

1

Introduction: Drugs, place, space and time

Gary R. Potter

1. The ubiquity of the ‘drug problem’

The consumption of psychoactive substances, in some form or another, is a feature common to virtually all human societies – both globally and historically (e.g., Guerra-Doce, 2015; Jay, 2013). Most cultures have drugs that are widely used for recreational, therapeutic or spiritual purposes, and where use of these drugs, at least under certain conditions, is acceptable to society at large. Most cultures also have drugs and patterns of drug use that are considered unacceptable, labelled as deviant and subject to some forms of social control; restrictions on drug use are also a common feature of historic and contemporary societies (e.g., Barton, 2011).

The nature of restrictions on drug use varies. Certain historically normalised, culturally (and economically) embedded drugs remain legally available and widely used, although may be subject to strict regulation or informal social controls governing their acceptable use. Some drugs, like caffeine and nicotine, are legal more-or-less globally; others, like alcohol, are legal in some countries but not in others, reflecting local cultural norms. However, these examples are exceptions; since the early 20th century, global prohibition has been the dominant approach to restricting the consumption of drugs (McAllister, 2000). Most known psychoactive drugs are outlawed by international conventions and national statutes, with their possession and supply considered criminal offences subject to potentially severe sanctions¹. Nevertheless, the use of outlawed drugs persists – with an estimated 275 million people around the world using prohibited drugs in 2016, illegal drug use is also a common feature of contemporary societies (UNODC, 2018).

This is clearly a problem, regardless of whether drug use itself is inherently or objectively problematic. At best, such widespread illegal activity suggests clear failures in law enforcement, governmental authority and broader social

¹ Subject to some exemptions for medical and scientific purposes.

cohesion. But illegal drug use depends on drugs being available to users – thus, in line with fundamental economic rules of supply and demand, drug markets emerge and evolve. These are also illegal, representing further challenges to enforcement, governance and control. Moreover, illegal drug use, along with the necessitated supporting markets, is often accompanied by a range of individual and social harms² including health problems, crime and violence (Nutt, King & Phillips, 2010; MacDonald, Tinsley, Collingwood, Jamieson & Pudney, 2005). The ubiquity of illegal drug use, the size of the drug market and the scale of many drug related harms all remain stubbornly resistant to policies directed at their reduction (UNODC, 2018). And drug-control policies themselves do not always and unequivocally reduce drug-related harm – they can exacerbate existing problems and cause new harms of their own (Global Commission on Drug Policy, 2011, 2015; Hunt & Stevens, 2004). This, then, is the ‘drug problem’ – so often presented as a major source of individual and societal harm, and thus a key challenge to governments, law enforcement agencies, health professionals and moral crusaders around the world, as well as academics working in the drug field³.

2. Variations in drug use, drug markets and drug policy

While ubiquitous, the drug problem is far from homogenous. The term ‘drug use’ itself, even when excluding legal substances, covers a vast range of activities – different groups using different drugs in different ways and for different reasons. Similarly, ‘drug markets’ is a catch-all term that masks huge variety in the form and nature of drug supply, driven by user demand and constrained by law enforcement activity.

² Legal drug use is also related to various individual and social harms, but it is illegal drugs that we are primarily concerned with in this book.

³ This is not to suggest that there is consensus across, or even within, these various groups about how to solve the drug problem, nor even whether reducing the use of drugs or reducing drug related harm should be the primary measure of success (yet alone whether or how any of those things can be objectively measured). Prohibitionist approaches have been enshrined in international law for over fifty years (UNODC, 2013) and criminalisation continues to dominate policy in most countries. However, alternative policy paradigms – including harm-reduction, medicalisation, decriminalisation and even legalisation (at least for some internationally proscribed drugs) – are taking hold in more and more countries around the world. Regardless of proffered solutions and ideological perspectives, there is general agreement that the current situation of prohibited yet widespread drug use, with its various related harms, represents a failure of drug policy. Whether the concern is that drug use persists, that drugs are criminalised, or that drug-related harms persist under prohibitionist policies, there is, undoubtedly, a drug problem.

On one level, to say that these things vary by place and time is little more than a truism. A quick look at national and international reports shows how drug use and drug markets differ between and within countries, and change over time (e.g., EMCDDA, 2018; Home Office, 2018; UNODC, 2018). This is because drug scenes (i.e., interrelated clusters of cultural elements associated with the trade in and consumption of illicit drugs; Golub, Johnson & Dunlap, 2005; see also Stallwitz, this volume) are shaped by factors as varied as sub-cultural norms and fashions, availability and desirability of different substances, social and economic forces acting on drug scene members, and historical and political contexts. They are also subject to and shaped by the various policies enacted by local, national and international authorities – with such policies themselves reflections of similar social, economic and political forces. Put simply, the drug problem, like all social phenomena, changes as society changes over time and place in response to a complicated array of factors.

On another level, however, recognising differences and changes in the manifestation of the drug problem is important. While the drug problem may permeate global society, individual incidents of drug taking and drug dealing are physical events that happen in specific locations. It is only through detailed consideration of the specific spatial, cultural and temporal contexts of drug use, drug markets and drug policies that we can begin to unpick the many complicated factors that shape drug scenes, drug-related harms and policy responses to the drug problem. It is in this spirit that we present this latest book from the European Society for Social Drug Research – seven chapters exploring different aspects of the relationship between drug use, drug markets and drug policy, and space, place and time. Each chapter makes its own important contributions to our knowledge and understanding of the drugs problem; taken together they offer even greater insights.

3. Drug scenes and urban spaces

Drug use tends to be more prevalent in big cities. This is not surprising – cities are centres of economic and social life, and magnets for internal and transnational migration. Density and diversity of population allows for a range of sub-cultures – and their related and diverse patterns of drug use – to flourish. Different patterns of use and users are supported by markets that may overlap, both geographically and culturally, but that exhibit different characteristics. Examining differences within the same urban space and subject to the same local and national policies allows for a greater understanding of how variations in drug markets relate to sub-cultural differences of drug use.

In our first contribution, *Bernd Werse* and *Dirk Egger* explore differences in drug markets within the city of Frankfurt, Germany. Frankfurt contains an area known for its open drug market and highly visible problematic drug users. Anyone can, potentially, come to this area and purchase a range of substances, but for non-marginalised, recreational users 'junkieland' is not the main source of drugs – rather, as a site of visible drug-related harm, it is somewhere to be avoided. Cannabis and other drugs can be bought from street dealers operating in other public spaces in central Frankfurt, but street dealers in general have a reputation for charging higher prices for lower quality drugs and so are also not a preferred option. Instead, less-problematic recreational drug users favour closed markets and social supply networks that grow from trusted interpersonal relationships (Werse & Bernard, 2016).

Werse and Egger compare three types of dealers: social low-key private dealers, marginalised user-dealers, and street dealers selling outside the marginalised scene. Perhaps unsurprisingly, the latter two groups come from more disadvantaged socio-economic backgrounds than the former, with much higher levels of unemployment and lower levels of education. They are also more likely to be non-German nationals. These two groups are more likely to be involved with violence and other types of crime than the social low-key dealers, and more likely to end up with convictions and prison sentences in relation to their drug dealing activity. These factors contribute to their making higher profits, on average, as higher prices reflect an element of 'risk premium'.

Somewhat more surprisingly, and less in line with both stereotypes and existing literature, it is the private dealers who are more likely to be part of a network while the public sellers are more likely to act as independent dealers. Further, and again, somewhat surprisingly, all three groups report similar motives for dealing – all primarily initiated into selling drugs through a desire to cover the costs of their own consumption, although the two marginalised groups, operating in public, are more likely to frame their own use in terms of 'addiction'. Being motivated by a desire to make profit comes later – and is more important for the dealers selling in public. What becomes clear here is that many of the harms associated with drug dealing – particularly exposure to violence and involvement in other crime, but also 'addictive' vs. 'recreational' patterns of consumption – are not inherent in the drugs themselves, nor the city in which they operate. Instead, they relate to the differences between public and private space and the (connected) social, economic and cultural contexts of the drug scenes they occur in.

Variation across different drug scenes exists within the same geographical space. But variation also exists between similar drug scenes in different places. In our next contribution, *Anke Stallwitz* compares the problematic 'hard' drug scenes of Stockholm, Sweden and Vancouver, Canada – focussing on internal

drug scene violence. Vancouver (like Frankfurt) has a visible drug scene where users congregate and both drug use and drug dealing occur quite openly. Stockholm, however, does not have a comparable open drug market.

The two cities have much in common – similar in size, standard of living and quality of life. And both have some of the highest levels of drug use in their respective countries. Yet the structure of their drug markets and broader drug scenes, and the nature of violence within these, differs substantially. This seems to be clearly related to differences in drug policy and to differences in the cultural acceptance of illegal drug use in the two cities (with policy and cultural attitudes undoubtedly interrelated – the former both reflecting and shaping the latter). In Vancouver, more tolerant of drug use, harm-reduction is firmly embedded in both policy and practice. Here, the drug scene is characterised by coherent social structures. Use and dealing occur quite openly, as does drug-related violence. In Stockholm, conversely, zero-tolerance is the dominant policy approach and the scene is more fragmented. Here, drug use, drug markets and drug-related violence are all much more hidden. Seemingly the cultural and policy contexts rather than the drugs or drug users themselves better explain the nature and characteristics of the (problem) drug scene.

Taken together, these two chapters allow for some interesting comparisons. All three cities have drug scenes where significant populations of problematic drug users (heavy users of ‘hard’ drugs who might most closely fit the label ‘addict’) can readily access drugs, despite very different policy contexts. In all three, both the users and suppliers operating within these scenes are largely drawn from socially marginalised and economically deprived populations. Ethnic minorities (predominantly immigrants in the European cities and aboriginal peoples in Vancouver) play a significant role in the markets – not because such groups are inherently drawn to drugs or crime, but because they are excluded from other economic opportunities.

All three cities also show high levels of violence related to their drug scenes, deployed (among other reasons) to enforce debt repayment and settle disputes. This function of violence has been recognised elsewhere in the literature, theorised as a sometimes-necessary tool in an illegal market where such disputes cannot be taken to court (Andreas & Wallman, 2009). But there is an important nuance here. In Vancouver and Stockholm, the research focus was on problematic hard drug scenes, but in Frankfurt the research sample also included less problematic, non-marginalised recreational users – and here the incidence of violence was notably lower. This suggests that violence is not inherent to drug markets but is a feature of a particular type of market typified by marginalised users and problematic patterns of use.

An important difference is the visibility of the different hard drug scenes. This seems to relate to local cultural attitudes to drugs and the drug policies that

go with such attitudes. Relatively liberal Vancouver and Frankfurt support highly visible hard drug markets, where certain urban spaces become specific drug places⁴, whereas in more conservative Stockholm the drug scene is much more hidden. This may have contributed to differences in the way the drug market is structured, but not so much to the social harms related to it. Violence and other problems persist here as well – having a less visible market does not make these problems go away, but it does mean they are less noticeable. This in turn may make them less likely to attract attention and meaningful responses from local authorities, whether in the form of prohibition-oriented policing, or provision of treatment and support to users.

4. From physical places to cyberspaces

Problems associated with urban hard drug scenes are not new. Drug markets evolve, in response to cultural, social and policy changes, and this change needs monitoring by researchers and relevant (e.g., health and criminal justice) agencies. But over-arching market structures and related social harms are similar now (in Frankfurt, Vancouver, Stockholm or elsewhere) to those identified by researchers across the second half of the 20th century (e.g., Curtis & Wendel, 2000). However, other changes in the structure of drug markets in the 21st century have been more fundamental.

One of the most radical changes, as with so many areas of contemporary society, relates to the development of the Internet. Drug cultures often have an online presence – people share information and personal experiences of drug use online, and many drug-using subcultures have dedicated websites, discussion forums and social media groups (Boothroyd & Lewis, 2016). Drug markets have also become established on the web (Barratt & Aldridge, 2016).

Our third contributor, *Meropi Tzanetakis*, examines the structures and mechanics of cryptomarkets. Online markets share the same essential economic characteristics as offline markets – drugs are traded as commodities of value in response to the dynamics of demand and supply. But where open, place-based drug markets (like those in Vancouver or Frankfurt) are intrinsically linked to geographic location, online markets are not. With physical place replaced by cyberspace, we might expect significant differences in the form, structure and dynamics of online and offline markets.

Two crucial aspects of cybermarkets are that they allow for *remote* and *anonymous* interactions. The remote aspect allows for buyers and sellers from

⁴ Philosophers and geographers distinguish space from place by reference to social and cultural meaning. Space is anonymous; space becomes place through the way it is used by people (Tuan, 1977; Agnew, 2011).

diverse geographical locations to come together to conduct transactions from, potentially, anywhere in the world. Access to the market (whether as buyer or seller) is not dependent on having access to a specific geographical place, as is the case in the street markets of Vancouver, Frankfurt or elsewhere. This, as Tzanetakis explains, facilitates competition between suppliers while also providing choice for consumers, both to a degree not found in traditional markets. It also means that physical interaction between buyers and sellers is no longer a requirement for drug transactions. This, in turn, further reinforces the anonymity under which cryptomarkets operate – neither sellers nor buyers need reveal any contact details, identifying data or any other personal information to each other.

One notable effect of this detachment from both physical place and social interaction is that violence is largely absent from cryptomarkets. This may be a welcome development in terms of reducing drug-related harms, but it is also an important observation in terms of how we understand the functioning of drug markets. As shown in the previous two chapters, violence in drug markets serves to enforce agreements and resolve disagreements. Violence becomes less of a feature in those markets where interpersonal relationships develop, allowing for trust to replace the need for actual or threatened violence, as shown with the non-marginalised, non-problematic recreational drug scene that featured as part of the Frankfurt study. But the anonymous nature of cryptomarkets also prevents this type of relationship from developing, leading to the question of how online drug markets function in the absence of the formal rules and institutions (e.g., courts) that facilitate transactional exchanges in the legal economy.

Drawing on economic sociology theory and her own ethnographic study of online drug markets, Tzanetakis demonstrates how key features of cryptomarkets come to replace both the violence and interpersonal relationship elements of traditional drug markets in enabling trust between buyers and sellers. Standardisation of key features across different cryptomarkets, encouraging competition within and between platforms, and onsite feedback systems where customers rate different suppliers and products seem to effectively solve this problem. In fact, not only is violence removed, but other drug-related harms are mitigated through this system: drugs purchased online tend to be of a better quality, are less likely to be adulterated or underweight, and are often cheaper (especially for loyal customers) compared to offline markets. If harm-reduction is the preferred aim of effective drug policy, one might be tempted to argue that online markets should be strongly encouraged! A caveat, however, is that cryptomarket users are predominantly young, well-educated professionals involved in recreational drug use. The marginalised, problematic users who bear the brunt of drug-related harms in drug scenes such as those discussed in earlier chapters are largely excluded.

Where cryptomarkets are a clear example of drug markets becoming more hidden, another significant development in 21st century drug distribution concerns drug scene participants becoming more visible. And unlike the visible markets of Vancouver or Frankfurt, populated by marginalised problematic users with little social (or economic) capital, this is a deliberate move towards visibility by relatively normalised drug users. This is the emergence of the Cannabis Social Club model, originally developed in Spain, enshrined in legislation in Uruguay, and identified in a growing number of countries across Europe (Decorte et al., 2017).

Mafalda Pardal and *Julie Tieberghien* report on Cannabis Social Clubs (CSCs) in Belgium. Although not as well established as in Spain, CSCs have been in existence in Belgium for over a decade, although their legal status is still not clear (Decorte & Pardal, 2017). As in other countries, Belgian CSCs have grown up as a grass-roots movement of cannabis users and activists. The underlying principle is that CSC members grow a number of cannabis plants together, each having equal ownership and each having an equal share of the resultant crop. The legal argument is that if (as in Spain or Belgium) growing a single cannabis plant in a private residence would not lead to criminal charges, then so multiple individuals growing their single plants together should also not lead to criminal charges. Communal cultivation provides benefits such as economies of scale, allowing less capable growers to benefit from the input of those with more experience, pooling of growing equipment, and sharing of different varieties or strains of cannabis. In Belgium, CSCs publicly register as non-profit associations. Given that the legal arguments against CSCs are, essentially, that they are agents of illegal drug distribution (albeit only among a closed group), this leaves them in the unusual situation of officially notifying the authorities of their criminal activity.

The angle that Pardal and Tieberghien explore in this chapter relates to CSCs not only being open about what they are doing, but actively seeking more visibility as part of their campaign for legal recognition – and regulation – of the drug supply model they have developed. One way that CSCs have sought to publicise and engage the public in their campaigning is through posting videos on YouTube. Pardal and Tieberghien analyse and discuss these videos through the theoretical framework of media framing, showing how the CSCs seek to influence the ongoing legal and public debates by presenting themselves as legitimate and responsible organisations to counter the law enforcement and criminal justice focus of mainstream media coverage of CSC stories.

The fact that the videos seem to attract very little public attention, generating neither comments nor viewers in any great numbers, does not make the CSCs' YouTube efforts any less interesting. Nor does it make this contribution any less useful. The paper advances our knowledge of CSC campaigning ef-

forts and provides insights and reflections on the methodological challenges associated with online visual research. It also illustrates clearly how cyberspace and physical place relate to each other in the 21st century, for drug scenes as for other areas of life. Whether drug markets move online or not, as covered in the previous chapter, we should remember that drugs themselves are physical goods that must be produced (whether grown, like cannabis, or manufactured), transported and consumed in the physical spaces of the offline world.

5. Methodological challenges to researching drugs, place and time

The challenges inherent in researching drug use and drug dealing have long been discussed in the literature. These are criminal activities, and those involved in them face the risks of legal sanction and social stigma. This can make it hard to identify target populations in the first place, as ‘most deviants would not choose to advertise themselves’ (Downes & Rock, 1995, p. 28). Some drug scenes – particularly those involving the most marginalised populations, more problematic patterns of use, or greater levels of drug-related harms (three factors that often coincide) – may be difficult, or even dangerous, for researchers to enter (Williams, Dunlap, Johnson & Hamid, 1992). Even when we have identified our target populations, ‘deviants... are unlikely to be immediately co-operative when they are detected. After all, they have little to gain from exposure’ (Adler, 1985, p. 11). Researchers must be innovative, developing new and adapting old methods to overcome these various difficulties.

Alongside the substantive findings, our first four chapters all provide some important methodological lessons. Werse and Egger draw on the long-established tradition of qualitative approaches in drug research (Hobbs, 2007), recruiting respondents from their two marginalised groups directly off the streets but relying on chain referral for the less visible private low-key dealers. Stallwitz also takes a qualitative approach, but employing the more recent development of peer research (i.e., utilising drug scene members as researchers rather than ‘just’ as respondents) to improve access and recruitment, as well as data analysis and interpretation of findings. As drug scenes (along with so many other areas of social life) move online, so do sociological research methods: Tzanetakis joins the growing number of researchers taking ethnography online (Varis, 2016); Pardal and Tieberghien, similarly, apply visual content analysis techniques originally developed in a pre-Internet world to their YouTube videos. Our next two chapters focus more explicitly on methodological solutions to the challenges inherent in researching the space, place and time dimensions of drug use.

Qualitative research, as employed by the researchers in each of our first four contributions, help to provide in-depth understanding of the nature of different drug scenes. However, as *Karenza Moore* and *João Matias* remind us, it is quantitative data that has primacy in shaping public and political understandings of the size of the drug problem. The use of general population surveys (GPS) provides overviews of prevalence rates and trends in drug use at the national level, but these are of only limited use in understanding drug use in specific contexts. In recent years, targeted population surveys (TPS) have become widely used across Europe to address this shortcoming.

Moore and Matias are constructively critical of TPS. As a tool for unpicking the huge variation within the broad behavioural category 'drug use', TPS have great potential – often deployed in situ, they can target specific demographic groups, patterns of drug use, and drug cultures in ways that GPS cannot. This replicates the focus more usually associated with qualitative research while producing the statistical data that is preferred by politicians and policy makers.

However, statistics are always socially constructed and are prone to politicisation. Whether carelessly or concerted, TPS and the data they produce can distort rather than clarify the realities of drug use. They can also exaggerate rather than offset existing power inequalities between policy-makers and policy subjects (or between researchers and those researched). Care needs to be taken both in constructing the survey instruments themselves and in designing and executing recruitment strategies. For example, inclusion or exclusion of particular substances in a survey instrument can misrepresent which drugs are actually used, or are particularly problematic, in a given population. Likewise, targeting specific populations can exacerbate perceptions of drug problems within – and bring unwanted attention to – groups that may already be disadvantaged and marginalised. Moore and Matias talk us through these and other problems associated with uncritical use of TPS, but also offer many constructive suggestions for improvement. Ultimately, they recognise future TPS research as both valuable and inevitable but emphasise the need for critical reflection when using this approach.

TPS, like the qualitative approaches encountered in the previous chapters, can clearly contribute to understanding drug use within different cultural and geographical contexts – the place and space components of the title of this book. This can help identify, measure and understand different patterns of use and the characteristics of different drug scenes – including, for example, which patterns of drug use are more or less problematic (i.e., more or less associated with drug-related harms). But most quantitative and qualitative methods provide only a snap-shot – they engage with drug use at a specific point in time. Often researchers, or those seeking to support drug users who are exposed to drug-related harms, wish to know more. In particular, it can be important to