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The Associated Press

Opium ravages Afghan villages

By Rukmini Callimachi

08/06/2009



SARAB, Afghanistan – Open the door to Islam Beg's house and the thick opium smoke rushes out into the cold mountain air, like steam from a bathhouse. It's just past 8 a.m. and the family of six – including a 1-year-old baby boy – is already curled up at the lip of the opium pipe.

Beg, 65, breathes in and exhales a cloud of smoke. He passes the pipe to his wife. She passes it to their daughter. The daughter blows the opium smoke into the baby's tiny mouth. The baby's eyes roll back into his head.

Their faces are gaunt. Their hair is matted. They smell.

In dozens of mountain hamlets in this remote corner of Afghanistan, opium addiction has become so entrenched that whole families - from toddlers to old men - are addicts. Cut off from the rest of the world by glacial streams, the addiction moves from house to house, infecting entire communities. From just one family years ago, at least half the people of Sarab, population 1,850, are now addicts.

Afghanistan supplies nearly all the world's opium, the raw ingredient used to make heroin,

and while most of the deadly crop is exported, enough is left behind to create a vicious cycle of addiction. There are at least 200,000 opium and heroin addicts in Afghanistan – 50,000 more than in the much bigger, wealthier U.S., according to the U.S. Department of Health and Human Services and a 2005 survey by the U.N. A new survey is expected to show even higher rates of addiction, a window into the human toll of Afghanistan's back-to-back wars and desperate poverty.

Unlike in the West, the close-knit nature of communities here makes addiction a family affair. Instead of passing from one rebellious teenager to another, the habit passes from mother to daughter, father to son. It's turning villages like this one into a landscape of human depradation.

Except for a few soiled mats, Beg's house is bare. He has pawned all his family's belongings to pay for drugs.

"I am ashamed of what I have become," says Beg, an unwashed turban curled on his head. "I've lost my self-respect. I've lost my values. I take the food from this child to pay for my opium," he says, pointing to his 5-year-old grandson, Mamadin. "He just stays hungry."

Beg's forefathers owned much of the land in the village, located beside a gushing stream at the end of a canyon of craggy mountains in Badakshan province, hundreds of miles northeast of Kabul, Afghanistan's capital.

He once had 1,200 sheep. He sold them off one by one to pay for drugs.

The land followed. He's turned his spacious home, once lined with ornamental carpets, into a mud shell. He grows potatoes in rows in the last of his fields and each time he harvests the crop, he has to make a choice – feed his grandchildren, or buy opium. He usually chooses drugs.

Basic necessities like soap long ago fell by the wayside.

"If we have 50 cents, we buy opium and we smoke it. We don't use the 50 cents to buy soap to clean our clothes," explains Raihan, Beg's daughter and the mother of the 1-year-old. The toddler wears a filthy shirt and no underwear. "I can be out of food, but not out of opium."

The country's few drug treatment centers are in cities far from villages like this one. And even those able to get themselves to the cities are often unable to get help. The drug clinic in Takhar province, the nearest to Sarab, has a waiting list of 2,000 people and only 30 beds.

So the villagers are drowning in opium. They begin taking it when they are sick, relying on its anesthetic properties – opium is also used to make morphine. Sarab, a village located at 8,000 feet and snowed in for up to three months a year, is a day's walk over mountain paths to the nearest hospital. The few shops in town do not even sell aspirin.

"Opium is our doctor," says Beg. "When your stomach hurts, you take a smoke. Then you take a little more. And a little more. And then, you're addicted. Once you're hooked, it's over. You're finished."

When his grandson Shamsuddin, 1, cut his finger in the jam of the door, Beg blew opium

smoke into the child's mouth, a common practice in this part of the world which is now resulting in rampant child addiction. He doesn't want his grandchild to become an addict, but he says he has no choice. "If there is no medicine here, what should we do? The only way to make him feel better is to give him opium."

From a single smoke, they progress to a three-times-a-day habit that spreads. When Beg began using opium, it wasn't just his wife and daughter who followed suit. It was his brother. Then his brother's wife. Like an epidemic, it makes its way across the village.

Health workers say that to treat the addiction, they need to treat the entire community. Last year, the Ministry of Health took 120 addicts from Sarab to a facility in a town one day's drive away to be treated. Three months later, they found that 115 of the 120 had relapsed.

"First my neighbor started doing opium again," explains Noor, one of the women treated, whose eyes are dark caves. "Then my cousin. Then my husband. And then after a while, I also started."

Most of the addicts spend \$3 to \$4 a day on opium in a part of the world where people earn on average \$2. They sell their land and go deeply into debt to maintain their habit.

"I used to be a rich man," says Dadar, a man who looks to be in his 70s and whose family of seven is addicted. "I had cattle. I had land. And then I started smoking. I sold the cattle. I sold my land. Now I have nothing."

He wears an old windbreaker encrusted with dirt. His wife pulls back her lips to show a mouth full of diseased teeth. Their grandchildren have knotted hair and ripped clothes stained with muck.

Because they've sold their cattle, they no longer eat meat. When they sold the last of their land, they also lost their wheat, potatoes and greens. Their diet now consists of tea and the occasional piece of bread given by a neighbor.

Village chief Sahib Dad says even those who are not addicted are forced to pay a price.

"When a person gets addicted, he has nothing to eat," says Dad. "That affects his neighbor because the neighbor is forced to give over a part of his food. For this reason, all of us are poorer."

After selling their land, some families resort to even more desperate measures. They take loans from the shopkeepers who sell them drugs. Then they sell their daughters, known as 'opium brides,' to settle the debt. They lease their sons.

"I know he is angry with me. But what can I do? I have nothing left to sell," says Jan Begum, who has sent her 14-year-old to do construction work for the drug dealers. "I tried to stop, but I can't. Whenever I do, the pain becomes unbearable."

The problem is compounded by Afghanistan's neighbors. Iran immediately to the west has the world's highest per capita heroin use. The heroin labs there, as well as in Pakistan to the east, use opium imported from Afghanistan. These countries are now exporting heroin addiction back to Afghanistan in the form of returning refugees.

Like opium, heroin in Afghanistan is biting off whole families. Gul Pari, 13, watched her mother get high on heroin when she and her brother were in elementary school. Now she lies in a bed in a drug treatment center for women in Kabul. Her 15-year-old brother Zaihar is across town in a rehab facility for men.

Their bodies are like brittle sticks. The 13-year-old tries to push herself up on one elbow, but her thin arm cannot hold her up, so she falls back onto the pillow. Her emaciated brother leans against a wall to steady himself.

What will happen when they go home is unknown. They live with their mother - a recovering heroin addict - under a tarp in the yard of an abandoned house.

Mohammad Asef, a health worker at the clinic taking care of Zaihar Pari, says he is worried about the boy's chances of recovering. "In America people go and get high in the park. In Afghanistan, they do it in the home," says Asef. "They bring it inside. They burn it on the family stove. Everyone sees. So everyone is affected."

In Sarab, villagers who are not addicted keep their distance from those who are. They don't invite them into their homes. They discourage them from coming to village meetings. It's as if they are trying to quarantine themselves.

Beg says that for him all hope is lost. Even after he is buried, it'll take 70 years for the opium to ooze out of his bones. His hope, he says, are his grandkids – the only people in the family who are not yet addicts.

As Beg is getting high on a recent morning, the 1-year-old crawls over and starts playing with the opium pipe. He picks it up and shakes it, as if it were a rattle. Then, imitating his grandfather, he raises the pipe to his mouth.