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Final Report - AIPS Short Term Research Grant

Project; Yeh Laanat Hamai Lag Gai Hai: Addiction, Masculinity and Violence in Quetta, Balochistan

The funds provided by the American Institute of Pakistan Studies were used to conduct preliminary research with the Hazara community in Pakistan. For the first two months, June and July, I conducted ethnographic interviews with activists, community organizers, teachers and students based on my previous articulation of the project which investigated the role of the dead in Hazara society. However, in Quetta, for various reasons of practicality and accessibility, my project changed to become an ethnography of a drug rehabilitation center in Alamdar Road, Quetta. There were four major reasons for this change in focus. First, all options for residence within Quetta were outside Marriabad - the Hazara neighborhood - except the option to live at a drug rehabilitation facility. My interlocutors were part of the board of the rehabilitation center. Since Hazara neighborhoods are heavily securitized, entering the neighborhood everyday from outside would have been almost impossible. Second, this drug rehabilitation facility was the only Hazara institution that still catered to other ethnicities even after the Hazara genocide in the past two decades. Third, my interlocutors wanted me to assist them in conducting some research on the rehab facility in the hopes of improving its operations. Finally, ever since the war on terror, drug addiction has turned into an epidemic in Quetta and is in desperate need of academic attention.

During my time at the rehab facility - almost three weeks - I stayed at an empty office and had the opportunity to interact mostly with coordinators, upper management, staff and what I call patients-without-uniforms; all of whom were men. The last category refers to people who were previously admitted to the facility but now, for one reason or another, contributed to the daily workings of the facility. Thus, though my interaction with active patients was limited, I could still create a sense of what the treatment entailed. The nature of my interactions were a combination of participant observation and ethnographic interviews which were, for the most part, entirely unstructured.

My research sought to place the problem of drug addiction within Quetta in a broader socio-political context connecting it to the multiple violences in the recent past - in particular, the proliferation of drug production in Afghanistan after 9/11 and the recent spate of ethnic/sectarian violence within Quetta. I also seek to comment on the complexities of the oft-repeated articulation that cites unemployment as a cause of drug addiction by investigating the dynamics of masculinity and work. I investigate, for example, how lack of employment and work were seen to be indicative of a lack of *mardangi* - masculinity. I also investigate, through what I refer to as the revolving door of the rehab facility, the intimate ways in which the rehab facility itself was involved in reproducing the environments which produced drug addiction in the first place - from the label of a *nashai*/powdery (addict) to increasing the power of the family over the body of the patient. Additionally, I am interested in broader discourse of what Angela Garcia calls chronicity - the notion that drug addiction is a long, continuing problem with little chance of success for the patient. The discourse of chronicity which prevailed throughout the facility is best symbolized by the notion of *tuning*. Tuning, an indigenous term, refers to the act of joining the rehab facility once the body has been completely destroyed as a result of drug usage only to rebuild enough that it can sustain more drug usage. As a result of the popularity of tuning, the staff referred to the success rate of the rehab as 8-10% where success is defined by a patient not returning to the facility. The upper management quoted a more conservative number of 1%.