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Guatemala's Compulsory Rehabilitation Centers

In 2004, an estimated 10 percent of the cocaine produced for the United States passed through Guatemala.¹ In 2011, in the shadows of Plan Mexico, a US-led \$1.6 billion security initiative, more than 80 percent of the cocaine produced for the United States moved through Guatemala.² This is a new development with unanticipated effects. One effect is a spike in the use of crack cocaine in Guatemala City. Drug-trafficking countries often become drug-consuming countries. Another effect is the proliferation of compulsory rehabilitation centers. Oftentimes run by Pentecostal or Charismatic Christian churches, these are informal, unregulated, and typically for-profit centers that warehouse users (against their will) in the name of rehabilitation, for the sake of security. "If these guys were on the streets," reasoned one police chief, "they'd drug themselves. They'd rob. They would kill." It is a clean, contagious logic with at least one clear consequence: today more Guatemalans find themselves tied up in Pentecostal rehabilitation centers than locked up in maximum security prisons.³

Pentecostal rehabilitation centers provide a practical solution to a concrete problem. Drug use is up. State resources are down. And Pentecostalism is the discourse of change in Guatemala. Yet, the Pentecostal rehabilitation center is not a new institution. In the early 1980s, these centers addressed problems of alcoholism, homosexuality, and delinquency. Many were compulsory, but there were few in Guatemala City. Today there are as many as two hundred. Their rapid expansion has kept pace with Guatemala's exposure to and use of crack cocaine and cocaine paste. The net effect is that these centers help constitute Guatemala's carceral landscape with a network of quasi-clandestine, semi-fortified structures. Abandoned homes, repurposed factories, and unused church space are but some of the structures used in the name of rehabilitation. They are not hygienic. They are often windowless. Most smell of urine and feces, of mildew and rotting vegetables. Fleas and bed bugs are common. Most also invert private security's infrastructure—its steel bars, razor wire, and reinforced concrete—to keep users inside. "At least this place is safe," I observed to one user. Inside a rehabilitation center, facing a security wall topped with shards of broken glass. He corrected me: "That doesn't keep people out," he said. "It keeps us in."

In Guatemala City, there is tacit consensus regarding the usefulness of these centers. For families, they provide a place for relatives to work towards sobriety. For the state, these centers provide a cost-effective network for the detention of at-risk men and women. For churches, they provide an opportunity to fulfill their mission as Christians, to save souls—but also provide them and independent pastors with revenue. Rehabilitation centers tend to be located inside already abandoned or unused spaces, with either no or low rent. While families make monthly “offerings” to the pastor, the men and women inside these centers maintain the property at no cost. They cook. They clean. They also provide managerial oversight, with the most experienced users placed in positions of leadership. There is very little staff, and pastors are rarely onsite. Forced fasts mix with very basic meals to keep overhead exceedingly low. Even a very modest rehabilitation center of ten men can generate as much as \$100 USD per month for a pastor. This is a desirable amount of revenue.

Profit motivates pastors to keep their centers at capacity. Most centers, for example, field hunting parties (*grupos de cazadores*). This is what the industry calls the four or five men tasked to collect users from the streets. More often than not these men are themselves in rehab, also under lock and key, but they are bigger, stronger, and sometimes smarter than the average user. Hunting (*cazar*) is also a privilege, and the rewards are immediate: status, adventure, and a bit of sunlight. These hunting parties pick up those too high or too drunk to resist while at the same time keeping an eye out for men and women recently deported from the United States. The deported are presumed to have family members in the United States who can pay above market price for rehabilitation. One 32-year-old man remembers,

They snatched me up. Because what this [pastor] does is he comes out at night, around ten, eleven at night-time, and what he does is he comes with a pickup truck. There some other guys from the rehab that work for him. They have probably been there [in the rehab] for maybe a year or ten months. And they have become workers, like trustees. So they go out hunting for people who are really high or running the streets. And then they just get out of the car [when they see someone]. The guy always tries to [run]. He starts yelling, “I don’t want to go there.” But then they hit him. The guys, the same guys that are in the rehab, hit these guys and put them in the truck. They then take them to the rehab.

Other times women will contact pastors about a troubled son, brother, husband, or father. A 22-year-old man, for example, describes his growing use of cocaine. “It began to destroy me. And that’s when I started stealing, when I started selling stuff to smoke. I started robbing. With a gun. We’d wait, with a gun, for cars to pass and then pull them over for money. But mostly, I’d find stuff to sell. I’d sell anything I could.” The last thing this man sold, before his mother called the pastor, was the door off her hinges. His mother felt she had no other choice. “He just started to get really abusive,” she explained, “hitting me and saying that he was going to kill me. I tried to lock him up myself, in the back room, but he got out.” So she called the pastor. “I’d do it again,” she said. A significant percentage of men inside of these rehabilitation centers have been put there by their families.

Note: The vast majority of those inside these structures are men. There are only two women-only centers in Guatemala City. They are voluntary and decidedly middle-class.

Often the *Policía Nacional Civil* (PNC) will bring users to the front door of Pentecostal rehabilitation centers, where they are locked up without judicial review or medical evaluation. Interviews with police officers deliver consistent quotes. They include, “[These centers] help us a lot because they keep inside, even though sometimes their method is not the greatest, even though the patients [*internos*] complain that they get hit and insulted and tied down. But many times it’s the family that brings them.” Another police officer states, “They help us because, if they’re not on the streets, the sale of drugs diminishes and the distributors go to other places because there’s a lack of demand. In the same way, assaults and aggravated assaults diminish.” One more adds, “They help with policing. They do. The family pays to put them there at the end of the day, and they know the risks.”

In a few instances, people enter these rehabilitation centers on their own accord. Sometimes voluntary entrance is to avoid the law. Other times it is to avoid paying a debt. On occasion it is to demonstrate to a loved one that a person wants to change. While official statistics are not available, users report that most people who enter a center (whether wilfully or not) will eventually return to a center. Some enter dozens of centers, which can create a bit of an uncanny return—even for me as a researcher. Years will have passed between interviews, I will not recognize the face, when a user will hand me back a wrinkled business card, from an institution I have long left. It is common to stay in a center for three months, leaving for a week or maybe even a month, but then returning to a center once they can no longer manage their use.

These are abstinence-only, religiously oriented centers whose Pentecostal approach offers few tools for self-discovery and for self-mastery. There is very little reference to twelve steps. There are few group sessions. There is no occupational therapy. None of the users have caseworkers or even files. Progress is not measured. It is rarely mentioned. One is neither better nor worse, only “rehabilitated” or not. “A lot people say it’s a process,” mentioned one pastor, “but it’s not a process. Rehabilitation is a miracle.” Like a switch that flips on and off, with nothing in between, Pentecostal rehabilitation centers deliver to users a sense of being either in or out, here or there, enslaved or free. Moral manuals written by Pentecostals dot the rehabilitation center. Strewn about, they instruct the inflicted to empower themselves. They encourage users, in the words of one man, to become “their own therapist.” The titles tell all. One reads, *The Unlimited Power Inside of Me*. Another speaks of *Autoliberación Interior*, or “interior, self-liberation.” A third promises to *Turn Your Heart in 40 Days*.

Leaving the rehabilitation center is at the discretion of the pastor. He determines whether a user is ready for life outside the rehabilitation center. One user comments on this dynamic,

My family brought me here. And, from what I know, the pastor has to tell my family that I’m ready to go. I don’t know, like, they will find a reason [now whispering] to keep me here, and, every time I think I am ready, they change the game. It’s like a brainwash. They try to brainwash you. It’s like... And a lot of them in here are so drugged up that... that they really believe what they tell them. It’s so fucking dumb. You know? And these guys don’t come down from that cloud. It’s fucked up. It’s fucking crazy.

Sedatives are common only in the most established centers. The young man above refers to Christianity as a drug. Inside these centers there is a consistent message of salvation that does not criminalize or medicalize drug use but rather “Pentecostalizes” it. Daily sermons are one of the most consistent “treatments” offered at these centers. A very common sermon addresses the theme of drug use as a sin. One pastor preached to a group of 50 users:

The Apostle Paul describes a great battle raging inside each of us. Did you know that? But this isn't a battle that beats your body or that marks your flesh. It is a battle over what your body wants. What does your body want? Does your body want drugs? Does it want crack? Because we can see that Satan is in our hearts. And so we know where bad thoughts come from, where all fights, wars, murders, drugs, adultery come from. It [or sin] all comes from the heart. The problem is *here*. [He points to his chest]. It's here in the heart. It is inside of me. It's inside each of us.

Once inside the center, many experience psychological, physical, and/or sexual abuse. Psychological abuse is common. A 30-year-old man, following a nine-month stay at one of Guatemala's more notorious Pentecostal rehabilitation centers, remarks,

When I first got there it was insane. Because the guys that used to run the house used to come drunk and high, around six o'clock. It was a nightmare. You couldn't even look at them. The [head] guy used to come with a dog, with a pit bull. He had a machete in his hand and he would say, “Who's the new guy? Get out of the room. Let me see you! I heard you talk to dogs. Come talk to my dog!” And the dog would start barking in your face. It was insane.

Psychological abuse often blurs into physical abuse. Another extended quote from a young man:

The head guy [*el encargado*] would put shoes on, tell us to lie down, and then run on top of us. Back and forth. Back and forth. After he would beat us, he would make us sleep on the stairs, in boxers. We would sleep there. He called it discipline. We would sleep on the stairs like this [folds up into a ball]. We could only use one stair. No blanket. No nothing. Damn. He'd keep us there for days.

One center has a long list of rules visible to the entire community. It is called “Rules of Procedure.” Many of the rules contribute little, if anything, towards rehabilitation. Each infraction carries a set of physical consequences. There are 35 rules. Ten of these rules include,

Rule 1. No respect for religion, worship, prayer, or the bible
3,500 squats, 1 non-stop guard duty shift, and bathroom duty for 8 days.

Rule 2. Attempted escape
3,000 squats every day for 8 days, 1 non-stop shift, bathroom duty for 8 days.

Rule 3. Bad words
100 squats per letter, including spaces.

Rule 4. Immoral jokes
3,000 squats and bathroom duty for 8 days.

Rule 6. Homosexuality
5,000 squats for 8 days, non-stop shifts for 3 days, and bathroom duty for 8 days.

Rule 7. Masturbation
2,500 squats.

Rule 9. Fighting
Solitary confinement, eat from the same plate [with the person whom you fought] for 8 days and do everything with [the person whom you fought].

Rule 13. Humming
2,000 squats.

Rule 16. Saying “I can’t,” “I don’t want to,” or “I don’t like it”
1,000 squats.

Rule 21. Mumbling about the authorities
2,000 squats.

It is common for men to be tied up if they go against house rules. If the center is large enough, they might be tied up in “the morgue” (*la morgue*), which is a small, fortified room or cage that can hold one adult male.

It is also common for there to be physical altercations to achieve or maintain dominance in the rehabilitation. Again, there is very little oversight. Pastors are rarely onsite. One user describes a fairly common situation.

There was a cop in the rehab. He was selling drugs in jail. He was selling crack in jail. He was messed up. He got addicted to that crap. You know that stuff? Anyway, he came in here [to the rehab]. His mom got him here. And then there is a guy called Cholo in here. He’s a young kid. From the streets. A hustler. Anyway, they got into it the other day and the Cholo kicked his ass. So Cholo got a good position. The police got a purple eye, and Cholo got a good position. It’s like a little world living here.

Sexual abuse is much more difficult to document, but would seem common, given that many of these institutions are majority male and under extreme conditions. The topic, however, is taboo. Beyond the observable fact that these centers are not safe spaces for homosexuals, that there is a very strong homophobic subtext to these rehabilitation centers, the only evidence of sexual abuse I have found is at one center, where I came across a conspicuous stash of sedatives and lubricants.

There is also very little government oversight. There is one government worker held responsible for visiting these centers and accrediting them. His list is strikingly incomplete. Once, when pressed on just how incomplete his list is, he responded that many of the centers are in dangerous neighborhoods that he does not want to visit for fear of his own safety. This is why he keeps them off his list. If they are not on the list, he reasoned, they do not exist.

There have been efforts to provide these centers with training. The United States Department of State, for example, provided training programs to rehab directors. These were organized by the Bureau for International Narcotics and Law Enforcement on March 14-18, 2011 and April 11-15, 2011. Many of the directors rolled their eyes when describing the training offered. The skills taught at these workshops did not connect with the realities of their work, many insisted. The workshops provided these directors with certificates of completion for these events, many of which now hang framed in directors’ offices. Written in English, they serve as indecipherable proof texts to families unsure if they should commit their loved ones to a rehabilitation center.

¹ Mary Jordan, "Pit Stop on the Cocaine Highway: Guatemala Becomes Favored Link for US-Bound Drugs," *The Washington Post*, October 6, 2004, A20.

² Randal C. Archibold and Damien Cave, "Drug Wars Push Deeper into Central America," *The New York Times*, March 23, 2011, A1.

³ Guatemala's prison population is less than 6,000 inmates. This number does not include pre-trial detainees or remand prisoners. My own fieldwork suggests that there are as many as 200 Pentecostal rehabilitation centers in Guatemala City. Some hold as many as 150 people, some as few as 10. A conservative average is 30 people per center. This puts the number of people inside Pentecostal rehabilitation centers at well over 6,000. For the prison population, see Guatemala Prison Brief, International Centre for Prison Studies, http://www.prisonstudies.org/info/worldbrief/wpb_country.php?country=81.