from months to years within more than 1,000 mandatory drug rehabilitation centres, serving both punitive and therapeutic purposes (Mathers et al., 2010). Typically overseen by law enforcement or military authorities, these centres frequently lack proficient medical personnel and fail to deliver adequate treatment (Hall et al., 2012). The efficacy of these facilities in addressing drug dependence remains unsubstantiated (Werb et al., 2016). Conversely, confinement in such centres often leads to the denial or insufficient provision of medical services (Fu et al., 2012; Kamarulzaman & McBrayer, 2015).

Several studies suggest that the methadone maintenance treatment (MMT) alternative in mandatory detoxification facilities in Vietnam remains ineffective (Nguyen et al., 2015). Despite Vietnam's rapid expansion of the national MMT program since 2008, it grapples with escalating attrition rates and poor compliance among individuals with drug addiction (Nong et al., 2023). Medically, methadone utilization relies on synthetic narcotics with prolonged effects and lower toxicity to replace drugs. However, its limitations lie in its inability to completely detoxify individuals, as methadone may still induce drug cravings, leading to continued substance use for coping (Le et al., 2019). As of the end of 2017, the nationwide records indicated 222,582 individuals with drug addiction, with a notable increase in synthetic drug use. Synthetic drugs accounted for over 75% of reported cases. Presently, the number of synthetic drug users is on the rise, constituting more than 80% of the 248,643 recorded drug users as of June

14, 2023 (Tran & Rigg, 2023). Global experiences underscore the lack of genuinely effective interventions for synthetic drug users (Nguyen & Dinh, 2023). Consequently, drug addiction treatment for those compelled into detoxification facilities in Vietnam is deemed insufficient.

People Detained in Mandatory Drug Treatment Facilities Are Forced to Work

Under Decree No. 116/2021/ND-CP, individuals compelled into compulsory detoxification facilities are entitled to detoxification, mental disorders treatment, and other medical care (Article 23). Despite employing various measures such as motivational interviewing, psychological treatment, and symptomatic treatment, mandatory drug rehabilitation facilities, as per global observations, are generally deemed inadequate for effectively addressing drug addiction (Lunze et al., 2018; Nong et al., 2023). Furthermore, those undergoing forced drug treatment are compelled to engage in hard labour as part of the treatment regimen (Lancet et al., 2012).

The genesis of Vietnam's drug rehabilitation centres traces back to the post-1975 communist victory, rooted in the "re-education through labour" initiatives targeting individuals with drug addiction and prostitutes (Lipes & Lellouche, 2011). Within these centres, detainees face compulsory labour under harsh conditions, often receiving minimal or no remuneration. The assigned tasks involve repetitive activities, such as sewing T-shirts, crafting mosquito nets, painting stone jewellery, or processing cashew nuts. Instances of punitive measures for non-compliance, including refusal to work or failure to meet daily quotas, have been reported, encompassing physical abuse through beatings with wooden batons, electrocution, and confinement in solitary quarters.

Obstacles to Eliminating Forced Drug Treatment Facilities in Vietnam

There are many secrets in applying the measure of sending drug addicts to compulsory detoxification facilities in Vietnam.

A significant challenge in researching the forced admission to drug treatment facilities is the confidentiality provision, outlined in Article 7(12) of the 2018 Law on State Secrets. Information pertaining to the intricate aspects of labour and social conditions, as encountered in the implementation of mandatory drug treatment measures, is classified as a state secret. Deliberate or inadvertent disclosure is punishable with a potential 15-year prison sentence under Articles 337 and 338 of the Penal Code. The process within compulsory detoxification facilities involves detoxification, labour, cultural education, and vocational training, all closely monitored. Despite specific legal regulations on these aspects, the closed nature of these facilities poses challenges in practical verification, rendering academic research and policy debates inconclusive. Existing legal research in Vietnam primarily focuses on regulations concerning the rights of individuals subjected to forced drug treatment, lacking insights

into the actual implementation and safeguarding of these rights (Ninh et al., 2019; Tran & Rigg, 2023). This restricted information impedes meaningful discussions on compulsory drug treatment in Vietnam, hindering a comprehensive understanding of the measure.

Many riots and escapes from mandatory drug treatment facilities in Vietnam have caused people to have a negative view of drug addictions, causing insecurity for the entire society.

Substantial evidence indicates the prevalent practice of detaining drug users under the guise of treatment in mandatory detoxification facilities across Cambodia, China, Indonesia, Laos, Malaysia, Myanmar, the Philippines, Thailand, and Vietnam. The proliferation of such initiatives incurs substantial costs, yields no discernible positive health outcomes, and fails to mitigate the supply or demand for illicit drugs (Nong et al., 2023). Human rights organizations accuse the detention of drug users in compulsory drug treatment facilities in Vietnam of constituting human rights violations. Commonly reported infractions include forced labour and physical abuse, leading to frequent occurrences of riots and escapes from these compelled drug treatment facilities (Human Rights Watch, 2007).

On October 23, 2016, over 500 individuals in Dong Nai Province were sent to compulsory detoxification facilities. The ensuing riot and escape occurred as they were not provided with drugs for addiction relief (Tuan et al., 2017).

On November 7, 2016, 1,000 individuals undergoing compulsory detoxification in Dong Nai Province protested, marching towards the facility's gate, expressing a desire to leave. They cited the facility's overload, along with inadequacies in accommodation and labour regimes, as reasons for escaping from the compulsory drug treatment facility (Thuy et al., 2017).

On April 15, 2023, a group of nine individuals was sent to a compulsory detoxification facility in Binh Duong Province. In response, they breached walls, scaled fences, and successfully escaped (Son, 2023). As an annual occurrence, several dozen individuals are sent to mandatory detoxification facilities, engaging in acts of rioting and attempting to flee from such facilities (Nguyen et al., 2019).

As of April 2023, Vietnam has 97 compulsory drug treatment facilities, with over 50% facing overcapacity issues, leading to actual detentions exceeding prescribed limits by 2-4 times (Cuong et al., 2023). Overcrowding and deteriorating conditions contribute to riots and escape incidents (News Department, 2019).

Publicly reported incidents of riots and escapes from compulsory drug treatment facilities have generated a negative public perception of drug addicts. Consequently, there is a prevailing belief in the necessity of maintaining the practice of forced admission to drug treatment facilities (Nguyen et al., 2017).

The time of being isolated from society is too long, making people subject to being sent to compulsory detoxification facilities afraid; therefore, they avoid implementing this measure by committing criminal violations. According to public opinion, people with drug addiction can easily commit criminal offenses. From there, they have even more reason to think that it is necessary to maintain the ability to send people to mandatory detoxification facilities.

As per the provisions outlined in Article 117 of the Law on Handling of Administrative Violations 2012 (amended and supplemented in 2020), an individual sentenced to imprisonment by the court will be exempted from serving the remaining duration when the decision is made to implement the measure of sending individuals with drug addiction to a compulsory detoxification facility.

Exploiting this regulation, individuals with drug addiction intentionally commit criminal offenses to circumvent the decision to undergo compulsory detoxification. Offenses with shorter penalties, ranging from 3 months to 1 year, such as Slander (Article 156), Infringement upon the freedom of religion (Article 164), and illegal impoundment of property (Article 176), are strategically chosen. According to Bac Lieu Province statistics (2019 to September 2022), 45 individuals intentionally committed crimes with limited sentences, ensuring that their prison time is shorter than the duration of compulsory detoxification. The above situation also appears in neighbouring provinces, such as Ca Mau and Soc Trang. The intentional commission of criminal offenses to evade compliance with the decision to undergo compulsory drug treatment adds to societal perplexity and concern.

The intricate connection between drugs and crime, as indicated by [de Andrade \(2018\)](#), has led to a prevailing public belief that individuals with drug addiction are prone to engaging in criminal activities. Consequently, there is growing public support for the compulsory placement of individuals with drug addiction into treatment facilities ([Cao et al., 2023](#)).

The majority of Vietnamese people agree that the measure of forced drug treatment should be maintained.

Currently, there is limited discourse on whether to retain or abolish the practice of sending drug users to mandatory treatment facilities in Vietnam. Despite public opinion not constituting a definitive obstacle to ending compulsory admission to drug treatment facilities, it remains a complex and variable factor influenced by various elements, including psychological reactions and the societal impact of law violations by drug users ([Ngo et al., 2009](#)). A recent survey targeted individuals voluntarily advocating for the elimination of mandatory institutionalization. The prospect of removing the measure of sending individuals to compulsory drug treatment facilities in Vietnam faces considerable challenges for imminent implementation. Out of the 1,108 respondents, merely 101 supported the removal of this measure from the Vietnamese legal system, constituting 9.12% of the total. A substantial majority, reaching 82.58%, expressed agreement with the continuation of compulsory detoxification, as detailed in table 3. This prevailing sentiment underscores the ongoing public support in Vietnam

for the government's commitment to sending individuals to mandatory drug treatment facilities as a means of ensuring social order and safety.

Table 3: Public Opinion on Maintaining or Eliminating the Measure of Sending People with Drug Addiction to Compulsory Drug Treatment Facilities In Vietnam.

No.	Opinion	Number of Questionnaires	Proportion
1.	Should remove from the Vietnamese legal system	101	9.12%
2.	Should restrict the application	89	8.03%
3	Should continue to apply	915	82.58%
4	Other tendencies	3	0.27%
	Total	1,108	100%

Social stigma against drug users constitutes a significant barrier to the eradication of compulsory drug treatment. Ho Chi Minh City once initiated a pilot program integrating community-based drug treatment and methadone maintenance treatment, initially exhibiting promising outcomes. However, despite several years of operation, the program achieved only limited success. Attributing this lack of success, the Drug Addiction Consulting Centre (affiliated with the Department of Labour, War Invalids, and Social Affairs of Ho Chi Minh City) highlighted the scarcity of voluntary detoxification cases. Instead, most families opt to return drug addicts to the centre. In a societal context where stigmatization and fear of drug addiction persist, achieving detoxification outside the community proves challenging, necessitating the support of detoxification centres.

Conclusion

In response to increasing substance use, several Southeast Asian countries, including Vietnam, have established laws allowing compulsory detention for drug users. Vietnam's compulsory drug detention centres detain individuals, mainly suspected of using amphetamine-type stimulants, without consent or proper evaluation. Despite international calls for closure due to human rights concerns and lack of evidence-based treatment, the Vietnamese government continues to send around 20,000 drug users annually to these facilities. The effectiveness of detoxification is questionable, as there are no specific methods or drugs for support. Forced labour temporarily addresses cravings but doesn't ensure complete treatment, leading to a high risk of relapse. Vietnam faces challenges in effectively managing relapse, with limited scientific literature evaluating the efficacy of compulsory drug rehabilitation. Despite evidence suggesting potential harms and the risk of human rights abuses in compulsory treatment settings, public opinion in Vietnam supports mandatory treatment at detoxification facilities. This preference, coupled with the emphasis on incarceration, hinders the development of new drug treatment services and results in inadequate support for individuals with substance use tendencies, leading to decreased social cohesion. Excessive reliance on law enforcement and forced detoxification is unlikely to resolve

substance abuse issues, and recent trends indicate an increase in drug use and related law violations in Vietnam. Addressing these challenges requires recognizing policy conflicts and the relative ineffectiveness of compulsory treatment, prompting a shift toward human rights-based and evidence-based approaches. Policy and advocacy efforts should prioritize the expansion of community-based drug services over compulsory treatment modalities to effectively tackle the drug situation in Vietnam.

This study systematically reveals that Vietnam's response to the escalating drug issue involves human rights violations, drawing criticism from both domestic and international human rights advocates. Despite facing pressure for the removal of this measure, Vietnam encounters political and social challenges, making short-term elimination impractical without viable detoxification alternatives. While this study has made considerable efforts, limitations exist in terms of data, sample size, and discussion scope, hindering a comprehensive understanding of the political, legal, cultural, and social factors influencing Vietnam's persistent use of compulsory detoxification. Future research with a broader scope and practical solutions is recommended to aid Vietnam and other countries in balancing human rights protection with effective drug control measures.

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