

Brief Reflections on the  
Development of Drug Treatment  
and Rehabilitation in Bangladesh  
1988-2004

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A Paper Prepared for  
The Holy Cross History Conference,  
Moreau Seminary  
Notre Dame, Indiana

June 1 – 3, 2006

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**Introduction**

The following are some of my reflections on the beginning and development in Bangladesh of treatment and rehabilitation of drug addicts including alcoholics. There were other pioneers who had been involved in counseling and the detoxification of drug addicts even earlier. The aim here is to look back on some of steps in this process that I have been involved with. Today rehabilitation of drug addicts is accepted but behind the success stories of today there has been a slow and difficult process.

In the fall of 1987 I heard of a small group of people who were concerned about the growing abuse of heroin in the Tejgaon area of Dhaka. Some of these people were serving the youth of Tejgaon and Mohammadpur in various ways. They had begun to meet to discuss the problem and consider what they could do. At the same time it was obvious that the sale and use of heroin was growing in the Mohammadpur Town Hall area also. For various reasons there was an ample supply of heroin besides marijuana, alcohol and other medicine type drugs that were being used and abused.

**Background of Treatment and Rehabilitation in Bangladesh**

There are a couple important things that need to be clarified. First, some people noticed the growing drug problem and the effect it was having on young men and women. Bro. Donald Becker CSC visited a drug rehabilitation center in Kathmandu when he went to Nepal trekking. So one saw the problem in Dhaka and another found a possible solution in Nepal. At the same time there was a doctor in Bangladesh who had previously spent some time working in Calcutta and had helped start St. Joseph Rehabilitation Center there. This center used the 12 Steps of Alcoholics Anonymous (AA) approach since the doctor was a recovering alcoholic. Briefly this is how the 12 Steps were introduced to Bangladesh.

A committee of concerned people was formed to discuss what could be done. All of those attending wanted to do something but they were also committed to full time work with youth, teaching, business, etc. In February 1988 after this committee had been meeting for some time I became involved. A few practicing drug addicts were coming for counseling and eventually 12 Steps Meetings. At the same time the committee was considering what else could

be done. When I joined the group it enabled them to begin thinking about starting something more organized since I had more free time. It seemed that the first idea was to open a counseling center for the addicts. In the meantime it was decided that I would go to Calcutta to visit the center and get some ideas.

I spent about two weeks in each of the centers in Calcutta, India and Kathmandu, Nepal. I also spent a lot of time reading all the drug addiction material they had. The visit to these two centers and the reading I did on my own was for the most part the total experience and knowledge I had when I began helping drug addicts. It was clear to me after visiting the two rehabilitation centers that counseling would not be of much value for the addicts who wanted to get free of drugs. They would come, say "I want to get off drugs", share and discuss their problems and then go out and resume using drugs. There were no support groups established at that time, and all of the addicts said they did not know of a single recovering addict free of drugs.

#### **Starting the First Treatment and Rehabilitation Center in Bangladesh— 1<sup>st</sup> July 1988**

The founders of this first rehabilitation center were the members of this committee of concern. They in turn decided that I should be the Director of this first drug rehabilitation center called **BARACA** (Bangladesh Rehabilitation & Assistance Center for Addicts). To open a center may seem easy if one has some money. But it was not easy. There were problems about staff, much talk but nobody gave funds and there was no place to live. Besides this there were no drug rehabilitation programs in Bangladesh to follow and the two centers in India and Nepal depended much on the charisma of the people running them. So we had to go where there was no path and left a trail that is still being followed all over Bangladesh today.

In the establishment of this center it was decided that a doctor who was a recovering addict would assist me. A young non-addict college graduate was hired to help. Although we all had some good qualities none of us had much knowledge or experience regarding treatment and rehabilitation of drug addicts. The doctor had his medical background, some natural abilities to sit and share/counsel others and the knowledge he had learned about drug/alcohol addiction in Calcutta. I had over 15 years of experience as director of programs that aimed at the human and spiritual development of young people in Bangladesh. I had some training and read much to acquire knowledge plus experience in counseling. I got my first feeling for service to drug addicts by spending long hours in India and Nepal and later in Bangladesh

listening, observing and discussing drug addiction with addicts, their families and the directors of the centers. I had also visited one of the pioneer doctors in this field of treating and counseling drug addicts in Bangladesh, Dr. Mirza M. Huq, and discussed the problem. He was to continue up to the present as a valuable advisor of the two drug rehabilitation centers I have established. The doctor who joined us in the beginning the doctor was in reality a client-staff with limited time free of drugs and still very much in need of continuing to work on his own recovering to a healthy life. Right from the beginning this was a problem and as long as I was director of this first rehab center he was, or caused most of the main problems I had to deal with.

While visiting the center in Nepal I found a leaflet that described a treatment program in Singapore. I copied it down and in time this became the basic time schedule of the first rehabilitation program. The method needed to help addicts to realize their condition, develop and change their behavior slowly evolved. My past experience and methods used in the previous youth programs formed the basis at first of the methods used. Much of the content relating to drug addiction came from what we had observed in other places, approaches I read about or saw used elsewhere and insights of those involved with drug addicts. In many ways drug addicts and other people are much the same with similar problems but the addict sought a different method, drug use and abuse, to solve his/her problems and thereby created many more serious problems. It is of course much more complicated than that.

The other problem of funds was made a bit easier by the fact that some relatives and friends in the States gave me some money to use in helping people in Bangladesh. It was only Tk.60,000 (\$ 1,300) but with that small amount **BARACA** was started. But to continue to run a rehabilitation center more money would be needed and we did not have any other source of funds among ourselves. It was for this reason that Caritas was approached to help fund the center. Eventually after **BARACA** had been running for over six months, was rather well established and respected, they agreed to take up the center as one of their projects. But Caritas had no part whatsoever in starting nor the original work of establishing this first center.

Some people need to be mentioned as having contributed to the rehabilitation program. One was Sr. Imelda, the Headmistress of Green Herald High School who allowed us to use the school playing field four days a week. This offered sports and outside recreation, a much-needed aspect in the rehabilitation program. For this reason I have always wanted to stay in the Iqbal Road area even after establishing **APON** (Addiction Rehabilitation Residence). Another important person is Bro. Donald Becker who besides giving much encouragement and help

suggested that we begin skill training. I told him I agreed if he would do the work. He very generously did this and to this day he and the skill training remains a part of the **APON** program. I am deeply indebted to him as are many of the addicts.

When the 12 Steps Program was first being used it was more the mentality of Alcoholics Anonymous. The doctor used and misused some of this material. Having read books of both Alcoholics Anonymous (AA) and Narcotics Anonymous (NA) I felt that the 12 Steps of NA was more inclusive as it was open to all addicts even alcoholic addicts and not as rigid as I saw the AA mentality being used by some. Although I had material for both AA and NA I have always emphasized the NA approach. Both the rehabilitation program and the NA 12 Steps Program were established hand in hand. Besides most of those coming for our help were heroin addicts with only a rare alcoholic from time to time.

I recall the gentleman walking down the street with his young son in Mohammadpur who told me that I would fail indicating it was impossible to help addicts to stay off drugs. My response was that I hoped I did not and he should do the same so that in case when his son grew up if he became addicted to drugs there would be a place to get help.

By 1992 some "politics" was going on concerning the running of this **BARACA**. The interesting thing about this was that I was able to stay a couple steps ahead of those causing the problems—mainly the Executive Director of Caritas. He used to claim they had no money for this rehab center but when I would respond that he should return the ownership of the center to me he never did. At one point he started a movement to remove me as the Director and I was again two steps ahead of him and went over his head to some of the Caritas Governing Body who disagreed with him. Of course I was aware that sooner or later he would try to save face by attacking again. I began to prepare for that day in various ways. Little did I expect how that day would come.

On 10<sup>th</sup> July 1994 the politics viciously started again. The doctor after years of constantly causing problems decided to resign and blame me for this. In fact he had a Green Card to go to the USA so rather than just resign and leave and have Caritas unhappy because they had invested much in him he blamed me. This was typical of his life over many years.

The Executive Director of Caritas without considering the validity of the doctor's claims gave me ten days to leave. Some maneuvers complicated and disturbed his plans as the governing body told him his actions were not legal. But I had had enough. Although I hoped that **BARACA** would survive I did not care what would happen and was ready to leave the work of helping drug



addicts. But God had other plans. I was encouraged and advised by some important people to leave this first **BARACA** and to start another new rehabilitation center and not to take a single penny from Caritas. I have never had any contact with Caritas since. Besides this some that I had trusted the most or respected and helped get established were those who caused the most trouble. But others have received the same "treatment" from them.

**APON—Second Treatment, Rehabilitation and Aftercare Center in Bangladesh was started on October 1, 1994**

While I continued as the Director of **BARACA** until January 1995, the second rehabilitation Center, **APON**, started on 1<sup>st</sup> October 1994 in a house close to the first center. So for a few months I was the director of both places. **APON** was at first mainly a Halfway House for aftercare but it also had a basic treatment and rehabilitation program. Finally in about March of 1995 the Director of the first center unilaterally broke off all contact with **APON**. I have never looked back nor have I been concerned about what was or was not happening there. I focused on developing **APON**.

I had some help as I prepared to start **APON** but as the problems increased I had to rely on one or two loyal friends. In time an Advisory Committee of three was organized and they became the actual founding committee. This lasted for a few years until a formal constitution was written and the organization of the **APON** General Council was formed and the constitution was approved on 15 November 1997. **APON** eventually applied for registration with the NGO Affairs Bureau and this was granted on 11 January 1999.

So **APON** began in pain and difficulty. In the first months it became clear that a couple of the people who originally seemed to be helping were in fact repeatedly putting obstacles in the way of the development of **APON**. They tried it seemed almost everything to end **APON** but in the process they only instilled in me a deep faith that **APON** was God's work and therefore nobody could destroy it. This continued and increased over the months and arid years to come. Most of the first nine years of **APON** was an extremely difficult period in my life because of one or two outsiders. In 2004 many feel that **APON** has developed a good Model of Treatment, Rehabilitation and Aftercare superior to all in Bangladesh.

At first **APON** was basically a Halfway House to continue the rehabilitation process for those who came from **BARACA**. But almost from the beginning people who knew or heard about the work I was doing drug addicts were coming for basic treatment. Despite all the difficulties it has been proven clearly in my mind that God in His wisdom allowed a situation to

develop in which another Rehabilitation Center could be established. I was then able to form a better governing body made up of very special people who were open to the development of a Treatment, Rehabilitation, Aftercare and other ways to serve addicts in a way those involved with the first center most likely would not have approved of. Today in 2004, **APON** is continuing to seek and accept innovative approaches to the various drug user related problems, including HIV/AIDS.

During the first few months **APON** was very small so we did not have the need of much funds. But as the number of people grew our funds became scarce. Besides this there was the "recovering addict" I took in more or less from the streets who eventually stole thousands of the little money I had. But at least he missed enough money to cover the expenses for that month and within a few days a gentleman came to visit the center and agreed to fund **APON** for some months. But until those funds started there were months when I did not have money at the beginning of the month even for the rent, much less for food and other expenses

But each time people would create some new problem for me, I would at the same time receive the funding needed for that month or even longer. This repeatedly happened so that I soon began to respond to the difficulties others caused by waiting in expectation to know what new blessing **APON** would receive this time. Of course these blessings came through the kindness of some very generous people, sometimes those I did not even know. Two people should be mentioned as helping to seek funds for **APON** in those very difficult times. They are Mr. David Sorren and Mr. Raymond Kennedy. They were a source of encouragement to me and did much to help **APON** survive either directly or through contacts they made for **APON**.

**APON** was started with one young man on the ground floor of a small house in the Iqbal Road area. We were restricted to about fifteen residents by the owner of the house. As we began to outgrow a house we moved to another with more space. Each of our moves was mainly because of the need for more space. We are most grateful to the owners of the houses we have rented. Our present house meets our needs for the time being. We usually have a few more residents than we have space for. At present we are again waiting in expectation and hoping that the next building we move the rehabilitation program to will be to our own home on our own land. We dream of having a big building with plenty of rooms and the necessary facilities surrounded by enough space for some playing area, flower gardens, trees, a pond for swimming a bit outside of Dhaka

so we can enjoy nature of our surroundings. I trust that some place in God's plans that dream is about to take place.

At one point in the development of **APON** we needed a few more people to play football with our patients so I asked some of the Mohammadpur Town Hall youngsters to join us. This led to contacts with youngsters using drugs or living high risk lives. The result was the beginning of our Children's Program. There is in fact a need for a separate program just for youngsters using drugs or living high-risk lives who will most likely become addicted to drugs.

In the early days of **APON** a couple of people started a rehabilitation program for female addicts. We were involved to some degree in helping them with classes, etc. Unfortunately since the number of female addicts coming for treatment did not develop at the time this center closed. I have always hoped to find some way to again do something for female addicts. In 2003 **APON** gave a proposal to AusAID for a project called, "Female Outreach Project" which was approved. Through this project we have become aware that there are many more female addicts than we had thought. Since that time, the **APON** General Council has in principle approved the dream of opening a center for female addicts.

Two days before the 5<sup>th</sup> Anniversary Founding Day of **APON** in 1999 I met a gentleman living in the Mohammadpur area who had watched us go out to play football and inquired about us. The first morning as I was going to church to pray I met him on the street and we greeted each other. The next day I again met him and we talked a bit about **APON** and he noted he had heard many good things about **APON**. I invited him to the Founding Day Program the next day. He came and while I spoke of the drawing of a Dream House somebody gave me he showed special interest. He asked to speak and then and there offered to donate 26 decimals of land (about an acre) to **APON** and requested the chief guest, the Ambassador of the USA, to help get the money for a building. Unfortunately it took some time for the land to be transferred into the hands of **APON** and by that time the Ambassador was about to leave the country. But again God provided a piece of land for **APON** at Fulbaria just off the Dhaka - Savar Road, 12 km. from Mohammadpur. Since we did not have money for a big building we started a Halfway House for aftercare of those addicts wishing to spend more time in a healthy environment. This has developed



into a very good opportunity for worthwhile recovering addicts. At the same time we have a skill-training program for recovering addicts and high-risk youngsters of the area.

One of my greatest frustrations is that unlike the cooperation exhibited in the anti-tobacco movement, the anti-drug movement and drug treatment and rehabilitation facilities have less cooperation and I feel too much competition. When there are real 12 Step Self-help Groups established all over the country open to all outside the influence of any of the drug rehabilitation centers or detox places we shall see the success rate of this approach increase. With more recovering addicts participating in these 12 Step Meetings and maintaining the principles of the 12 Steps in their daily lives they will not just stay free of drugs they will increasingly, I would hope, be living a healthier lifestyle free of dishonest and high-risk activities.

On the other hand during a time when most everybody is talking about the problems and setbacks in the country I believe that much has been accomplished in relation to drug addicts and treatment and rehabilitation for them. The number of addicts continues to increase but the general population is also increasing and therefore there are more young people. The situations that people are concerned about in the country are a big factor in the creation of more drug addicts. The problem is worse but there has been a great improvement in considering the solutions.

I had the foresight to realize that the prevalence of HIV/AIDS for better or worse would be affected by all drug users. I recall the AIDS Conference 2002 when I pointed out that a presentation given had in fact missed the biggest gap in the prevention of AIDS at the time. I noted that the biggest gap in the prevention of HIV/AIDS in Bangladesh was the vast number of various types of drug users, especially among the majority of those for whom little or nothing was being done to even educate them regarding their high-risk drug and sexual related activities. The immediate response by the moderator and others was to agree with the statement. But so often most just continued to speak of the problem of Injecting Drug Users. It has only very recently been more generally accepted. This point was greatly supported when the UNODC returned to Bangladesh to do some work under projects that were related to Drug Users and AIDS. Much more recently this year people from a number of organizations spoke clearly of the need to be concerned of drug users in general because of their high-risk behaviour including occasional injecting drug which has eventually lead to an increase in IDUs.

Recently I am happy to see a greater consensus that in the prevention of the spread of HIV/AIDS and STI there is a need for advocating a comprehensive approach. This means that groups should not start with needle exchange programs and end with that, nor just begin with a two week detox camps and end with that but that all aspects of treatment, harm/demand reduction should be included. This would include education, prevention and awareness, when appropriate needle exchange and/or detoxification (for a few days, not months), treatment and rehabilitation with aftercare either in a Halfway House or regularly participating in a Self-help Group of recovering addicts based on the 12 Steps or other approach. When treatment repeatedly fails to help a person stay free of drugs then some may feel that a substitution drug program would be fitting under reliable supervision.

Working with drug addicts has been very hard at times but I have been blessed to have had this opportunity to live, work and share my life with many drug addicts. I thank all the addicts from whom I have learnt much. I readily admit that what I have done is beyond my capabilities so it is clear that God has done this work via me. I have so often found the energy to continue as I sat and listened to an addict sharing with me his life, problems, joys of living free of drugs and seeing the absolute trust he had in me.

There is so much more that could be included in these reflections. Not only about events but also the numerous people from whom, I have directly or indirectly learned much and especially some that encouraged and helped me through the difficult times. For various reasons I have not used names at times, especially in the first part. The above is a summary of a much longer and more detailed collection of some of my reflections that I have jotted down over the years.

### **In Conclusion**

I started this journey of serving drug addicts not having a clear path to follow but now I can see that the struggles over the years since 1988 have left a trail that others are following. Few thought it was possible to help drug addicts to recover and some joked about the approaches used—for example, the idea of using recovering addicts to help other fellow addicts to recover. Addicts had no hope and said they knew no addict that was free of drugs. Today these innovative methods that we persistently struggled to establish are accepted and used by many. Besides this we realize more needs to be done for drug addicts outside the rehabilitation centers. The last two or three years especially there has been a major change of attitudes about treatment and rehabilitation of drug addicts. This has taken place not only

among the Government and Department of Narcotics Control officials but among many others involved in treatment and those afflicted by the disease of drug addiction. The media has also supported this positive attitude. Long ago this struggle would have failed but for the help of God. Personally these are very satisfying days for me and I am sure more so for the many, many recovering drug addicts and their families in Bangladesh who have found hope and peace over the years through treatment and rehabilitation of this disease called drug addiction. I salute these recovering addicts and their families for their courage and wish them a long happy, healthy life free of drugs.

**Patients at APON 1994—2004**

<b>Year</b>	<b>Admission</b>	<b>Readmission</b>
1994	36	0
1995	34	0
1996	38	04
1997	53	06
1998	87	08
1999	106	17
2000	97	22
2001	155	29
2002	140	25
2003	246	42
2004	144	31