“Money Talks”
A Study on the Interaction between Drug Actors and Non-Drug Actors within the Community in Bures, Jakarta, Indonesia

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Acknowledgement

It had never crossed in my mind to study abroad. It was like a dream come true. It was an exciting experience and at the same time, it really turned my life upside down. The intensity of the program, assignments, and the new environment gave new color in my journey. At the end, I had to face working on the thesis in the topic that I am really interested in, drug use.

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“Everyone has their own addiction, yet it depends whether or not you could control it”

Amsterdam, August 12, 2010
Summary

This thesis is a compilation of stories from marginalized people in the *putaw* (local name for low quality heroin) scene in Bures, Jakarta, Indonesia. It gives reaction to traditional social research in Indonesia that only focus on drug users. To oppose the main paradigm in self-center study, this study shows the closed interaction occurred between drug actors and non-drug actors within the community. Within the complex web of actors, interaction occurred under the basis of respect and trust, but also on intimidation and terror in the corridor of economic interest.

This study also reveals that the interactions were not merely limited to the actors in Bures. Regarding the result of this study, there were two types of structural factors, the first of which are structural factors that have a direct relation with the drug world, in this case Indonesia’s drug management, and second are those that have indirect relation but gives significant impact to the *putaw* scene in Bures. Discrimination, marginalization, and criminalization emerged and became the foundation of interactions between mainstream society, the Indonesian government (drug management agencies) and drug actors.

On the other hand, this study has disclosed the role of indirect structural factors that silently coerce people to use or deal drugs, locking them up in a marginalized part of society. This study found that the inequality of broader development processes that create polarization between city-village and rich-poor, the weak system and its corrupt supporters, and exacerbated by the economic crisis of 1997, have forced people to find an alternate way to survive: the emerging underground drug economy. Unfortunately, many of the people in this study chose this route.

This study utilized ethnography as the method and to collect all the stories, I used observations, informal conversations, and in-depth interviews as the primary tools, as well as secondary data from the internet and libraries. The fieldwork itself was held for six weeks from May 18-June 26, 2010.
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Chapter 1.
Contextualizing Drug Use in Contemporary Indonesia

When I was accepted to the University of Amsterdam to pursue a Masters in anthropology, I aimed to conduct research on illicit drug use in Jakarta, Indonesia for my thesis. To achieve this goal, I started collecting data on drug use more generally and wrote all assignments in the substance abuse area. By the end of the course, I sharpened my analysis and extended my perspective to the illicit drug use phenomenon in Indonesia by utilizing key theories and concepts in medical anthropology.

My interest in the drug abuse issue stems from field research conducted in 2005 on harm reduction approaches in the implementation of program to impede HIV/AIDS transmission among Intravenous Drug Users (IDUs). Most likely, being surrounded by drug users stimulated me to study this issue further. The sorrow and bereavement that afflicted several friends dependent on drugs began to affect me, dragging me deeper in the drug world. Therefore, I fully agree to one of the landlord’s opinion in Bures, “If I scrutinize the social problems that have the greatest adverse effect to the society, corruption is in the first rank because the corruptor steals from community. The second effect is drugs because it ruins millions of life, especially the youth!” Nevertheless, this study aims not to simply elicit a day in the life of a drug user, but also to delineate and depict the larger landscape of the drug world in Bures, Indonesia, where this research is based.

This chapter is divided in three parts, the first of which is a general overview of drug abuse in Indonesia and efforts to confront it. The second is a brief description of Bures’ demographic situation, and finally the chapter will discuss the structural factors that have created “a big invisible wall” in Bures, causing society to act in particular ways.

1.1. A Journey of Illicit Drug Use in Indonesia

Illicit drug use has been acknowledged as a serious problem that can devastate an individual’s health. The adverse effect of drug use depends on the type of drug being used. Based on a United Nations (UN) classification, drugs fall into three categories: depressants [e.g. heroin, barbiturates], stimulants [e.g. cocaine, crack, amphetamines], and hallucinogens [marijuana, ecstasy, LSD] (UN n.d.). The UN defines the effect of drugs based on those three categories:

“Depressants are sedatives which act on the nervous system. Artificial relaxation and relief
from anxiety and mental stress tend to produce psychological dependence and withdrawal from heavy use is severe. Stimulants are agents that activate, enhance, or increase neural activity. … They can give rise to symptoms suggestive of intoxication. Hallucinogens are a chemically diverse group which produce mental changes such as euphoria, anxiety, sensory distortion, vivid hallucination, delusion, paranoia, and depression (UN n.d.)."

In short, the UN (n.d.) concludes that “there is no illicit drug that can be considered safe. In one way or another, the use of psychoactive substances alters the normal function of the human body, and in the long term, can cause serious damage.

In general, illicit drug use has been increasing in several parts of the world, including Indonesia. While Indonesia was previously only a transit area for the international drug cartel, given the country's growing population, it has been transformed into net marketing area (Pos 2010). In 2004, the estimated number of drug users had already reached 3.2 million people, or 1.5% from the total population of Indonesia, and has since gradually increased to 1.99% in 2008 (Priliawito and Ahniar 2010). Of that estimation, 1.1 million were students (Rachmat 2010); students made up 70% of all drug users in 2008 (Yunanto 2009). In 2003, an Indonesian psychiatrist, Prof. Dr. Dadang Hawari claimed that the total number of drug users was ten times higher than the normative estimation (Harapan 2003).

Drug use has risen dramatically increased over the past several years. This has certainly social and economic costs in Indonesia more generally. Badan Narkotika Nasional/BNN (National Narcotics Board) and Pusat Penelitian Kesehatan Universitas Indonesia/PPK UI (University of Indonesia Health Research Center) conducted a study to calculate social and economic costs of illicit drug use in Indonesia in 2004, and the results were impressive. In 2004, social and economic costs of substance abuse totaled 23.6 trillion rupiah, or the equivalent of more than 2 billion euro [hereinafter, 1 EUR is equal to 11,664.00 IDR] (BNN and UI 2004). In 2008, this number increased to 32.5 trillion rupiah, and it is now predicted that losses will reach 57 trillion rupiah-- or almost 5 billion euro (Priliawito and Ahniar 2010).

Besides wasting money and other direct adverse effects on users' bodies (as mentioned above), for the first time, a lethal disease, HIV/AIDS, was identified as widespread within the gay male population in 1980s (Spiritia 2008). As this virus is found in bodily fluids (blood, sperm, vagina liquid, and breast milk), the spread of HIV among intravenous drug users (IDUs) has been recognized due to the increased pattern of drug use in the country. The spread of HIV through blood, especially among IDUs, has become the primary mode of transmission because drug users usually share their drug-use-paraphernalia without sterilizing them beforehand.

At the same time, Indonesia as in other parts of the world has had to deal with the
HIV/AIDS epidemic. After the first case was identified in 1987 in Bali, HIV/AIDS has spread aggressively among most at-risk populations in Indonesia (Spiritia 2008). As of June 2008, the number of AIDS cases recorded in Indonesia was 12,686 incidences, with an estimated 193,000 people infected with HIV. The primary modes of HIV/AIDS transmission based on the data from Indonesia Health Ministry in 2008 were as follows: 49.2% from drug injection, 42.9% from heterosexual contact and 3.8% from homosexual contact (AIDS 2008). Moreover, due to this risky behavior, in 2005 one out of two IDUs were identified as having contracted HIV/AIDS in Indonesia (Kesrepro 2007).

The internal logic that illicit drugs cause harm to users has become the basis for a war on drugs initiated by Government of Indonesia. The conventional approach utilized by most countries, including Indonesia, is supply and demand reduction. The government is responsible for controlling, monitoring and ensuring that illegal substances do not become available on the black market. To reinforce this function, the Indonesian government issued anti-drug legislation in 1976 (Narcotics Law No.8 and No.9/1976) (Indonesia 1976). Since then, there have been several adjustments to the law due to changes in the illicit drug use phenomenon, and the most recent law was launched in 2009. All of the drug related laws have the intention of eliminating either the consumption of drugs or substances themselves.

By utilizing anti-drug regulations, the Indonesian authority had the power to ensure the law would be obeyed in the Indonesian jurisdiction. In the period between 1997-2002, the number of legal violations relating to drug abuse increased dramatically by an average of 51.3% or 3,100 cases per year (Damayanti 2006). Furthermore, in 2001–2006, drug abuse cases significantly increased from 3,617 cases to 17,355 cases, with approximately 41 drug users dying per day (Metanews.com 2009). In cases where the individual was imprisoned, only 2% involved the drug dealer and the rest were drug users (Winarso n.d.).

The main paradigm of zero tolerance in Indonesia is viewed as ineffective in providing immediate response to HIV infections. It might succeed in pursuing its long-term goal of eliminating drug use in the community (the approach has helped to transform prisons into drug rehabilitation penitentiaries) but this strategy has not shown either to reduce the number of drug users or illicit drugs in the community. Meanwhile, HIV/AIDS has attacked the most at risk populations and given an indication that it has spread to low risk populations.

The “harm reduction approach” emerged during this HIV epidemic. This approach has sometimes has been viewed as “the third way” to bridge two distant poles between law and public health. However, more often it became the rival of the main paradigm. As a new approach to drug and HIV/AIDS management, harm reduction on the one side and zero tolerance on the other side have competed to achieve multi-level dominance in society. Andriansyah (2006) has pointed out the
contestation between these paradigms on both organizational and individual levels. Individual experience is the prominent factor that influences the contestation.

The basic principle that limits compatibility between each approach is that harm reduction tends to view drug users as victims. On the contrary, the zero tolerance approach attempts to eradicate illegal drug in the country, so individuals who were involved in drugs were seen as criminals despite what they did, either drug use or drug dealing or both (Winarso n.d.). Thus, harm reduction proposed and advocated that there should be differentiation between drug users and drug dealers.

Harm reduction supporters, generally humanitarian organization, have blurred this distinction between harm reduction and zero tolerance after an intensive advocacy campaign to key stakeholders (including government organizations). One example of the bridge between these approaches is the establishment of an independent organization, Komisi Penanggulangan AIDS National/KPAN (National AIDS Commission) in 1994, by the Indonesian Government. KPAN has an objective to both eradicate HIV transmission in Indonesia and utilize harm reduction as one of its strategy in doing so (thus integrating both approaches). Another example is that several Pusat Kesehatan Masyarakat/Puskesmas Kecamatan (District Community Health Centers) have been appointed to dispense new syringe and rollout substitute therapy programs. Initially, the government was totally refusing harm reduction approaches but gradually, within the governmental organizations, there has been a shift in the main paradigm of anti-drug management in Indonesia.

Accompanying this shift was a new mechanism with which to fund HIV programs in 2009-2010. Prior to 2010, local NGOs played a bigger part than government in the field of implementation. Family Health International/FHI, one of the biggest international NGOs that particularly in Indonesia focused on HIV-related issues, ceased its activities in giving aid support to its local partners in December 2009. Since then, Global Fund for AIDS, Tuberculosis, and Malaria/GF ATM, has become the biggest HIV aid agencies. Global Fund ATM discontinued the old mechanism used by FHI, and instead of continuing to work with FHI's local NGO partners, began distributing aid directly to the government, which included KPAN, the Ministry of Health, and Perkumpulan Keluarga Berencana Indonesia/PKBI (Indonesian Family Planning Association), based on the results of sub principle recipient selection. As the consequence, most of the local NGOs who were funded by FHI slowly downsized or even halted their activities due to lack of money.

This change has definitely affected the process of HIV management in Indonesia. In a conversation with Nafsiah Mboi, KPAN Secretary General, the shift in focusing more on strengthening government capacity may have a positive value:
“It’s very strategic to spend more effort to build government’s capacity up because the actor who will be sustained in the community is government. We should not rely on the international agency. They could leave from here every time they wanted it to. Then, who will continue? It’s our responsibility. That’s why we have to start it from now. KPAN encourages and persuades the authority to make a post for HIV in their budget. We know that it’s not an overnight job. We need to work hard to realize it. It’s not easy to coordinate all of the actors involved in HIV in Indonesia. Local NGO mistrust government and vice versa, government views NGO only could criticize government without giving any solution. Government has change and opened the door widely for all actors to sit together. So, I think, it’s time for us to unite and hold each other hand together to fight against HIV/AIDS.” [Nafsiah Mboi, KPAN Secretary General]

Nafsiah Mboi could be optimistic in emphasizing the importance of self-reliance to overcome the problem. However, perceived mistrust of the government has created barriers to synergistic cooperation between the government and NGOs. On member of a local NGO staff mocked KPAN, quipping, “How come KPAN could say self reliance? KPAN cannot help itself. GF ATM is providing all of the money for KPAN, even GF ATM pays all KPAN’s staff salary.” Moreover, in 2005, Global Fund cut the aid for Indonesia because there was an indication of budget misuse (Spiritia 2009).

I will not further delve into the conflicts between the major actors in the governmental and NGO arenas, though what makes this interesting is that any small change in the bigger management structures has significant impacts on the lowest level in the community. The government take-over of local NGO processes has created new problems in the field that in the end could weaken the effort spent in fighting against HIV/AIDS. Based on my personal account during fieldwork, the availability of sterilized syringes, the reluctance to access health services in the governmental health service providers and some other issues (these will be explained in the third chapter) that became barriers to eradicate HIV/AIDS transmission and illicit drug use have emerged due to the change of aid mechanism.

1.2. Bures: Texas in Jakarta

Bures is located in the heart of Jakarta, Indonesia. It has been renowned as a putaw (a local name for low quality heroin) transaction place among the putaw users. I put the sub heading for this section, ‘Bures: Texas in Jakarta’ due to a quote from one informant, Sanweni:

“You can see yourself, Bures is not different to Texas in America. Junkies used drug openly
in front of people without being afraid. They *nyipe* (injecting *putaw*) while children played facing them. Even, almost every day the police come to this neighborhood but nothing changes. It’s like America. They are free to do anything in America as Bures does.” [Sanweni, *putaw* broker and user]

Images of United States, with its freedom to do anything, remained in Sanweni’s mind, ideas he got from the television. Hollywood movies that depict free sex and drug use shows may inevitably be internalized to the people who watch it. That was the reason of the comparison with Texas; another informant compared Bures to Las Vegas.

Perceptions of the totality of freedom in United States to some extent influenced parents of drug users in Bures that drug use behavior was derived from outside. It was not the real “value” of people in Bures. Due to that perception, they were sure that their family member would not be trapped in a cycle of drug use. Drug use behavior belongs to outsiders not their family, they often said. These beliefs helped parents cope and live with the drug scene in Bures for years even though several residents have passed away due to *putaw* use.

Bures became a *putaw* transaction area in 1995 – 1996 when *putaw* was booming in Jakarta. It became a drug place because, at that time, the police regularly raided Kampung Bali, a top drug transaction area prior to Bures. After a major raid, a powerful dealer from Kampung Bali offered Jago to sell *putaw* in Bures (the development of Bures as a *putaw* transaction area will be discussed in chapter three). Bures specializes in the sale of *putaw* - not the other drugs. Almost all drug users I have known personally recognized Bures as the place where they could easily obtain *putaw* and the police have marked this area as one of the drug-prone areas in Jakarta (Metro 2001). This area was not only known as a place for purchasing *putaw*; *putaw* users could also use *putaw* at Bures relatively safely. Non-drug users - including children - saw the phenomenon everyday because it happened in the public sphere (Kurniawan 2010).

The location of the drug scene in Bures has changed three times according to informant, Jago. In the beginning, transactions took place in the residential area. Later urbanization from Madura Island around 1995-1996 brought the drug scene to Bures. The Madura gang that has been dominating *putaw* transaction in Bures might be as part of 3.4 million people who migrated to Jakarta in 1995 (Emalisa 2003). The Madura people resided in an empty and isolated part of the city which was used as a landfill by local people in the neighborhood. This area later became a drug use and selling location (hereafter, I would call it Old Bures).

Old Bures sustained a *putaw* scene for almost for ten years. *Putaw* users could easily purchase and use *putaw* in Old Bures. The trash heap covered transactions and drug use from the public eye. In 2007, PT. Djarum, a cigarette company, bought Old Bures and built a fence
surrounding it. As the consequence, Madura people had to leave the area and inevitably, it was the end for the putaw scene in Old Bures. Afterwards, the Madura putaw dealers moved to the residential area of Bures and continued selling putaw near their own homes. This third area was an active drug zone at the time of fieldwork.

Non-drug users had different opinions about the new putaw scene in residential Bures. Most of the occupants I spoke with preferred Old Bures to be the drug area than their own neighborhoods. When it was in Old Bures, they felt safer and more secure because most of drug actors and their activities were localized in Old Bures. Their children were not forced to see people using or selling drugs every day. Flies were everywhere due to the remaining blood from putaw users and the garbage. Their neighborhood was becoming dirtier than before, and it justified more that Bures is a slum area.

Bures has a high density of both people and houses. Generally, the houses in Bures are small and there was little distance between one to another. To reach Bures, we had to walk through a small alley, like a maze, and it could only be passed through maximum by two motorcycles at the same time. Streets were generally was not in good condition because of water which flooded from the bad drainage system. I once saw a putaw user fall into a gutter during a heavy rain because he could not see the street due to the flood. The residents repaired the street by covering it poor quality wood planks because most of them were poor and had insufficient money to repair it with a good material. By seeing Bures up front, we could conclude that Bures had a relatively poor infrastructure.

The poor infrastructure goes in line with the social and economic status of the occupants in Bures. Even though I did not acquire demographic data of Bures’ community, based on the information I received from Ketua Rukun Warga/Pak RW (the low level authority leader in the community) the residents were dominated by ethnic Betawi (the native people), and other originating from Central Java and Madura. Most of them were poor and either unemployed or working in the low-level entry jobs with approximately or sometimes even lower than regional minimum wages (which, in DKI Jakarta in 2010, was IDR 1,118,009 [equivalent with Eur 95.9; hereinafter Eur 1 equal with Rp. 11,659.47]) (Winarno 2009). They labored generally as factory workers, scavengers, tukang ojek drivers (like taxi driver but with a motorcycle), entrepreneurs (small merchant/street merchant, barbershop in their house), etc. In particular, putaw users generally earned money from illegal activities, such as thievery, being sex workers, robbers, putaw brokers, renting out syringes or lapak (a place to sell anything, but in this case for using putaw), or in informal sector - similar to the rest of community.

In light of the many IDUs in Bures, there were several NGOs targeted the community as an outreach area. During fieldwork, only Kios Informasi Kesehatan UNIKA Atma Jaya/Kios Atma
Jaya, did outreach in Bures. One of my key informants who works for another NGO told me that Bures used to be one of his outreach areas with target gay and transgender IDUs.

Kios Atma Jaya has included Bures in its target areas since 2006. The main activities were in line with the harm reduction approach, such as distributing new syringes, IEC (information, education and communication) material, condoms, alcohol swabs, delivering support groups, HIV VCT (voluntarily counseling test), HIV/AIDS & drug socialization, etc. During fieldwork, the focus of Kios’ outreach worker, Subur, based on the work agreement between Kios and HIV Cooperation Programme for Indonesia/HCPI, was to help IDUs access health services. However, Subur was known widely as *tukang intek* (syringe dispenser) in Bures.

This situation the actors played in has become the setting of drug economy in Bures. It contextualized and gave general information about the emergence of drug use, the adverse effects, and effort to overcome with.
“You have a wonderful job. You don’t have to do anything. Every day you only hang out and chat. I’d like to work like you also. Actually, what do you do here?” (Olga)

It was very natural when Olga, a young girl who did not use putaw, asked about my activities during fieldwork. Every time I went to Bures, it seemed that I only had conversations and observed. I came to Bures with Subur, a Kios Informasi Kesehatan Unika Atma Jaya’s field worker who was responsible for outreach activities in Bures. My work in contrast was totally different. He distributed new syringes, condoms, alcohol swabs; he shared information related to HIV/AIDS and offered to accompany IDUs to health services. When Olga saw that I was not doing the same thing as Subur, she was automatically confused and envied my job; most of the people in Bures on the other hand know me as Kios worker.

This chapter will address Olga’s question on what and how I did my fieldwork in Bures. This chapter explains my justification to do research on drug abuse and examines existing literature on the topic within the Indonesian context and elsewhere. It will also outline the focus of my research, the methods used, and the conceptual approach employed to analyze data. All of these factors formed the foundation upon which to better understand the putaw use phenomenon in Bures.

2.1. Critiquing the self center study

Regarding the adverse effects of drug use, several attempts to solve the underlying problem have emerged in the hard and soft sciences. Hard science such as Biology, Medical Science, etc., has tried to examine the chemical nature of drugs and their effects on the individual body. While several breakthroughs have occurred in this regard, this thesis examines social dimensions of drug use.

In Indonesia, drug-related studies have taken several standpoints as their focus. The most utilized emphasizes focusing on drug users’ social and behavioral characteristics, the supporting – non-supporting factors why people use drugs, and the relationships between social norms and values within the group of drug users. There were many studies with the aim of identifying the
characteristics of drug users in different settings. For instance, a study conducted by BNN\(^1\) showed the characteristics of drug users while in jail and in the community (BNN 2003; BNN and BPS 2003). BNN investigated personal features of drug users in ten penitentiaries in nine provinces in Indonesia. In another study, BNN (2003) focused on the prevalence of students who had or still have experience using drugs in 26 provinces in Indonesia.

The characteristics of drugs users described in those studies shared a similar pattern. Most of the drug users who became respondents in the survey were of a productive age, which is more than 25 years old (BNN and BPS 2003) and in the prison, one third were between 19 – 24 years old, with 57.2% between 25-39 years old (BNN 2003). The respondents confessed that the first time they tried using drugs was when they were between 15-24 years old (BNN and BPS 2003); marijuana was the most popular drug being used by the respondents. BNN (2003) showed that 74.9% respondents used marijuana and 61.3% respondents in prison admitted that marijuana was their first drug. Other findings from both studies showed that the push factors for people to use illicit drugs include: inharmonious family life, peer pressure and 'self-experience' - which is described as an act against the law such as fighting, drinking alcohol or gambling.

Factors that make people use drugs were also investigated specifically by YCAB (n.d.) and Kironosasi & Pudjianto (2004). Kironosasi & Pudjianto (2004) focused on the role of the family, particularly parents in contributing to youth’s drug use behavior. They viewed family as a basic and primary institution in the role of internalizing norms and values in children. If this function cannot be fulfilled by the family, the probability for children to conduct mischief is higher. In another study, YCAB (n.d.) revealed that not only family factors contribute to people using drugs, but also peers and self-experience played a significant role. YCAB reported (n.d.) that if an individual has peers who smoke, drink alcohol, use drugs, exercise less, never think about school, and spend 4-5 days per week hanging out with their friends, this individual tends to use drugs. Self-experience is defined as a risk factor for people to use drugs if an individual spends most of his/her time with friends, has experience with violence, is prone to anxiety, smokes every day, and drinks alcohol (YCAB n.d.).

Besides those studies mentioned above, which focus on the characteristics of drug users and the risk factors influencing people's decisions to start using drugs, other studies tried to reveal the relation between drug use and HIV/AIDS. Irwanto et al. (2010) analyzed the behavior of drugs

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\(^1\) BNN is a governmental institution with significant legitimate power in the drug scene. I selected the research that they have conducted, from preventive measures such as mass campaigns to coercive measures such as imprisonment. I presume those findings from BNN’s research induce, in a particular way, BNN’s perception on and its action to illicit drug use. Consequently, any change in BNN has influence on the discourse of drugs use in Indonesia.
users seeking healthcare in Bekasi, Indonesia. The study showed that drug users have their own rationality in their efforts to address their health problems (Irwanto, et al. 2010; Irwanto and Moeliono 2006). Their rationalization considers their perceptions of health and illness, the availability of support activities (support groups, voluntarily counseling testing, case management, etc.), illness related information, the state of the drug users’ psychology, the quality of and acceptance from health care staff to drug users (Irwanto et al. 2010).

These factors, based on Irwanto et al. (2010) and Irwanto & Moeliono (2006) studies, influence drug users decisions on whether or not they need to take any action about the condition of their health. In general, these studies emphasized that health care seeking behavior among drug users follows a certain logical pattern: individuals sought treatment for their health problems if they thought their actions could benefit them, and vice versa (the individual would not make an effort to seek health care if they thought it would not result in a positive impact).

In another study, Tambunan et al (2010) found that most of the respondents had experience injecting drugs outside their hometown. The respondents also had sexual contact with their regular partner, casual partner, or commercial sex worker in their hometown and outside their hometown. Many reported having been infected by sexual transmitted diseases. This supports another finding that only 19-40% IDUs used condoms consistently (Tambunan et al 2010).

In 2009, Stigma Foundation carried out research on emerging constraints for female IDUs in accessing harm reduction services, which comprise of activities in HIV prevention, care, support, and treatment for people living with HIV/AIDS. Stigma Foundation (2009) argued that the harm reduction services available in Jakarta have no gender sensitivity in their approach; for example female IDUs who access methadone treatment are always asked by the health worker about their husband but not on the other way around (male IDUs are never asked about their marital status). Furthermore, Stigma Foundation (2009) showed that the harm reduction approach does not consider the challenges that female IDUs have to deal with, and because of that, the approach has created barriers to female IDUs seeking to access services to provide relief from their health problems.

As mentioned above, considering the adverse effects of drug use, there has been much social research conducted on better understanding the nature of drug use and the effects of illicit drugs on the individual. These studies attempt to answer the following questions: what are the characteristics of drug users? What factors influence people to use drugs? what are the characteristics of a drug users’ network? What barriers do drug users face in accessing health services? and so on. By answering these questions, we may expect to uncover some valuable information which may make a contribution to efforts at finding solutions to the illicit drug use problem in Indonesia, and the adverse effects of drug use such as HIV/AIDS.

However, a limitation to these studies is that they seem to focus only on the individual.
There remain many questions that need to be answered such as; why do ex-drug users who have already quit for years start using drugs again after they meet up with their peers? Why are the youth more vulnerable to using drugs than other age groups? Why, in particular areas, is the existence of illicit drugs more devastating than in other areas? and why are female drug users more vulnerable to stigmatization and discrimination than male drug users?

There are two implications for individual-centered studies. The first is that, in focusing on the individual, they fail to make the connection between drug users and the rest of the community. On this point, drug users should be viewed as member of the society as well. They may interact either with other drug users or non-drug users in the community. Therefore, to prevent my study from becoming “psychologically reductionist” (Bourgois 2003: 16) or upholding the “myth of marginality” (Waterston 1997: X), I will not view drug users as “a closed community” but will focus on the interactions between drug users, drug dealers and the community.

Another limitation of individual-centered studies is that they fail to recognize how social and cultural factors on the one hand and biological and individual factors on the other intermingle in drug users' problems. As Singer mentions, “chemical dependence is a complex issue that is best understood in terms of cultural factors, social structures and not solely within the narrow realm of individual genetic or psychological propensity” (Singer 2005: 2). Therefore, the interaction between structural factors and the community within the drug scene will be the focus of my study.

The focus on interactions between the social environment and individual actors in the illicit drug scene in Indonesia has rarely been analyzed. Nasir and Rosenthal mention that “… most of these studies (the intersection between socioeconomic marginalization, masculinity, drug use and HIV-risk behaviors) were of urban slum areas in the developed world … and none have done so in Indonesia” (Nasir and Rosenthal 2009: 195). Therefore, by focusing my research project on the interaction between structural factors and the community, I expect that the results of my research can contribute to the development of a more critical medical anthropological approach in Indonesia and give a comprehensive understanding of the relationship. As Eric Wolf writes, “you could add up all the reasons that individual soldiers go off to fight in wars and it would never explain war itself” (in Singer 2005: 1-2).

2.2. Operationalization of Conceptual Approach
As mentioned earlier, to prevent my research from becoming a kind of individual-centered study, drug users and drug dealers will not be treated as “a closed community.” This study will examine them as they interact with the rest of the community and the structural factors that shape these interactions. It will also utilize concepts of inner-city street culture and the dynamic of drug use.

Bourgois (2003) in his New York City study utilized the concept of inner-city street culture
to analyze the complexity of the illicit drug scene in the community. He defines inner-city street culture as “a complex and conflictual web of beliefs, symbols, modes of interaction, values, and ideologies that have emerged in opposition to exclusion from mainstream society” (Bourgois 2003: 8). A focal point in this study was to look at how street culture differs from dominant ideology in society or, as Bourgois puts it: “[s]tructure culture offers an alternative forum from mainstream society” (Bourgois 2003: 8).

However, even though street culture is viewed as an opposition to the dominant ideology, this does not imply that the difference between those ideologies are clearly drawn; rather, they are often more subtle and intermingle. Bourgois suggests that the “street culture of resistance is not a coherent, conscious universe of political opposition but, rather, a spontaneous set of rebellious practices that in the long term have emerged as an oppositional style” (Bourgois 2003: 8).

Moreover, he adds that even some oppositional styles have become “the pop culture” (Bourgois 2003: 8). To some extent, it is difficult to draw a strict line between the dominant ideology of mainstream society and of street culture. The concept of inner-city street culture is not derived either from essentialism or interpretive anthropology which examines culture as a totality that remains fixed and static. Rather, Bourgois argues that “through cultural practices of opposition, individuals shape the oppression that larger forces impose upon them” (Bourgois 2003: 17). Therefore, inner-city street culture is supposed to be viewed as fluid and dynamic, wherein individuals have free agency to carve out their power.

Even though inner-city street culture has emerged as “a rejection of racism and subjugation” (Bourgois 2003: 9) from the marginalized community, individuals are not entirely free in their actions. The way they think and act is shaped by larger forces such as structural factors. Paul Farmer (2004) thoroughly analyzed historical evidence to show how the social structure (colonialization, international infiltration, poverty, social inequality, and dictatorship) in Haiti caused suffering for the Haitian people. These structural factors, that generate agony for the marginalized community, are labeled as structural violence. Farmer (2004: 307) defined structural violence in several dimensions; the first of which is structural violence characterized by poverty and social inequality; the second is violence wielded systematically; and the third showed that the purpose of structural violence is “to inform the study of the social machinery of oppression.” Furthermore, he explained that the adverse outcome of this systemic violence is “death, injury, illness, subjugation, stigmatization, and even psychological terror” (Farmer 2004: 308). In this study, this concept is used to view the structural factors in Indonesia, particularly corrupt system, inequality development, and economic crisis, have marginalized the drug actors.

Instead of talking about structural violence, Rhodes et al. defines these kind of structural factors as a risk environment which influences the spread of HIV/AIDS: it is “the space, whether
social or physical, in which a variety of factors exogenous to the individual interact to increase vulnerability to HIV” (Rhodes et al 2005: 1026). Furthermore, they define a HIV risk environment as “a product of interplay in which social and structural factors intermingle but where political economic factors may play a predominant role” (Rhodes et al. 2005: 1026). Other research from Nasir and Rosenthal (2009) utilizes the concept of HIV risk environment and tries to investigate the connection between the social environment and drug use in slum areas/lorong in Makassar, Indonesia. Subsequently, they argue that “risky drug use that potentially leads to HIV infection is not an isolated behavior and must be understood in the social context of the lorong” (Nasir & Rosenthal 2009: 193). This study utilizes inner-city street culture as a tool to analyze the interaction between drug users, drug dealers, and the community on the one hand and the structural factors, drug management, economic and social factors on the other hand.

As mentioned earlier, it is important to view culture as a process, acknowledging that nothing in the world remains static and steady forever. There is always change and, in this case of illicit drug use, everything in the production, distribution, and consumption of illicit drugs is dynamic. Singer (2005) explained thoroughly how structural factors induce change in illicit drug use practices. Singer (2005:14-15) made five clusters to categorize the dynamics of drug use: changes in the drug user population [i.e. drug use is not only dominated by men but more widespread in the community, e.g. cases where pregnant women consume illicit drugs, etc.]; changes in drug content or form [i.e. the degree of a drug’s purity, innovation of new drugs such as LSD in mid 1960s in US, etc.]; changes in drug paraphernalia [i.e. from tap water to bleach for cleansing the syringe]; changes in drug making, distribution, and interdiction [i.e. previously, Indonesia was only either a transit or target marketing area for international illicit drugs commerce, but nowadays many illicit drug factories have been raided in Indonesia by the police indicating that Indonesia has become a producer]; and finally, changes in the biological and social environments of drug use [i.e. the emergence of HIV/AIDS]. Subsequently, all of these changes can be observed through the daily monitoring of the ethnographer (Baer, et al. 2003; Singer 2005).

Another study from Carnwath and Smith (2002) illustrates the changes in the drug scene that have manifested themselves over time. First, they looked at the pattern of heroin manufacture and distribution (initially heroin was made by large pharmaceutical factories but this has subsequently shifted to manufacture in street pharmacies), second they examined the different ways heroin influences the way it is used (heroin prepared for smoking and heroin for injection), and third, they observed the pattern of drug use (from sniffing to injecting). Thus, in my study, I will examine the changes that have occurred in the drug use practices in Bures, particularly the impact of transitional period of drug management from one funding agency to another (e.g. from local NGOs to government agencies) in the field implementation.
2.3. Research Question and Sub Questions

The research question that I pose for the study is:
“How does the presence of drugs, particularly putaw (low quality heroin) shape the social life of Bures, Jakarta, Indonesia?”

Based on that research question this study will address several sub research questions:

- Who are the drug actors in Bures?
- How are the drug actors involved in the drug economy?
- How are drug transactions managed in Bures?
- How did Bures become the top drug transaction place?
- What have drug use practices changed in Bures?
- What are the interactions between drug dealers, drug users, and the community in Bures?
- What is the dialectical relationship between, on the one hand, drug users, dealers and the rest of community of Bures, and on the other hand, these sets of relations and the larger Indonesian socio-political structure?

2.4. Research Methodology

What Olga saw when I was in Bures doing fieldwork for six weeks (May 18 – June 26, 2010) might have given her the feeling of envy for my work. She saw me talking to anyone that was willing to have conversation, observing everything in Bures, and asking about people’s experiences. She might be able to do that kind of work. However, what she saw was only one aspect of the study.

This section explains how I went about answering the research question of this thesis. I utilized ethnography as the study design for several reasons. If comparing to another type of research, such as a quantitative study requiring surveys, ethnography might have lacked the time length and the coverage of the study. However, it might be difficult to collect data on an illegal activity if the interviewer comes off as a strange to respondents. Thus, a survey might collect superficial data. Similarly, Bourgois (2003:13) argued that “… (Ethnography) better suited than exclusively quantitative methodologies for documenting the lives of people who live on the margins of a society that is hostile to them.”

2.4.1 Gain Access

The main characteristic of ethnography, and what highlights the weakness of quantitative methods, is to be fully attached into the research community. In order to achieve the most ideal
situation, inevitably the first step in conducting field research is to gain access to the community. This initial step is very crucial to gain trust through building a good rapport with the informants and later to achieve “accurate data” by posing provocative questions and acquiring serious responses.

Having experience from being previously being involved with the institution, Kios Informasi Kesehatan Unika Atma Jaya (Kios), which focuses on HIV/AIDS prevention among IDUs, I had an advantage in obtaining drug use related information. My colleagues who work at Kios were willing “to open the gate,” particularly for gaining access through introducing me their colleague to either drug actors or non-drug actors at the research site.

At the onset of the fieldwork preparation, I intended to disclose my identity to the people as a student who is in the midst of attempting to earn his master degree by carrying out research in Bures. Yet, it did not work well. When Subur introduced me as a researcher to one of the drug actors, first person I knew in Bures seemed reluctant to speak with me. Every time I met him and asked him several times to have a conversation, he avoided me and seemed as if he was in rush and busy. At that time, I concluded that I have to modify the strategy I was using to approach prospective informants.

Subsequently, I change my clothes in order to look like an NGO worker, the only option left as my identity. There was no other alternative option as I was neither a resident nor a putaw user. Besides, when I declared myself as NGO worker, they recognized me as such since Subur was the one who took me around for the first few days of fieldwork. Yet, there were several people that asked me who I was and what I was doing back there. For these people, sometimes when I was tired, I just explained that I used to work at Kios, and then they did not ask me further questions. When I felt that the person who I spoke with was interested in what I was doing in Bures, I explained that I was monitoring and evaluating the drug practices in Bures in order to give input to the enhancement of outreach activities for Kios, and that the Kios staff told me to do so.

Gaining access and building rapport are important steps in ethnography as they facilitate data collection. In this study, identity played a significant role in gaining trust. Informants had to be assured that I would not threaten them due to their violations of law.

2.4.2. Data Collecting Method
This study is a compilation of stories from marginalized group in their effort to overcome their life problem, either their addiction to putaw or economic. Those stories were collected from putaw brokers, putaw users, syringe rental owner, ex-putaw dealer, youth female non-putaw users, male non-drug users, mothers, and landlord. To collect those stories, I used observations, informal conversations, and in-depth interviews as the primary tools, as well as secondary data from the internet and libraries.
Starting from the beginning of the field research, I observed the condition and situation of the community. Realizing that, at the beginning of the field research, the people recognized me as a stranger, it was impossible for me to initially ask personal questions to prospective informants. Thus, observation was a powerful tool for me in two ways; for me to get familiar with the setting of the area and for community to get use to my presence there. Moreover, through observation I experienced the drug transaction and the community’s daily life, particularly I gained a firsthand view of the interactions within the community.

As a characteristic of an ethnography study is the unpredictability of when a researcher might obtain data, I kept in mind that good data come arise in the most unlikely moments. Thus, the second data-collecting tool in this study was informal conversation with my informants. Through informal conversations, my informants were not aware that I was still observing them and collecting data. It was expected that the data I collected would be “honest and reliable” and that I would be able to pose provocative questions to them, particularly about their experience and reasons to be involved in the drug world.

While I tried to have formal conversations/interviews with the full equipment of an anthropologist, such as digital recorder and notebook, the result was not what was expected. The people that I interviewed seemed anxious and not comfortable. Therefore, informal conversations were powerful ways of getting information from my informants. Moreover, this informal conversation method was utilized as a complementary technique to observations when I tried to pursue my understanding of actions under my observation. Informal conversations were carried out in both Bures and Kios Atma Jaya.

The final tool I used in collecting data was in-depth interviews. This tool was used to collect data related to the past and occurrences that I could not gather myself from observation or informal conversations. Furthermore, through in-depth interviews, I collected information on the history of the presence of illicit drug use in Bures and how the community perceived the presence of drug use in their neighborhood.

In-depth interviews were held after the first week of field research. The reason why I held these so late was due to the sensitivity of the subject-matter, and the feeling that it would be unsurprising if informants refused to come or answered questions artificially if I had initiated the interviews earlier. Thus, I preferred to make them familiar first to my existence there. Therefore, the main principle here was the acceptance of the community.

I applied in-depth interviews to collect data from the key informants as well as to get information about the illicit drug use phenomenon in Indonesia and Bures. I interviewed Kios staff, Prof. Irwanto (academic who is well known in Indonesia as a drugs expert), Very Kamil (a drug researcher from AIDS Research Center University of Atma Jaya), Nafsiah Mboi (the Secretary
General of Indonesia National AIDS Comission), and the staff of Stigma Foundation. They have different perspectives of the drug use problem in Indonesia based on their background experiences.

From my perspective, there was no big difference between informal conversations and in-depth interviews. Both of them have similar characteristics in terms of obtaining data from informants' perspectives. The difference between the two is that in-depth interview is more structured than informal conversations. In an in-depth interview, the questions have been formulated before the interview occurs, while informal conversations are based on what was happening when the informal conversation took place.

2.4.3. Data Analysis

Data analysis within the field by using a systematic procedure; organizing, coding, sorting, categorizing, labeling, looking for patterns, interpretation, and presentation. At first I classified data into three classifications; the drug management, the interaction between drug actors and non-drug actors, and the relation between actors and structural factors.

The data collected from in-depth interviews and informal conversations with drug actors (wherein the history of how he/she became involved in the drug economy often came up) was used to analyze context (push/pull factors) that forced an individual into the drugs scene. Afterward, the data was analyzed in relation to theoretical considerations of social structures and free will and agency. On the other hand, to prevent upholding a reductionist paradigm on social research that views drug users as "closed community," as mentioned above, I also used in-depth interviews and informal conversations with the non-drug use actors, either those who have had direct relationships with drug users or not. Realizing the sensitivity of the illicit drug use issue, in-depth interviews or informal conversations were complemented by observations in order to triangulate data.

2.5. Ethical Considerations

Based on the existing studies held in Indonesia, there is no study focusing on drug transactions or drug dealers. Most of these studies examine drug users as the main unit of analysis. I assumed that this might be influenced by the notion of criminalization. Generally, the mainstream society viewed drug use related actors, either drug users or drug dealers, as criminals. Even though, based on the national law on narcotics, drug users are distinguished from drug dealers, in the practice, people see no differences between drug users and drug dealers (they are lumped into being “drug-related”). This is supported by law enforcement practices to send the drug-related actors to prison.

I am totally aware of this issue of criminalization. I do not want to be part of mainstream society in blaming my research community, nor defending the drug use related actors. I did not want
to spend my efforts to giving a name to my informants. I realize that the result of any study can backfire on the research community. Thus, in this study I took as neutral a position as possible. Nevertheless, I have no intention of covering up the tragedy I saw with my bare eyes, as Bourgois (2003: 12) states, “[o]ut of a righteous, or ‘politically sensitive’, fear of giving the poor a bad image, I refuse to ignore or minimize the social misery I witnessed, because that would make me complicitous with oppression.”

On the other hand, I was inevitably witness to illegal activities and even violent acts during my fieldwork. Based on the national law on narcotics (Indonesia 1998), it is obligatory to report anyone seen involved in illegal drug practices to the police. To be honest, I did not have any answer yet as to what I was going to do when I saw a legal violation, and this uncertainty continues even now. However, I decided not to turn my back on my informants.

I realized that I have to respect the rights of my informants. From the outset of my field research, I have asked their approval to study their lives. Ideally, it would be better to have a written informed consent. However, as even during the fieldwork it was difficult to have a drug-related conversation with the people, I felt they might be more terrified if I asked them to sign a piece of paper. Instead, verbal permission will be sufficient in this case.

As mentioned earlier, since my informants are involved in illegal activities, confidentiality remained a principle in this study. From the beginning of fieldwork, I emphasized to all my informants that I would disguise either their name or the area or both. The purpose of this was to make them feel secure and safe, and more importantly, to prevent the local authorities using the results of this study to trace and target informants. On the contrary, this did not eliminate that some informants wished for their identities to be taken into account in the study. Nevertheless, revealing their identity in the study might give clues as to the identities of other informants. Therefore, I considered their desire to be acknowledged in the study without sacrificing the anonymity of other informants.

All of these have become the lens in collecting, sorting, and analyzing the data presented in the later pages and built a bigger picture from dozens of evidence in the field.
Chapter 3.
The Maze of Drug management

Over the first several days in the field, I was very curious as to how the drug actors in Bures ran their business. The main paradigm, zero tolerance, which views drug abuse as enacted only by the user and the dealer, and to some extent the courier, could not illustrate well the complexity of drug world. Though I have read how the drug economy creates its own system in many places in the world, I found little existing literature on the Indonesian drug economy. In the following parts of this chapter, I will examine the drug economy in Bures and drug actors' attempts to maintain their businesses in order to be sustainable and safe.

3.1. The beginning

“Who doesn’t know bang [a respectful way of addressing someone] Jago here? Especially when he was selling putaw, if people saw him, even if he was still far away, they automatically shouted and called him to have at least a small chat” (Bongky, a community member)

A similar remark came from Sabam, one of Kios’ ex-staff, “Bang Jago could be categorized as the big and first dealer in Bures. If you wanna know how Bures became the drug transaction place, you should ask Bang Jago. He knows a lot because he was included as one of the first dealers in Bures.” It was a coincidence that I met Bang Jago for the first time while I went to Bures with Sabam. They know each other as ‘old players’. Sabam introduced me to him and asked him whether or not he was willing to help me in my research. He agreed. Then, I set up an appointment to have an interview with him.

“It was in 1995 or 1996,” he said. “It was unplanned. I met my boss coincidentally and he asked me whether I wanted to have some money or not. Then I asked him what kind of job I had to do to get money. He told me – selling putaw.” Bang Jago did not tell me the exact story of where and how his boss ended up offering him a job selling putaw. His explanation was, “it’s like hmmm, us. We met unexpectedly and I don’t know why he trusted me.” Anyhow, this offer tempted him a lot, especially since Bang Jago had a loan of IDR 1 million (Eur 85.73) to pay off after he lost in gambling.

As a comparison, the regional minimum wage in DKI Jakarta in 2000 was IDR 286,000
(Eur 25.51). Thus, IDR 1 million was almost five times that of the DKI Jakarta regional minimum wage in 2000. This burden was doubled when the economic crisis hit Indonesia. Bang Jago was fully aware with that condition:

“It was not a lot of money though. However, that amount of money was easy to spend but hard to get. Yeaaahhh, in the end, I could not resist accepting his proposal, because of the loan. Previously, I earned money from gambling. However, at that time, the police were fiercely catching gamblers. Meanwhile, they never arrested the big players because they were bribed. Then I began a new profession, a putaw dealer in Bures.”

Jumping into a risky business like drug selling requires more than the promise of high profit. They both realized this. His boss thus offered him a security guarantee as remuneration for Bang Jago. Bang Jago replicated his boss in persuading him: “considering this thing is a high risk business, particularly against the law, I would take care of you and your family if 'something is going bad' under one condition that you are prohibited from informing the police about the drug source.” At that time, Bang Jago was convinced of these “sweet dreams” and began his drug career.

He hit scores and paid back the loan completely in the first week of his career. His new career gave him a lot of money and he became more and more famous, indicated by the increasing numbers of his buyers. He said, “My buyer has to make a queue for buying my putaw.” Then, he started to think about his own safety, particularly related to his acts against the law. He encouraged other unemployed men in Bures to join, “If you want to get money, sell putaw!!”

Bang Jago did not explain his relation with ‘his staff’ clearly. “If they want to follow my path, they only need to provide IDR 350,000 (Eur 30) per gram. You have money, I give you putaw.” He refused to respond when I asked him about the recruitment of staff. He said that he did not have ‘formal staff’.

“I did not give them a salary, or bonuses. They just bought putaw from me and they sold it again to the user. That’s it. They called it beli putus (buy it and after that no extended business for that transaction) or in another term is ada uang ada barang (you have money, you get that stuff). They got profit from retailing it and had more profit because they mixed it with powder glucose.”

However, in another chat, he said to me that he had two staff members. This might have been related to his notion of what staff is. It was commonly perceived that staff has connotations with monthly salary, bonus, and formal contract. In the drug economy, they applied it the opposite way.
The boss did not give them salary nor a bonus nor a legal contract. They disguised the relation within them in order to deceive the police if one of them got caught. Generally, they only know one level above or below them. Beyond that line, they were barely acquainted each other. Probably only the police could map out their syndicate. It occurred with Bang Jago as well. He had no idea who the boss of his boss was. Besides the security reason was the economic reason. His boss would lose his profits if Bang Jago had access to his boss’ boss. Bang Jago must have bought putaw directly without his boss, as Bang Jago said “until now, I don’t know anything who the boss of my boss is. I only know him (his boss). Moreover, he would not introduce me to his boss because I’m sure he was afraid if I went and bought putaw directly to his boss; he would get nothing.”

Even though there was no cleared relation between boss and staff, there was another type of relation, besides beli putus. Bang Jago did not have to pay putaw directly, but he gave the money when the putaw was sold out. He also applied this kind of marketing to his staff. For the starting point, Bang Jago got two grams of putaw from his boss and he was doing the same thing when he started recruiting his staff. After several times, either Bang Jago or his staff had no problem in the payment; they could get putaw for more than the initial transaction.

These two types of transactions need one prominent factor - trust. This business would not be sustained if there were no trust between the actors. That was the reason why in the first encounter, Bang Jago used beli putus. He said that

“It’s difficult to ensure the staff is being honest with you if you give the putaw before hand and the payment later. They could cheat you. It happened to me once. The police raided one of my staff and my staff confessed to me that luckily, he threw away all of the putaw before the raid, so the police didn’t find any evidence. However, I was suspicious that he didn’t throw it away. I assumed that he tried not paying me, but I couldn’t do anything because I have no proof.” The basis of this business is trust. Without trust, you would not survive in this business.”

If we compare drug economy to the legitimate job, for me there are few differences. Both worlds have to guarantee both sides, the employee and employer, get their rights and do their obligations. The different thing is the form of it. In the legitimate job, a written agreement is needed, and in the drug economy, it needs trust.

As mentioned above, Bang Jago had two staff members. These two staff members might have indicated that the relation between them was falling into the second type of transaction. However, besides those staff, other local people there started drug careers through beli putus from Bang Jago. Bang Jago’s success stimulated them to follow his path. Having staff in this business
indicates that Bang Jago’s business was growing bigger and he was a success in it. He expressed it proudly and loudly to me, “at that time, I’ve had two staff members. The business was good. To be frank, it was me who transformed this neighborhood into a drug transaction area.”

3.2. Drug Transaction

“How much do you want to buy?” That sentence came up when a user arrived. The minimum that a drug user could buy was Rp. 30,000.00. It could not be smaller than that. Bang Sanweni said that,

“putaw in Bures is the cheapest than any other place in Jakarta. Generally the minimum price is Rp. 50,000.00, but in Bures can be lower, even if you know the dealer directly, you could buy it for only Rp. 25,000.00. That is why Bures is well known within putaw users. But you must remember that price is only for the putaw, not including the other things.”

Then I started to observe thoroughly how putaw users bought putaw in Bures. Are they buying putaw there and afterward leaving to use it in another place? Who are the actors in drug economy in Bures? Is it only the putaw users and dealers? How does the mechanism of drug transaction work in Bures? During the first week in my field research, I tried to answer those questions by hanging out in Bures and looking carefully at the drug transactions happening there.

However, many users seemed reluctant when I asked many things about the drug transactions. In the first week of my fieldwork in Bures, several drug actors came to me and asked me, “who are you? What are you doing here?” That question was pointed at me because I came to Bures everyday and did not use putaw. They were afraid that I was an undercover cop. In the following weeks, they got use to my existence there and ignored me. Therefore, I had nothing to do except watch them.

Based on my observations, most of the putaw users in Bures were aged between 20 to 45 years old. They looked skinny, dirty, and some of them had health problems, such as herpes, candidiasis (fungal infection), etc. I know that because they asked me how to overcome with their health problems. Their job was generally in the informal sector such as tukang ojek (motorcycle driver), scavenger, sex worker, street musician, thief, drug broker, syringe rental, etc. and most of them were old players. Most have used putaw and known Bures as a place for buying and using putaw for years.

When the putaw users come to Bures, almost the entire broker recognizes them. Usually no one comes into Bures without knowing someone, either the broker or small dealer in Bures. Otherwise, his or her friend must know someone there. Then, the user approaches the person that
they know. They give their money and wait for the *putaw*.

Knowing either the small dealer or the broker would have certain advantages and disadvantages. If their channel was directly through a broker, the broker would inform them about the dealer that has better quality of *putaw*. However, the disadvantage of this was that either they must share a small portion of *putaw* with the broker or the *putaw* would be cheated because the broker would not have bought the amount of money that the user gave. Bang Sanweni told me:

“It depends, if I was in sakaw (withdrawal syndrome) I usually asked the user to share a lil’ bit *putaw* that I helped them in buying, but if I was not in sakaw, I usually cut their money. Just like this (there was a user came and asking Bang Sanweni to buy it). He gave me IDR 75,000 (Eur 6.43), but I only bought IDR 45,000 (Eur 3.86).”

The *putaw* users that were old players know this strategy. They said, “It’s better to buy it directly from the dealer than the broker. They (brokers) usually fool you by taking your money.” In another case, if *putaw* users’ channels were directly through a small dealer, they would not be fooled about the quantity or money. However, these *putaw* users would not know which small dealer has a better quality of *putaw* than the others do.

3.3. Use it here!

“Where are you goin? Use it here. To bring it away from here is risky. Police might have waited for people that came out from this place.”

The brokers usually persuaded the user not to carry the drugs out of Bures because they know that the police might have kept on eye the *putaw* users who just visited Bures. It was not awkward and it was common in Bures. Gembul, one of Bures’ broker, told me that. He knows a lot about that condition because besides being a broker, he acted as the outlook tower for the dealer as well, or in the local term, *spion*. He became one of the dealer’s spies who are responsible for watching the neighborhood and giving reports to the small dealer if there were police approaching the neighborhood.

To be a *spion* did not mean that it had no risks, even though he did not carry *putaw*. Gembul told me:

“I’ve had an experience when suddenly a policeman was approaching here. He unexpectedly appeared without any news. He was not one of the police that come to this place regularly. It was me who noticed that he was a police officer. Then I - in a sudden movement - gave
signal by waving my hand to the small dealers to get the hell out of here. However, the police watched me when I did that. Then he held my hands and asked me, what are you doing? (Gembul imitated the police’s statement). I replied him, nothing. Then, the police grabbed my body and searched for putaw. Fortunately, there was no putaw, bro. If he found putaw on my body, I would not be here now. I’d be in jail and you would not meet me and talk with me now.”

For his service, he got free putaw from the small dealers. He proudly said to me, “I’ve never bought putaw, bro. I got it free.”

Then, I saw Gembul lead a putaw user to the place that could be used for shooting putaw. The putaw users usually shot up putaw at three regular places. The first two places were inside the house. First of which was a non-drug user’s house and the second one was a house that was rented by the dealer for putaw users to inject it. The third place was right in front of the warung (small store) besides the alley street. I saw with my bare eyes the places which were in front of the warung and the non drug user’s house, except the last one only from the outside as I did not have access to the dealer since I am a putaw user.

Those three places were not free. The putaw users had to pay between IDR 1,000 to IDR 2,000 (Eur 0.086 – 0.17) to the person in charge of that place. Each place has different characteristics. The first place was in the non-drug user’s house which was also as a barber shop. Pak De’, the person who rented that house, was quite selective as to which putaw users he wanted using putaw in his house. He did not permit all of the putaw users to enter his house.

Pak De’: I don’t let all the putaw users to use it in my house. I’m very picky. If they are not clean, healthy, and do not want to follow my words in my house, I won’t let them come inside my house. Because actually I don’t get anything from them and it’s risky for me also to allow them using putaw in my house. If there’s raid, the police would arrest me. The putaw users only gave a small amount of money to my children. Moreover, I don’t let them to stay in my house for a long time. After they finished using it, I order them to leave my house. I’m afraid if the police caught me.

Ricky: Do they listen to you?

Pak De’: Sure, they must listen to me, otherwise I would frighten them away. They won’t dare challenge my word because using putaw in my house is more convenient than other places (as he was talking to me, his hand was pointing out to the lapak and the small dealer’s place). In my place, it’s considered safer and cleaner. I always swap, mop, and clean my house with karbol (disinfectant) because I don’t like if my house gets dirty. Moreover,
because they use it either inside my house or in the veranda, I have to protect my house from disease, especially sometimes I found bloodstains on the floor. I have to be extra careful for my two little children. It’s safer because have you heard that usually police catch users in the dealer’s house? The police have known that place as a venue for putaw users to shoot up, but they haven’t known my place. That’s why I don’t want any users to sit in front of my house. If there’s something like that, like a raid, the police won’t be suspicious of my place.

The second place was in an open space called lapak. People who walk through that alley could easily see putaw users using putaw at lapak. As mentioned above, it was located right in front of the warung. The size of it was a half meter by one and a half meter. There were many flies because there were bloodstains on the floor from the IDUs who cleaned the syringe and there was a lot of garbage in the gutter.

The people who ran that lapak were not the owners of the warung. All of the lapak owners were putaw users and they acted as brokers as well. If there was a putaw user not shooting putaw at the lapak, they would order the user to use it at the lapak. At first, I presumed it was because of profit. Afterward I saw that the landlord who owns the houses in front of the lapak usually expelled the users who were shooting up on his land. “Go away! Don’t use it here! Otherwise you want me to spill hot water to you?” the landlord threatened. The landlord in front of the lapak is the relative of the landlord in the line of lapak. I asked the landlord who drive out the users, “What about the other landlord?” He told me that the other landlord was also furious when he saw the users at the lapak. However, because the other landlord did not live in their neighborhood, the users were free to use putaw there.

I was also curious why the warung owner lets the putaw users shoot putaw in front of the warung, especially after knowing that the warung owner gets no money from the lapak rental. I did not have the opportunity to ask the warung owner about that. However, it might be due to the economic reasons as Lebay, one of the people who run the lapak, told me,

“They (warung owners) don’t get money from the lapak, but they get profit from selling cigarettes, mineral water, snacks, especially cigarettes and water. Junkies always buy cigarettes and mineral water for cleaning the syringe from that warung. It is not appropriate for us to buy those things from another warung because we use this veranda to use putaw”.

In the one morning, I saw lapak owner cleaning garbage off the lapak and the gutter in front of the lapak. I was amazed at the time. In my mind, putaw users ignore their social environment and do not care about anything but putaw. However, the stigma in my head dissipated after I saw them
swap the floor and throw away the garbage.

Ricky: What are you doing, bro?
Lebay: I’m cleaning this shit. We feel inappreciable to the warung owner if her veranda is messed up. Moreover, she’s permitted us to use her place for using putaw, so it’s like we use her place and it’s our responsibility to take care of her veranda, particularly to ensure it’s clean enough. Thus, she won’t be angry and she’ll keep letting us use her place, especially since she didn’t get anything from us except selling cigarettes and mineral water.

3.4. Syringe rental and HIV/AIDS

While Lebay kept talking with me, I realized that he held a black plastic bag with him. I did not know what it was. Then, a putaw user came to him and said “Bay, spidol!” Lebay opened his bag and took a used syringe, then gave it away to the user.

Ricky: So, did you give it to him free, man?
Lebay: No way. There is nothing free in this world. They must pay me for the syringe rental. Sometimes they gave me IDR 1,000 (Eur 0.085); another time, they were more generous and gave me IDR 2,000 (Eur 0.17), or sometimes even IDR 3,000 (Eur 0.25). Sometimes, if they gave me only IDR 1,000 (Eur 0.0085) and I knew that they have had more money inside their pocket, I would ask for more.
Ricky: So besides renting the lapak, you also rent the syringe, huh?
Lebay: Yeah man. Relying only on the broker fee is not enough. Now junkies know and buy directly from the small dealer. In addition, there are fewer users now than there used to be.”

After putaw began booming in 1995, recently, based on the National AIDS Commission Secretary General Nafsiah Mboi, heroin users have tended to decrease in number and amphetamine type stimulants (ATS) use is likely growing. When I asked her about what factors affected the trend in using heroin, she said,

“It might be that our campaign was successful because we have massively publicized the relation between HIV/AIDS and injecting drug use. It demotivates people from using drugs by injecting them. The other cause is that there have been many intravenous drug users who passed away or were sick. Therefore, it reduces the total number of putaw users in the end. So because of being terrified of the bad impacts of using drugs through injecting, particularly the HIV/AIDS risk, the trend has shifted to ATS use.”
When I saw Lebay give the used syringe to the user, I was tempted to ask him about sterilization. At first, he replied to me, “I wash it very clean, bro. Sometimes with bleach. I know if we didn’t wash it very clean, a lot of diseases are still in it.” However, I watch the way he maintained the used syringe. He did not sterilize it after a user returned it to him. The one who cleaned the syringe was the user, not him. The users only washed the syringe after they used it with mineral water that they bought from the warung. Sometimes they washed the syringe before they used putaw to ensure the syringe worked well.

Lebay has those syringes from either the NGO field worker who distributes new syringes once a week (that’s why they have a nickname for the NGO field worker which is tukang intek (intek is the syringe and tukang is merchant or distributor) or the user’s syringe (users who ask Lebay to keep their syringe for their next use). Then I asked him a provocative question,

Ricky: How about HIV/AIDS? Do you realize that the syringe you’ve rented to the junkies might have diseases, including HIV/AIDS?
Lebay: I don’t care, man. I’m not an injecting user anyway. I only drag it.
Ricky: Are you not afraid of being stitched?
Lebay: That’s the risk. Everyone is going to die anyway. So I don’t care. If it’s my destiny to die soon, I could not refuse it.”

However Lebay has never rented out a new syringe to the user. Usually after getting the new syringes from tukang intek, he sold them to Pak De’. Then he said,

“If the user doesn’t want to get a disease from my syringe, they can buy the new one from Pak De’. But I doubt it. You know junkies, bro. They don’t care about anything but putaw, even they don’t care to their own health. As proof, they preferred to rent a used syringe than buy a new one. Actually, the difference is only Rp. 3,000.00 to Rp. 4,000.00. Nevertheless, they don’t want to spend their money on that. They like better to spend their money on putaw, even they don’t want to buy their own mineral water to clean the syringe. They chose to share it with their mates.”

On another occasion, I had a conversation with the putaw user talking about the syringe. “Why do you rent a syringe?” I asked him and he replied to me, “Because it’s cheaper than having to buy a new one. However, I do not always rent a syringe. Sometimes I used my own syringe. When I’ve had my own syringe, I asked Lebay to keep it for me, so every time I need it, I just took
“I don’t meet tukang intek every time he comes, especially if he only comes once a week, and the worst thing is that he gives me only one or two packages (one package contained with three new syringes, two or three condoms, and three alcohol swabs). The syringe is not terumo (the regular syringe that used to be distributed by tukang intek). It’s intek ayam (chicken syringe, or the brand name is strerra; they called it this because they said that this particular syringe is used for injecting a chicken). Intek ayam easily gets stuck. You can only use it once and then if you insist on using it again, there is big possibility that it will be stuck. That’s why junkies here, to be honest, they don’t want that kind of syringe, but because it’s free, we took it rather than spending more money for buying or renting syringes.

Moreover, I asked him, “how about the CHC, do they distribute the syringes as well?” He replied, “they distribute the syringes from the same brand.” I asked him, “but they give more syringes than the tukang intek, right?” I asked him in order to find out what the barriers were for IDUs in getting new syringes. He answered, “yes, they give me as much as I want. However, the problem is that we are afraid whenever we are brought the syringes that the police will catch us. They could send us to the jail.” I directly challenged him, “but do you know that if you bought a new syringe or even a used one and it didn’t have putaw in it, they could not arrest you?” and he replied, “man, you know our police, they will try to find your fault even though if you don’t have any mistake at all. They look for money!”

Criminalization to putaw user, especially by the authorities, has pushed and marginalized them from the mainstream society. The problem was not only because of the illegal drug use behavior, but the adverse effects from lack of access to health services have boosted the risk. Even though an attempt to decriminalize drug user has already been initiated, severe of mistrust, particularly between the user and authority, has obstruct that effort (Winarso n.d.).

Having doubt to the government role in HIV and drug management, IDUs were reluctant to any attempt to relief their drug problem by government. As mentioned earlier in the first chapter, there was a new mechanism with which to fund HIV programs in 2009-2010. The replacement from Family Health International, one of the biggest international NGOs, to Global Fund ATM has significant impact to the risk of HIV spread among IDUs, particularly in Bures. The main strategy of this new shift is to strengthening government’s role in HIV preventive management.

Initially, local NGOs played dominant functions in the effort of HIV preventive and treatment, yet the shift to Global Fund ATM, has stimulated the government to take more
responsibility. For instance, several *Puskesmas Kecamatan*, have been appointed to roll out needle exchange programs. However, besides of being lazy to spend more time to go to *Puskesmas Kecamatan* getting used to local NGO’s approach that distributed syringe in the neighborhood, they feel insecure to bring syringe outside Bures. They were afraid the police would identify them while they obtain the syringe at *Puskesmas* or the *Puskesmas* staff would share IDU’s personal information to the police.

Lack of trust to the government on the one hand was even getting worst with insufficient knowledge of IDU’s characteristics by the government. While FHI was the main actor in HIV preventive and treatment management, it provided a syringe with particular brand, Terumo. It can be used repeatedly. Meanwhile, *Puskesmas* has dispensed another brand of syringe, Sterra. It raised reaction from IDUs as sterra can be used only once and it is easily to get stuck. When I asked this to one of ex-FHI staff, he said that Sterra defeated Terumo in the tender held by the government.

3.5. Competition & Protection

Competition does occur in every sphere of economic activity, including the drug economy. A broker has to compete between other brokers to find *putaw* users in order to get free *putaw* or money from them, the small dealer has to strive to out-compete other small dealers so they can survive and sustain their businesses. Actually, there was nothing special about the competition in business. However, what tempted me to get deep into this topic were the drug actors using several particular strategies to place themselves as more superior than their competitors.

Bang Jago told me of his effort to dominate *putaw* market in Bures:

“At that time, Kojek was my competitor. He started earlier than I did in that business. I was the second. Because he was the first, so it wasn’t surprising at all that he became the biggest dealer in Bures. He had more customers than me. Then, I started to play with the price. I made my price lower than his. When he sold *putaw* IDR 400,000 (Eur 34.3) per gram, I sold it for IDR 350,000 (Eur 30). If he reduced it to the same price with me, I would cut it to IDR 300,000 (Eur 25.72). Therefore, his customers turned their back on him. With those prices, I still got a lot of profit. I bought it from my boss at IDR 150,000 - 175,000 (Eur 12.86 – 15). Moreover, the quality of my *putaw* was better than his. I didn’t mix it. It’s still pure when I sold it. So my buyer mixed it, not me.”

Price and quality are the classic strategies to attract or maintain the customer. Bang Jago knows it very well. Considering himself as the second *putaw* dealer in Bures, he utilized the conventional economic strategy to dominate the market. He knew who his competitors were, and
the knew about putaw quality and prices. He had full knowledge of the putaw market in Bures so he could adjust his marketing strategy to compete with his contestants. As Bang Jago’s business was getting bigger, his strategy to reduce the putaw price and maintain its quality allowed him to succeed in upgrading his position as the number one dealer in Bures at that time.

By upgrading his level, he was no longer serving his pasien (the naming for drug customer) directly but his staff took over his place. As mentioned earlier, he recruited staff as his business was growing, but he also had to think about his own safety, particularly from the police. Minimize his contact with the pasien through diverting his pasien to his staff made him safer, as even if the pasien was caught, he/she would not tell the police that that putaw was from him. At the same time, his competitors also recruited the downliners. One of the competitor’s downliners has recently become the biggest putaw dealer, as Bang Jago told me, “well, at that time Kojek had recruited staff as well. But I recruited the local youth here. He was the opposite. He took Madura people to be his staff. Now, you can see that the Madura dominate the putaw market in Bures”.

Then, Bang Jago continued his explanation of how he protected himself from the police. He told me the other strategy he used,

“When I was the dealer here, I was very generous to the community. You could ask people. I gave them money, donated a lot of money for building the mosque (he pointed out the mosque in that place), gave money to the orphans and decrepit. Nevertheless, I didn’t give money to the youth, especially for the healthy youth. They were able to work so they had to get some money by themselves. If they’d like, they could sell putaw as I did. See, I contributed a lot of my profit to the community, bro. That’s why they loved me and protected me from the police. Whenever there was a raid, the community informed me beforehand so I could run away and hide.”

The strategy employed by Bang Jago for his protection was different to his rival. Madura gang might have been creating and maintaining their relation to the corrupt police, as Bang Jago and several other people, either the drug actors or non-drug actors in that neighborhood, told me: “The Madura gang gives a lot of money to the penyakit (literal translation for penyakit is disease, but in this case the meaning is the police).” Based on the information from an ex-Madura dealer, Madura gang gave IDR 25,000,000 (Eur 2,143.35) per month only for the police in the district level. It does not include the field police that come almost every day to Bures. Each police officer who comes to Bures gets IDR 100,000 (Eur 8.57) from the small dealers. In order to get that amount of money, before the corrupt police entered Bures, they would inform the Madura gang beforehand of the raid. Therefore, the Madura putaw dealer has become untouchable.
During my fieldwork in Bures, I have seen quite often that the corrupt police entered Bures but the small dealers had already left in advance. “Don’t come inside, Bang. There’s penyakit!” someone shouted at me while the corrupt police was in Bures. I was so curious about that, and asked Sanweni to explain more:

Ricky: Then, what do they do if they come here and the dealer has already left?
Sanweni: They only collect the bribery money. Otherwise, they catch the users that were still using putaw at the time the corrupt police arrived. They don’t have a real intention to fight against drugs. They caught the drug users because they have a target of arresting a certain number of either drug users or drug dealers in a month. If they do really want to wipe out the drug circulation in this area, it’s very easy actually. Just catch the drug dealers. Even the dumbest people could identify who the drug dealers are. However, they don’t seem to want to eliminate drugs in this neighborhood. They get a lot of money from this business.

In addition, to avoid being arrested, the Madura gang used the police power to maintain their hegemony in the drug economy in Bures. I saw it once; a Madura small dealer threatened a broker because the broker did not take putaw from the Madura gang. “Do you want to go inside (to the prison)?” I was shocked when I heard that. A putaw dealer could threaten people to send them to prison. They might have that power or probably it was only a threat to intimidate “a naughty broker”. However, it worked. I saw the broker’s reaction after those words came out from the dealer. He looked pale and terrified. Bang Jampang, the putaw broker in Bures, said the same thing:

“It’s impossible if the police could not identify who the putaw dealers are. No way, they couldn’t differentiate between the users and the dealers. The dealers have put a lot of money to their ass, bro. The dealer also uses the police to win the competition between putaw dealers. You can see now, there are only two big putaw dealers left in Bures. All of their rivals have been swept away from here. They sent them to the prison. It’s not only their rivalry dealer; they sent the broker who didn’t take putaw from them also to the jail. Their play is dirty and it’s similar to where they used to be at the old Bures, full of garbage stacks.”

There might have corrupt police officers who were complicit with the putaw dealers in Bures. This in turn may have been inevitable when the police increased they authority when they separated from the Indonesian Military. The separation in general divided the role of Indonesian Military to take care of Indonesian defense from outside threats and the Indonesian Police to ensure
the peacefulness inside the country (Kompas 2001). One consequence of it is that the police have more power to overcome the criminal activity in Indonesia. Sabam told me:

“Used to be, when the police and military were still under the same roof, the police seemed dominated by the military. They [drug actors] were afraid whenever they overlapped with the military. I used to get putaw easily in the military residence and the most important thing was that the police didn’t dare to enter the military neighborhood. However, nowadays, particularly after the government has separated them, the police started to invade the military area to find the dealer. Therefore, it’s rare now for a dealer to operate their business in the military neighborhood unless they are bribed by the police. So, actually it seems that that separation is good for the drug eradication. But it’s bullshit. It’s only about the money distribution, bro. Now the police gets bigger portion than the military.”

To have an alliance with the police might protect the putaw business. The corrupt police would inform you about the raid that would happen and they would give the dealer a guarantee that they would not arrest the dealer. On the other side, the dealer could utilize their closeness with the police to maintain their domination in the putaw business. They could terrorize and send their competitor in the business to prison. In turn, to maintain the community might be useful for Bang Jago to protect himself from the police. However, the police indeed ran after him because he did not pay some money he owed them. Bang Jago explained how the police finally succeed to catch him:

“When I was a dealer, I was so rich. I had several houses and bought land in several places. Then, my wife was attracted to a young handsome person. It’s her weakness. She couldn’t resist every time she saw a good looking man. She was cheating on me. I discovered that because there was a red mark on her neck. We were fighting. It was a big fight and finally we went to the police to have a mediator. I think because she was too angry at me, she told the police that this is Bang Jago the biggest putaw dealer in Bures. The police had not proved it at that time, but they started to keep their eye on me. I was caught in 2004 because my down liner was threatened while he was imprisoned. The police threatened him, gave him a promise if he testified against me by telling that the putaw was from me, he would be released. Then I ended up in the prison with him. The police didn’t let him go, bro. It was a trick. He was fool. The police are fucking bastards. They only arrest the people who don’t pay them!”

Our conversation ended when suddenly there was a shout, “yeah, the police huh? Bang Jago told
me that it was the dealer’s *spion* and we have to be careful to that. Otherwise, they will use their relation with the corrupt police to arrest us.”

3.6. Shared Identity

“Here Bang, you can use it. It’s free. You don’t have to pay anything, c’mon”.

In my first encounter with Lebay, he held in each of his hands a used syringe with *putaw* inside of it. Suddenly he raised his hands closed to me with those uncovered syringes. If I did not know the fact that HIV and other viruses might have been in those syringes, I would not be so anxious. He also offered it to Subur, a Kios field worker who is responsible for outreach activities in Bures. We refused it as smoothly as we could. I presumed that that provocative action occurred because he needed to be assured by using *putaw* in front of them to prove that I am not an undercover agent.

In the following days, we discussed what had happened. Subur said that it was the first time he was being offered. He assumed that recently the number of NGO or ex-NGO workers who were relapsing was growing. He heard this during his fieldwork, from either the users or his colleagues. He was a little bit disappointed because that ruined the image of both the NGO and its workers, which had been built up for a long period.

Subur: Yaa it’s like *menjilat ludah sendiri dari omongan kita*, ki [the literal translation is you lick your own spit – denying your own word]. We’ve tried to change their behavior with an expectation at the end they could cease their drug consumption. However, some of us have returned to using it.

Ricky: But it’s common, right? The drug addict could be healed but cured. There will always be some relapse parts in their life

Subur: Yeah I know that. However, we have to keep in our mind that we are the NGO worker. We should be their role model.

On the other days, not infrequently did they question my identity openly or discretely, particularly on the subject of drug experiences. Sometimes the way they spoke was to justify their acts: for example when Jawir, an IDU, broker, and also *lapak* owner who just 21 years old, answered the question of why he used *putaw* over and over again, “I learned it from my friends the first time I started to inject *putaw*. They taught me; instead of injecting it once, when we pumped *putaw* in and out several times, it feels better and it's faster to get high. Yeah, you know that kind of feeling, rite bang.”

On the other occasion, when I talked to the broker who was older than Jawir, Bang Sanweni,
we spoke at the first meeting about the ‘history of putaw’, the places that were previously famous for drug transactions, and the fluctuation of drug quality over time. He stated clearly, “their world [his hand appointed to the younger brokers who were dominating in number], is totally different with mine. However, we’re in the same generation.”

Having similar experiences eased them in telling me their stories. They also felt secure when talking to me about their drug-related activity because I told them would feel the same if I had experienced what they had. Actually, I have never used putaw in my life. Nevertheless, they recognized me as NGO worker and most of the NGO workers they have known were ex-putaw user. They thus perceived me as an addict. The similarity of one or more aspects of our experiences might have created the same feeling, and particularly a shared identity between them and me.

This is one reason why the NGO employs an ex-drug user to be part of their field staff. An ex-drug user field staff member is expected to be able to easily adapt to the drug user community. The expectation followed that the field staff member could release others from their addiction, and encourage active drug users to follow their own path or at least ‘play safe’.

However, at the time an ex-drug user becomes a field staff worker, their identity has been changed from an addict to ‘a role model’ with certain responsibilities. These NGO workers, who have the objective of reducing the spread of HIV/AIDS among IDUs, are required to inform and encourage all IDUs in their respective areas how to avoid contracting HIV/AIDS. In the end, the field staff’s goal is to ensure that there is a change in the IDU’s behavior from risky to less risky. The consequence of that kind of role transformed the field staff’s identity from a user to a watcher. Therefore, when users lied to the field staff it was probably to please the field staff.

On the other hand, to recruit an ex-drug user as the field staff could be a boomerang in the instance of an NGO worker or ex-NGO worker relapse. In general, the drug users knew well what the NGO workers wanted them to do. The NGO workers intention was to make the drug actors support their work in reducing HIV transmission among the IDUs. The drug actors, generally the brokers and users, would answer exactly what they were expected to, even if it was not true. I saw it several times; they told ‘white lies’ to the field staff, i.e. during a conversation between a drug user who was asked by the field staff about his reduced use of putaw, he said, “I have already reduced my dosage. Recently I only use putaw once a day.” However, when the NGO worker left Bures, in fact he used it more often than once a day.

Telling lies to the field staff might be a strategy to maintain good relationships with the NGO workers. The field staff could give them some practical information related to their health problems and addiction. Moreover, probably the most valuable thing was to get new syringes freely from the field staff. They did not need to make a lot of effort, one could just go to a community health center or buy them from a drug store or an underground shop. They also did not have to be
terrified to bring the syringes along with them. In short, they got used to the ‘safe environment’ offered in Bures to support their addiction.

Many drug users feel anxious when reconciling the outside world with their identities as users. Jawir’s experience in the mainstream society showed how he has no cultural capital to adjust himself to the norms and values of the non-drug user community outside Bures. Besides, he was totally aware that his identity as a drug user was hardly accepted in the dominant value system.

“I met an addict when he bought putaw here. It was his first time coming to Bures. He asked for my help so he could buy putaw. Then he invited me to come along and use putaw with him. I went with him. I was terrified though, in case if he was an undercover police cop. He took me to a mall for having a meal. Before we entered the mall, I was not sure about joining him and walking inside. I felt hesitant because I only wore a dirty t-shirt, short pants, and slippers. However, he calmed me down and said don’t worry because we’ll pay for the food. The second time, I was well prepared. I wore a cleaner shirt and long pants. I took a shower before. Then he drove me to an apartment to meet his father. When we got there, he asked me to wait for him and then I was waiting at the parking area. After a while, a security looked at me suspiciously. It might be the security suspected me as a thief, especially if they saw my needle track. To avoid that, I hurriedly ran after my friend and asked him to leave that place.”

This chapter shows each individual’s functioning putaw management in Bures. Since its beginning, when Bures became a putaw scene, to how putaw use and transaction has been managed is told in this chapter. It creates and maintains a particular set of values and roles to support the complex web of putaw use within the drug actors in Bures. It remains the interaction between drug actors and non-drug actors within the community and society that will be depicted in the following chapter.
In this chapter, I will discuss three particular issues, the first of which is how the drug actors or non-drug actors in Bures were involved in the drug economy. What were/are the reasons that stimulate(d) and at the same time enforce(d) them to get into the drug economy? This chapter reveals how larger structural factors, including Indonesia’s economic development, have pushed them into the underground economy, particularly the drug economy. On the other hand, it also shows how the drug economy is an alternative for people who are defeated by the competition to get a legitimate job. This chapter describes the impact of the presence of drugs and drug users on women and children, and the community’s reaction to putaw use in Bures.

4.1. Ada Gula Ada Semut (where there is sugar, there are always the ants)

Pak De’, who has two little children, moved to Jakarta from his hometown on Sumatra island not long after he graduated from senior high school in 1987. It was common for the youth from his neighborhood to merantau (leave one’s home area to a bigger city) to Jakarta after finishing either junior high school or senior high school. He said that it was difficult to find a work at home and moreover, the local norm persuasively obliged the youth men for merantau to Jakarta.

When he arrived in Jakarta, it did not take a long time for him to get a job. His first job was in the lamp factory. For a senior high school fresh graduate, he had neither skill nor experience to work in the factory. Fortunately, the factory had a training program for their new employees. Then, he learned a lot to adjust his skill and knowledge to be fit into the job. He not only acquired knowledge and skill in his work, but also he met his boss whom, since then, he has been dependent upon.

When his boss moved into a big shoe factory, he followed him. He started working in the new factory and brought his career to a higher level than previously. His boss fully supported him in improving his capabilities; his boss for instance sent him to a computer short course. He still remembers how his boss defended him when he had a conflict with his colleague. He was at the peak of his life.

It was the economic and political crisis in 1997 that uprooted his source of living. The factory where he worked at was burned down in a riot in 1997. The management ceased the production and deactivated all its employees for three months without payment. Afterward, the
factory was permanently shut down.

During the riot, his boss disappeared. Probably, as a Chinese, his boss was terrified of the ongoing anti-Chinese protests. He could not find his boss either in the factory or in his house. He did not have any connections to other formal jobs and it was not easy to find any work at that time, as the economic crises forced hundreds of company to bankruptcy or ceasing their operations (Suruji, et al. 1998). He had limited social capital. Besides, he was no longer young this made it more difficult to find a job.

His misery was not over yet. He was forced to move from his existing rental house because the landlord increased the rental price. Fortunately, as a permanent worker in the factory, he got a severance fee of IDR 10,000,000 (Eur 857.34). Then he moved to Bures and established his own business, a barbershop in his house.

The story of Pak De’ represented most of urban people who have been forced to leave their hometown for Jakarta to make a living. This was supported by the main approach in the development of Indonesia. Indonesia more focused on developing the big cities, especially DKI Jakarta, instead of rural areas (Suharyadi 2005). Cities outside Jakarta got inadequate attention. Automatically, the circulation of money was centralized in DKI Jakarta, with between 70%-85% of total money located in the center and the rest distributed to the whole Indonesia (Chandra 2008). This inequality has created polarization between the rich and poor, with villages facing even more chronic poverty (Suharyadi 2005).

Consequently, people outside of Jakarta have been stimulated to move from their homelands to find a better life. They might have more opportunity to earn money in Jakarta than in their homelands, even though in Jakarta they work in the lowest sector, as scavengers or blue-collar workers. There were 1.8 million who people migrated to Jakarta in 1971. It grew to 2.6 million people in 1980 and it had reached 3.4 million people in 1995 (Emalisa 2003). The urbanization flow to Jakarta definitely has increased total number of Jakarta population. Based on Badan Pusat Statistik Indonesia/BPS (Indonesian Central Bureau of Statistics) data, the population in Jakarta has been growing – in 1960, there were 2.7 million people in Jakarta, and the population grew to 4.6 million in 1971, 8.3 million in 1990 and recently it was estimated at 13 million people (Kompas 2007). The density had reached 12,992 people per kilometer square in April 2010. However, it might have been easier for them to find a job before the economic crisis in 1997.

Even though they did not have any particular skill appropriate to the service sectors, the manufacture and construction sectors were widely open to them. If we look carefully at the period between 1980 – 1990s the global economic system had changed significantly. Corporations in particular have outsourced and relocated their factories from their home country to developing countries. This strategy was utilized because the expenditure of human resource costs was getting
more expensive in developed countries (Bourgois 2003). On the other hand, developing countries were competing to present an attractive pro-investment policy, such as the policies on cheap worker remuneration and tax policy. It was increasingly strengthening multinational corporations' rationale to shuffle their operations, especially their factories, to developing countries. Thus, during this period, many people were unemployed in developed countries but conversely, the factory relocation created new employment in developing countries (Bourgois 2003).

In this era, Indonesia’s economic growth seemed very promising. It hit one average 7% per year (Tambunan 2008). Formal sectors had created and absorbed more than 30% employment from Indonesia’s total population (Docstoc 2010). National income per capita had dramatically increased from $70 in 1969 to $800 in 1991 (Indonesia 2005a). Due to this achievement, Indonesia was included as a new Asian Economic Tiger (Gilang 2007).

Nevertheless, the economic triumph was not sustained for a long period for several reasons and it impacted my informant's life. Bang Jampang and Pak De’ told me how they have not had a job at all after the crisis in 1997. These sectors, particularly manufacture and construction where Pak De’ and Bang Jampang’s initial jobs were, were the most vulnerable to being impacted by the crisis. The analysis of the cause of the crisis is because the Indonesian government relied on its source of development financing to come from international loans (Nurindah 2009). Indonesia’s budget revenues and expenditures were always deficit during the new ruled order. To counter that deficit, the government appeared to international donors for debt relief. These loans have continued to grow. Indonesia’s debt was $25.321 million in 1985 and it grew to $59.588 million in 1995 (Musa 2009).

Debt burdens worsened due to corruption in the government. The World Bank claimed that 30% of international loans for Indonesia had been stolen (Kompas 2009). Transparency International launched its poll of corruption rates and in 1995, of 41 countries, Indonesia was at the bottom, and thus hardly transparent at all (International 1995). During the period 2000-2007, Indonesian corruption rates never rose from 2 (0 means extremely corrupt and 10 very clean) and in 2008, Indonesia’s rank was 126 out of 180 countries (International 1995).

Inequalities of development, relying too much on international investments and loans, and the corrupt government system have been the main characteristics of Indonesia’s economic foundations. With this weak economic foundation, Indonesia could not avoid being impacted from the 1997 Thailand crisis. Indonesia was one of the countries that had the worst impact from the crisis due to the large amount of international debt that same year.

Subsequently, the International Monetary Fund (IMF) came to Indonesia and offered an economic policy package to relieve them from the crisis. One of the policies outlined by IMF was that the Indonesian government had to agree to take responsibility in the private sector’s loan
payments (Susilo 2009). Consequently, the Indonesian government suffered as it dramatically increased its international loans to foreign lenders. Moreover, 70% of private companies registered in share market bankruptcy and this caused massive layoffs in employment. Twenty percent of the total number of the labor force in Indonesia was unemployed and it was the worst crisis since 1960 (Suruji, et al. 1998). Furthermore, the total number of poor people hit more than 50% of the total population of Indonesia in 1998 and even the International Labor Organization noted that two out of three Indonesians were very poor (Suruji et al. 1998). Moreover, because of the crisis, most of the manufacture and construction projects also ceased their operations and Pak De’ and Bang Jampang were included in one of the 20 million people who lost their jobs.

Even though Pak De’ and Bang Jampang lost their legitimate job during the crisis, they might have advantages in terms of capabilities and work experience when compared with others, such as Bang Jago, Bang Sanweni, Gembul, and Lebay, who had not even graduated from junior high school or elementary school. However, they also had similarities. They found that in the drug economy they could earn some money while in other sectors they had no opportunities to get legitimate work. However, this is only one variant in the community in which the respondents told me they preferred to live in the drug world. There were many people outside their circle were not involved in the drug economy but still survived.

Probably, Pak De’ was in a better position than other drug actors who were not only getting money from drugs but also had become addicts. Most of the drug actors I spoke with have addiction problems. At first, they were tricked into drug use by a friend’s persuasion. They claimed to have had no idea what the risks of using putaw were. Their intention was only to not be excluded from their social environment. Most of the brokers and users who were in their early 20's had seen drug use since they were adolescents. They had thus been internalized the drug scenery in Bures. They could not resist the temptation to try using drugs. Afterward, they became addicted and could not stop consuming them.

On the other hand, they were coming from a poor family and did not have an appropriate educational background to fit into a formal working world. Having no social and cultural capital doubled their problems of addiction. Therefore, to ease their withdrawal syndrome and get some money, they were inevitably involved in the drug economy.

Most of my putaw-use informants became addicts before they became engaged in the drug economy. However, Bang Jago’s case shows a slight difference to other informants. Before he was imprisoned and still a putaw dealer, he did not use putaw. Bang Jago only started using putaw while he was in prison. He confessed that, at the time, he was very stressful because of the problems he had to face. He was incarcerated, his wife cheated on him, and he had no money because his wife took all the money he earned from selling putaw. It was only then that he started using putaw, and
to this fieldwork was taking place, he still used it, though during fieldwork he earned money as a mobile street merchant, selling snacks.

Bang Jago retired from selling putaw was because his incarceration made him runs out of money; besides that, his wife took all the money he got. Moreover, his boss did not believe in him to run the business again. His boss was terrified that Bang Jago after his imprisonment had turned into a police emissary. Even though he was trying to convince his boss that he would not betray him, it did not soften his boss’ decision. Moreover, when he was acting as a putaw dealer, he never tried to find other sources of employment except from his boss. Therefore, after his boss stop supplying putaw to him, he did not have any foundation upon which to re-start his putaw business.

4.2. Vulnerable women

“What do you need to study to a higher education if at the end you will get married and your duty is to take care of your family, raise your children, clean the house, and cook for your husband and children?”

This was a rhetorical question raised by a young housewife in Bures. She knows that the value of role distribution between man and woman was still important to the community. She wondered why she studied until graduating from senior high school if afterward her parents would just marry her to a methamphetamine user in the neighborhood. Since then, she has to carry out domestic work.

Most of the community members with whom I had conversations mentioned the same thing about the obligation of women to get married. They do not want their daughter, or sister, to turn into a perawan tua (an old virgin). They have to get married right after they find their partner. Even though based on the statistical data (Indonesia 2005b), the average age at which females marry in Jakarta has gradually increased from 20.2 years old in 1971 to 23.9 years old in 1990, and finally to 25.2 years old in 2000, this does not mean that young women are free to make their decisions by themselves. To some extent, they could delay their marriage. However, they could not refuse if their parents asked them to get married when they have a partner.

To have their children married means a lot for the parents. It could be an indication that they have succeeded in playing their roles as parents. When their children have married, the parents’ responsibility to raise their children is automatically over. For a poor family, marriage means the parents do not need to spend more efforts on their children, especially in terms of money. If they have a daughter, their son in-law will take over the obligation to provide sustenance for his wife. To some extent, there was another reason for a parent to want to get their daughter married.
“My big sister married her boyfriend when she was 20 years old. My parents had to marry them because my sister was pregnant. My parents did want my sister to be pregnant outside of marriage. It would create a bad image for her and the family. Thus, when my parents knew she got pregnant, not long after that, she was married to her boyfriend.” (Olga – youth female informant)

It’s taboo for a woman to have a baby outside of marriage, particularly in Bures. The woman would get a bad reputation and raise gossip in the neighborhood. For the family, they would be shamed and disrespected. Abortion is totally not an option for pregnancy outside of marriage. Marriage is the only way to solve that the problem. Encouraging marriage might become a preventive way for parents to ensure that they daughter did not shame them by conceiving outside of marriage.

The problem of being shamed because a daughter got pregnant outside of marriage could potentially be solved through getting married. However, I saw that the problem got even bigger and more complicated when young women married a drug actor or IDU due to a pregnancy.

“There are a few local young women from here who married putaw users. Many are failed. They separated, divorced, or their man just left without the wife knowing where they went. Like my sister did. She married a putaw user because she was getting pregnant. To avoid being humiliated, there married. However, it lasted only for a while. Then, unexpectedly she came home with her baby. Since then, she lives with my family again. I don’t know where the hell her husband is. He does not support his baby either, he just disappeared. That’s why I don’t want to have a boyfriend from this neighborhood. I know their card.”

Olga did not know why her sister separated from her husband. Based on her perception, it was totally wrong at the time for her sister to marry him in the first place. She was not supposed to marry a putaw user. In her sister's view, what is in a putaw user’s mind is only putaw. Therefore, one consequence of being married to a putaw user is that your family may not be happy and can be torn apart.

Olga’s perspective on a marriage, particularly with a putaw user, might have been correct. Even though to get that conclusion she did not use any comprehensive studies or specific research, it derived from the empirical situation in her neighborhood where she has been living and observing for years. I have no intention at all to dispute whether or not a marriage with a putaw user could be successful. However, I would like to emphasis the risks for a woman married to an IDU. As mentioned earlier in this thesis, more than 50% IDUs who participated in the HIV voluntarily
counseling test had contracted HIV/AIDS. Thus, there is a heightened possibility for women who have unsafe sex with a putaw user to get infected by HIV/AIDS.

Olga could have said that she did not want to have a putaw user partner, even though she once did she have an IDU boyfriend. Nevertheless, a drug dealer was not definitively categorized as a putaw user from her perspective. A drug dealer has higher strata than a putaw user because a drug dealer earns money, and a putaw user wastes their money. “I’ve had a sabu (methamphetamine) dealer boyfriend. I lived with him for a while. We separated a couple months ago because he was arrested,” Olga told me.

However, it was not a parent’s dream to have his or her son in-law be involved in the drug world, even if he was a drug dealer. However, to avoid being embarrassed of their daughter’s pregnancy, to evade having their daughter be known as ‘an old virgin’, and to counter their economic problems, it was inevitable to have their daughter be in a relationship with a drug actor. In fact, having a relation with a drug dealer could give them an economic guarantee. However, it was perceived that a parent who has a daughter married to a drug dealer is known as a mercenary and ‘money mad’, as Olga and her friend said to me while they were talking about a young woman who just walked in front of us: “do you see her, bang? She marries a Madura drug dealer. She is younger than me, probably 15 or 16 years old. She is rich now though. Her parents’ were greedy, their eye on money. They accepted that their daughter married a drug dealer.”

Even though females were being marginalized, to some extent, they have particular authority in a family. Based on the value of husband's and wife’s distribution of household roles, in addition to the domestic role a woman has in the family, a wife has authority to manage the money. The husband has an obligation to hand over the money they have to their wife. On the one hand, it seems that a wife is dependent on her husband. She is indeed. On the other hand, if they were ‘smart enough’, they could manipulate their role in money management for their own benefit, as Olga said, “yaaahhh, Diah (she was talking about a young woman who married a Madura drug dealer) should be clever. If she is intelligent, she must have bought gold, a house, or anything as her savings and also just in case her husband is caught by the police.” This was Bang Jago’s experience as well. His wife took all of his money and treasures while he was in prison.

A wife besides having a role in the money management has the power to force her husband to do his role better in earning money, especially if their husband did not get enough money. Bongky, a non-drug actor in Bures, was working as a security guard. His salary was similar to the DKI Jakarta regional minimum wage. Having IDR 1,118,000 (Eur 95.85) per month from his salary was very tight to fulfill all his family’s needs. It was only enough for basic needs. Bongky had to get extra money by helping someone who needed to take care of his or her vehicle tax, driving license, etc. However, those other sources of getting money were fluctuating, sometimes there was
more than one person that asked Bonky for help, and other times not. Then Bonky imitated his wife’s statement to me, “Bang, rather than you just stay at home without doing anything, you’d better to go outside and get some extra money like the other men here do”.

4.3. Weapons of the weak

“Bongky, move it out of there. Put it in front of warung.”

I was in the midst of a conversation with Bongky when suddenly his mother in-law ordered him to remove the long chair to where it belonged. At that time, aside from Bongky and myself, there were two other people who just showed up, the first of which wore dirty jeans and a worn-out t-shirt. Contrarily, the other one seemed tidy; even though he only wore shorts and a t-shirt, the clothes were much more cleaner than the first person. They were similar in that both of them were very skinny and they were talking about putaw.

Immediately after his mother in-law ordered him to move the chair, Bongky and I lifted it and put it in front of warung that was only around 1.5 metres from the previous one. I asked her directly whether or not Bongky and I were talking too loud. She didn't respond to me, only replying that the chair belongs to the warung owner. After the two skinny people left, Bongky told me that her mother in-law asked him to remove the chair because she did not want putaw users hanging around in front of her house.

At that time, I did not realize the meaning behind Bongky’s mother-in-law’s command. After a while, I observed the non-drug actors in the neighborhood, and I became aware. The non-drug actors there made an invisible fence bordering their private area from the drug actors, particularly the putaw users. They definitely could not do anything to dismiss the illicit drug use in their area, but they have rights at least to protect their family and show that they still have authority of their property.

They took distance from drug users to prevent their own family from using drugs. It was quite common for them to hear that someone’s boy or daughter died because of putaw, and many even saw putaw users over-dose. I experienced it once during my fieldwork as well. A male putaw user was over-dosing on the same day he was released from the penitentiary. Not one non-drug actor offered any help. They just watched it happen from the front of their houses. Only a broker, a lapak owner, and two putaw users tried to help him by hitting his chest and cheeks repeatedly, and injecting salt several times. Realizing their attempts did not show signs of success, they stopped all efforts to wake him up and started removing him from that place. Whenever someone passed away because of over-dosage in Bures, the body was always dumped in the garbage pile area. Then the authorities would take it to the hospital.

There were various ways to compel putaw actors to leave personal territory. Generally,
people refused to have an open (or even closed) conflict with the drug actors. When I asked them why they did not just drive putaw users away whenever they hung out in front of their houses, the answer was simple; they said it was difficult to tell the putaw users to leave, that they were stubborn, that they do not have brains, etc. In short, there was not any advantage to having a dispute with the putaw user. One time, a tenant finally moved out of his rented home because he could no longer take drug actors' treatment towards him. He did not agree with drug actors loitering in front of his rented house. As the putaw users did not listen to him when he told them to move, he frequently threw hot water in front of his house at them. The drug actors did not run out of ideas. Their retaliation was slashing the man’s gerobak (gerobak is a vehicle without an engine for selling something) tires with nails every day. Finally, rather than fixing it or endlessly buying new tires, he decided to move out. Therefore, usually the non-drug actors’ reacted by trying to create an ‘uncomfortable place’ surrounding their house for the drug actors. They were very reluctant to even speak to strangers like me about the illicit drug use in Bures. They did not want to be involved, and seemed to be disconnected from the drug world.

Only the people who have more power could explicitly expel the putaw users from their private area, such as the landlords. Once I did see the landlord force the putaw users out from his property. However, the drug actors disrespected him, because he only became a landlord after marrying his wife received an inheritance of rented houses from her parents.

I asked Lebay about the reaction of another landlord who owns the rented houses in the line of his lapak:

Lebay: He expelled the putaw users from his land as well.
Ricky: I’ve never seen him, though.
Lebay: He rarely come to Bures, because he lives far from here.
Ricky: And does he know that one of his rented houses transformed into a dope house?
Lebay: Of course he knows. It’s all about money. The dealers paid for that house. As long as they paid it, the landlords have never complained. I think rather than that house was empty and he did not get any income, and he preferred to get money even though he rented it to the dealer. By the way, it was empty for several months before the dealer rented it. No one wanted to rent that house. It was too close to where the dealers gather.

I was still curious if the landlord and individual could do nothing; and what about the whole community – why could the community not react to the illicit drug use? From the onset of fieldwork, from my perspective, the community seemed permissive to the vulgarity of putaw use in their neighborhood. They closed their eyes and did nothing. They only cared about their own
problems and their own families. It seemed they were quite sure that their children would not become entangled with putaw use.

In fact, my presumption was not totally correct. Bongky told me that there were several attempts from the community to overcome the illicit drug use in Bures. Previously, the community made an anti-drug movement to put pressure on drug users and dealers. The community established a community-based organization in two hamlets which were renowned as the centers of putaw use. One of them was in Bures.

At the beginning, things seemed optimistic. They caught the putaw users who came to Bures and handed them over to the police. At that time, the putaw users who used and bought putaw in Bures declined in numbers because of the community raid. However, it was not sustained for a long period. After a while, the movement was starting to lose its energy. The organization gradually ceased to perform their activities. One of the reasons based on Bongky’s information was that there was a prejudice among the community members involved in the organization that highest-ranking member received bribes from the dealers. The indication was that there was not any single drug dealer being caught. The target of the operation was only on the users. They were quite often hitting and even blackmailing the users. Shortly thereafter, the anti-drug community-based organization disappeared.

Moreover, the community felt that they did not get sufficient back-up from the police. The police seemed to neglect the acts against law in Bures. Even though, on Bongky’s account, there were two big raids organized by the police in the past, it did nothing to change the situation. The dealers ceased their operation only while the raid was occurred, and after that, they continued to sell putaw to the users again. The community has felt mistrust towards the police, especially during the raids, as there were no drug dealers being arrested. This raised an opinion in the community that the drug dealers heard news of the raid from the corrupt policemen beforehand. This would explain why the drug dealers disappeared during those raids.

Bongky explained that it is not because the community did not want to do anything but they were in despair and helpless. Rather than be proactive against putaw use in their neighborhood, they felt this would be useless and as a result preferred to do what they could do: protect their families from the putaw entrapment. The police, the powerful people, and the prominent local people could do nothing, and even the community held the assumption that these powerful individuals were complicit in the putaw economy in Bures. While we were talking, suddenly, a motorcycle drove by us:

“Do you see it? On the back was the head of the Madura gang and the one who rode the motorcycle was our prominent local leader. So, can you imagine, our respected person in
this neighborhood was willing to escort the *putaw* dealer. He bows under the dealer’s knee. What do you expect from the community? We are only regular community members who have no power to stop the illicit drug use in Bures. To be honest, this neighborhood is not appropriate to live in anymore. If we have enough money, we don’t need to think to move out from this neighborhood. What are the advantages to live here? We as parents are worried and over-protective of our children in order to keep them away from the bad influence. On the contrary, they disrespect their parents. They started to try using drug. They failed in school. Many teenagers here are drop outs from school.”

The hopelessness, helplessness, and feelings of paranoia that created overprotective behavior towards non-drug users' children emerged from the threat of drug use and its negative consequences. It haunted and pushed non-drug users into their private arena. They became permissive after they felt useless in hoping that Bures would change into a better environment. They could not rely on powerful actors to overcome the problem in Bures, especially as the authorities that the community expected to deal with the illicit drug use problem have betrayed their trust by complying with the dealers. The only thing that they probably could do was hope that one day their savings would help them get out of Bures to find a better living elsewhere. Probably, their dream would turn into reality if what Bongky told me was not only a rumor.

“There is a rumor that P.T. Djarum, the company that owns the old Bures, planned to expand their land. It means that Djarum will remove people from this area, including the area where the *putaw* transaction exists. If so, it will be the end of the journey for *putaw* in Bures.”
Chapter 5
Conclusion

This study aimed to enrich the field of medical anthropology, particularly in the field of drug use and addiction, within the context of Bures, Indonesia. As stated earlier in this thesis, this study emerged in response to the mainstream paradigm in drug studies that focus only on drug users. The consequence of such a paradigm is that drug users were treated as if they were a closed and hidden community, living separately from the rest of society or the non-drug users. This study has empirical grounds with which to challenge this paradigm.

They indeed were, to some extent, a closed community, in the sense that they formed certain sets of value and roles that were particularly unique to the mainstream society. Moreover, the community was formed upon a shared identity of drug addiction. It would be more difficult for different identities to engage in the drug world. This is the reason why NGOs who focus on HIV/AIDS among IDUs commonly recruit drug users as their field workers. The drug world actors would reject and banish people who have no similar characteristics to them from their life.

If this study were to characterize drug actors as existing in their own, separate world, it would mislead the reader and misrepresent the local realities. In the end, this misconception could have adverse impacts on efforts to deal with the drug problem. It is likely that the attempt to overcome illicit drug use only focuses on the drug users as an individual group. It does not consider drug users in the larger social realm, the community that include the drug users and non-drug users.

Based on the results of this study, the drug actor classification of three categories – drug user, drug dealer and the courier – is inadequate. As Bourgois (2003: 8) suggests, “a complex and conflictual web of beliefs, symbols, modes of interaction, values, and ideologies …”. Similarly, the drug actors that I identified during the fieldwork were putaw users, brokers, small and big dealers, corrupt police, syringe rental owners, spion, lapak owners, warung owners, NGOs and non-drug actors.

This finding is against the simplification of drug economy. Drug economy in Bures has created and maintained a complicated structure that constitutes a set of role within. Each drug actor played particular role(s) to keep the system working. The main paradigm that classifies drug actor into three categories might have occurred in the past. However, as time goes by, it definitely has transformed to adjust to the changes within its surrounding.

The implication of adding with the additional roles in drug economy has extended the
interaction not only between the initial categories but also within the community as a whole. In Bures, there were some roles fulfilled by non-putaw users, such as warung owner and syringe seller. They got either direct or indirect benefit from that illegal activity, even though most of them would disregard accusations of having relations to that underground economy.

Beyond the new classification of drug actors that I have mentioned above, this study also reveals the interaction between drug actors and non-drug actors. The most visible thing was conjugation between young girls and drug actors. If they have relation with IDU, they might face health issue in their marriage. As the data shows, more than 50% IDUs have contracted HIV/AIDS. Whenever a girl non-drug actor has relation with the dealer, it might have economic nuance behind of it. Their parents persuaded their daughter to marry the dealer, to upgrade their economic well-being. Even though they recognized the risk of having relation with the dealer, such as the imprisonment of her husband did not demotivate the parents to marry their daughter with a dealer by an expectation that their daughter could manipulate the money from her husband for her own benefit or to some extent her parent’s family.

Nevertheless, most of the people I have had conversation with, preferred to make a distance from the putaw scene in Bures, including the parents. They sealed their family and built an (in)visible wall to prevent their family from the seduction of putaw use. However, they could not protect and keep their children to be in the “safe zone” all day long. There is no special playground for their kids. The only place they have had is in the same neighborhood where the putaw use scene occurred. It was inevitable for the children not being intensively internalized to the substance abuse. At the end, they might be involved in the drug world either as an addict or a person who complicit in the future, as Bourgois (2003: 10-11) mentioned that, “on a daily basis, the street-level drug dealers offer a persuasive, even if violent, and self-destructive, alternative lifestyle to the youths growing up around them”.

This closed interaction between drug (putaw) actor and non-drug actor showed that there is no distance within the community. The putaw users in Bures have closed relations not only with the other drug actors, but also with the non-drug actors within the community as a whole. Within this complex web of actors, interactions occurred under the basis of values of respect and trust, but also on intimidation and terror in the corridor of economic interest.

Moreover, the interaction was not merely limited to the actors in Bures. This study is cautious of misrepresenting facts by focusing too narrowly, as Ollman explained “on facts which are directly observable and from abstracting these appearances from the surrounding conditions and results which alone give them their correct meaning, a meaning that often runs counter to the obvious one” (in Waterston 1997: 3). Hence, this study reveals the invisible connection the actors in Bures and the larger structural factors in the society. Regarding the result of this study, there were
two types of structural factors, the first of which are directly related with the drug world, in this case Indonesia’s drug management, and second are those that have indirect relation but gives significant impact to the putaw scene in Bures. Zero tolerance and harm reduction approaches have significantly influenced the drug phenomenon in Indonesia in general, and Bures in particular.

Any change in Indonesia’s drug management structure has manifested in new pressures at the local level. The transitional period from one funding agency, Family Health International, to another agency, Global Fund for fighting AIDS, Tuberculosis, and Malaria, as well as from local NGO interventions in the field of HIV/AIDS to those of government institutions has actually boosted the spread of HIV IDUs, particularly in Bures. Changes in the availability of syringes, different brands of syringes, and an overall unsmooth hand-over from local NGOs to the government, which brought up issues of mistrust, has obstructed the effort to fight against HIV/AIDS.

Discrimination, marginalization, and criminalization emerged and became the foundation of interactions between mainstream society, the Indonesian government (drug management agencies) and drug actors. As a result, drug actors were pushed into the dark corners of society and became opponents to the mainstream way of life due to their legal violations. Penitentiaries could be seen as symbolic institutions of change, wherein identities can be remolded and transformed to better-fit mainstream society. However, imprisonment seems not to be the best remedy for this problem, even for the drug dealer.

Nevertheless, this study has no intention of sanitizing the sin of drug actors for their self-destructive behavior either to themselves or to the community. On the one hand, the presence of putaw in Bures has indeed negatively affected the community, by causing health problems such as addiction and disease for both users and their partners. The non-drug users within the community have been intimidated and forced to enclose their family in their own private area or house, and have become increasingly anxious and overprotective. On the other hand, this study has also revealed the role of indirect structural factors that silently coerce people to use or deal drugs, locking them up in a marginalized part of society. This study found that the inequality of broader development processes that create polarization between city-village and rich-poor, the weak system and its corrupt supporters, and exacerbated by the economic crisis of 1997, have forced people to find an alternate way to survive: the emerging underground drug economy. Unfortunately, many of the people in this study chose this route.
APPENDICES

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### Appendix 2: Glossary

<table>
<thead>
<tr>
<th>Term</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ada uang ada barang</td>
<td>an expression to say you have the money, you get the stuff</td>
</tr>
<tr>
<td>Beli putus</td>
<td>buy it and and after that no extended business for that transaction</td>
</tr>
<tr>
<td>BNN</td>
<td>Badan Narkotika Nasional</td>
</tr>
<tr>
<td>Gerobak</td>
<td>a vehicle without machine for selling something</td>
</tr>
<tr>
<td>Intek ayam</td>
<td>a nickname for a syringe brand, sterra</td>
</tr>
<tr>
<td>Intek</td>
<td>syringe</td>
</tr>
<tr>
<td>KPAN</td>
<td>Komisi Penanggulangan Nasional</td>
</tr>
<tr>
<td>Lapak</td>
<td>a venue to sell anything, but in this case refer to the place for using putaw</td>
</tr>
<tr>
<td>Merantau</td>
<td>leave one’s home area to a bigger city</td>
</tr>
<tr>
<td>Ngedrag</td>
<td>a technique for using putaw by inhaling its smoke</td>
</tr>
<tr>
<td>Nyipe</td>
<td>process of injecting drug to intravein</td>
</tr>
<tr>
<td>Pasien</td>
<td>naming for drug customer</td>
</tr>
<tr>
<td>Penyakit</td>
<td>literal translation is disease but in this case it refers to police</td>
</tr>
<tr>
<td>Perawan Tua</td>
<td>the literal meaning is an old virgin, a woman who has not married yet</td>
</tr>
<tr>
<td>Puskesmas Kecamatan</td>
<td>District Community Health Center</td>
</tr>
<tr>
<td>Putaw</td>
<td>low quality heroin</td>
</tr>
<tr>
<td>Rukun Warga or RW</td>
<td>the low level authority leader in the community</td>
</tr>
<tr>
<td>Sakaw</td>
<td>withdrawal syndrome</td>
</tr>
<tr>
<td>Spion</td>
<td>outlook tower</td>
</tr>
<tr>
<td>Sterra</td>
<td>a syringe brand</td>
</tr>
<tr>
<td>Terumo</td>
<td>a syringe brand</td>
</tr>
<tr>
<td>Tukang ojek</td>
<td>a motorcycle taxi driver</td>
</tr>
<tr>
<td>Warung</td>
<td>small store/stall</td>
</tr>
</tbody>
</table>