

1

Introduction: Stigma, identity construction and the 'who' of drug use

Caroline Chatwin, Gary R. Potter, & Bernd Werse

We are pleased to present this edited collection of chapters inspired by the consideration of the various ways in which drug users can be perceived, portrayed, framed and constructed. The collection arises mainly from presentations and discussions at the 30th European Society for Social Drug Research (ESSD) conference held in Riga in September 2019. The ESSD maintains a rich focus on sociological approaches to researching drug use and drug users within Europe, and this collection of papers comprises the most recent book resulting from conference proceedings. In particular, this book connects with its two most recent predecessors: *Why? Explanations for drug use and drug dealing in social drug research* (Kaló et al., 2019); and *Place, space and time in European drug use, markets and policy* (Potter et al., 2018).

The papers produced for Potter and colleagues (2018) explore the manner in which time and geographical space impact on trends in drug use, the defining features of drug markets and local concerns of drug policy makers. Essentially, the book invites the reader to consider the importance of the where and when in relation to drug research. Following on from this, the 2019 publication (Kaló et al., 2019) focuses on the explanations for why people use and sell drugs, a theme so central to sociological understandings of drug research. This latest publication is concerned with who people who use drugs are and how their identities are formed, as well as how they are perceived by a range of different actors.

Of course, it must be appreciated that there is a great deal of variation and distinction amongst people who are the users of illicit drugs, conservatively estimated by the United Nations Office for Drugs and Crime (UNODC) in 2018 to be some 269 million people, or 5.3 per cent of the global adult population (UNODC, 2020). It goes against ESSD values to crudely divide such persons by typologies such as recreational and problematic, nevertheless it is widely acknowledged that the vast majority do not experience (or cause) significant

harm as a direct result of their drug use and are not defined by their drug using identities. For example, as Parker and colleagues observed in 1998:

'Most adolescents and young adult users merely fit their leisure into busy lives and then in turn fit their drug use into their leisure and 'timeout' to compete alongside of sport, holidays, romance, shopping, nights out, drinking and most importantly of all, having a laugh with friends.' (Parker et al., 1998, p. 158)

There is no universal understanding of how we conceptualise or measure those who have progressed beyond this 'everyday' (South, 1998) nature of use, but key indicators often include the use of heroin and other opioids, injecting drug use, hospital emergencies, drug-related infectious diseases, numbers accessing addiction treatment, and drug related deaths (EMCDDA, 2020). Taken collectively, estimates suggest that, globally, only around ten per cent of people who use drugs ever experience one or more of these problems (Schlag, 2020). Despite comprising a relatively small proportion, however, this population has dominated discourse at every level of drug policy making which, in turn, has shaped drug research landscapes predominantly towards this group (Moore, 2008).

While this imbalance in drug research and drug debates has meant that more pleasurable motivations for drug use have long been neglected (Holt & Treloar, 2008), the current global drug situation indicates that drug users matching the key indicators listed above are facing the most difficult time since the AIDS/HIV crisis that unfolded during the 1980s. Over the past decade, the total number of opioid related deaths has increased by more than 70 per cent (UNODC, 2020). Over 81,000 drug overdose deaths occurred in the United States in the twelve months ending in May 2020 (CDC, 2020). Leading public health experts forecast nearly 500,000 drug related deaths in the US over the next decade (Blau, 2017), surpassing the projected number of deaths over the same time period as a result of car accidents and gun deaths combined, far outstripping the number of deaths at the peak of the HIV/AIDS epidemic, and similar to the number of COVID-19 deaths after a year of the pandemic. In Europe, although rates are variable, latest figures indicate that countries such as the UK and Sweden are also experiencing sharp increases (EMCDDA, 2020). Within the UK, Scotland's crisis is particularly acute with 295 drug related deaths per million of the population (compared to 81 per million in Sweden, which is the next highest in Europe; EMCDDA, 2020).

Many of these deaths can be attributed to the so called 'opioid crisis', comprised of a rising global prevalence of opioid use and dependence, including more dangerous use of prescription grade medicines such as OxyContin and synthetic opioids such as fentanyl. In the case of Scotland, contributing factors also include an ageing cohort of opioid users, rising levels of benzodiazepine

and other prescription drug use, and increased levels of deprivation combined with a failure to invest in harm reduction measures (NRS, 2020). Emerging evidence seems to suggest that the effects of the pandemic will have contributed to further drug related deaths in a variety of ways, with chronic drug users more at risk of contracting COVID-19 and of developing a more serious illness, while at the same time lockdown policies imposed by governments have made life more challenging for marginalised groups and disrupted access to vital public health services (EMCDDA, 2020). In Germany, for example, drug-related deaths have risen by 13 per cent since the onset of the pandemic (Drogenbeauftragte, 2021).

Within this global context, it is perhaps not surprising that a majority of the chapters in our collection have focused on people who are marginalised in relation to their use of drugs. In contrast to the statistical presentation outlined above, however, our authors have focused on the sociological construction of 'drug user' identity, centralising the dominant role that stigma plays in shaping lived experience and sense of self. External perceptions of people who use drugs are also considered, revealing the deeply ingrained and difficult to shift nature of stigmatisation, often despite a recognition that a more inclusive framing would bring many benefits.

1 Guide to chapters

The stigmatisation of people who use drugs, and particularly those who are dependent in their use, is a widely recognised problem, and one which international organisations such as the World Health Organisation (WHO), European Monitoring Centre for Drugs and Drug Addiction (EMCDDA) and United Nations Office on Drugs and Crime (UNODC) seek to address, often through interventions designed to reach out to marginalised drug users and draw them into mainstream society.

In our opening contribution, *Springer* sets out the tensions between the longstanding stigmatisation of drug users and these attempts to normalise them, which can sometimes be counterproductive. In doing so, he provides a framework for the chapters that follow. Specifically, he focuses on the manner in which treatment programmes for people who have become dependent in their use of drugs often aim to normalise or de-stigmatise their participants, while at the same time participation in the programmes can actually increase stigmatisation experienced. *Springer* emphasises how the language patterns used to talk about drug use and addiction, often by health professionals themselves, can label (Young, 1971) individuals impacting the way they are viewed, by both wider society and by themselves. He concludes by suggesting that there is a pressing need to thoroughly destigmatise the area of illegal drug use and that this will be best achieved by significant policy changes and relaxation of drug legislation.

In our third chapter, *Tsiolis* and *Kasseri* expand on the ideas introduced by Springer about stigmatisation and the profound impact it can have on the formation of identity. Their chapter centralises the importance of identity in recovery from drug use. Drawing on the ideas of Biernacki (1986), they argue that people who use drugs have internalised a 'spoilt identity', arising in part due to long-standing stigmatisation and marginalisation. Recovery is thus described as the facilitation of internal transformation of identity. Based on the narrative analysis of 'Helen's' experiences, they demonstrate the central role of identity in perpetuating drug use and the value of biographical work within therapeutic communities in allowing people to restructure their self-identities and move towards drug-free lives.

Continuing with the themes of stigma and identity, *Morgan* and *Bennett* explore the management of stigma in a population of heroin users. People who use heroin are widely perceived as living disordered and chaotic lives, and the majority of academic research also depicts them in this way. Becker (1963) and Young (1971) have conceptualised the impact that being labelled in this way – as somebody who is problematic – can have on self-perception. But this chapter is concerned with those who fight against that label by seeking to hide their stigma and present a more normal identity (Goffman, 1963). Building on previous work by Zinberg (1984) with people who only occasionally use heroin, and Warburton et al. (2005) with people who exercise control in their use of heroin, our fourth chapter presents a case study of 'domestic heroin users' in the UK who attempt a conventional life, and argues that this group maintains a degree of capital (Bourdieu, 1977) based around recovery and which can be drawn upon if cessation of use is desired.

The lens of stigma is moved from self-identity and treatment towards perceptions in wider society in *Petrilli*, *Cacciamani* and *Beccaria's* exploration of adolescent's social representations of people who use drugs in Italy. Our fifth chapter argues that the punitive nature of Italian drug policy and the alarmist style of reporting on drug use in the Italian press have facilitated a widespread perspective of people who use drugs as diseased and lacking in control (Levine, 1978), and as the natural enemies of the state and wider society (Christie & Bruun, 1969). The discussion foregrounds the significant consequences of this prevalent and stigmatising depiction as dehumanisation and exclusion from public debate.

Our sixth chapter turns to the interactions between the police and people who use drugs in Germany, and particularly focuses on the tensions caused by a discrepancy between the requirements of the law and understanding about best practice. *Von der Burg* and *Steckhan's* work in this area demonstrates that German police generally see the importance of relationship building and community policing in their interactions with marginalised and vulnerable people who use drugs, but this is not the kind of work that is seen as successful or which brings reward. Matters are further complicated by German requirements

for police to uphold the law whenever they see it being broken. The account provided here thus teases out the frustrating tension, raised earlier in Springer's chapter, that exists between the desire to engage and interact with people who use drugs, and the difficulty in doing so within existing structures of national and international drug policy.

Thus far, our chapters have primarily focused on people who are dependent in their use and who experience a high degree of marginalisation and stigmatisation alongside, and often as a result of, their drug use. In our seventh chapter, *Skliamis* turns the focus to cannabis and emphasises the role that activism can play in the destigmatisation of drugs and those who use them. Through his exploration of motivations for attending cannabis festivals in several European countries, he argues that such festivals are believed to contribute positively to the wider societal acceptance of cannabis, particularly in countries where drug use is more strictly prohibited. He raises the interesting suggestion that while people who use cannabis are often less visibly marginalised, stigma can be related to informal sources of control such as family and employers, but can still result in significant consequences such as sanctions from authorities, loss of status and offensive disapproval from non-users.

The concept of stigmatisation is turned on its head in our final chapter, which provides a cross-European study of young people's drug use trajectories and provides important insights into the relationship between drug use and offending behaviour. Within this framework, *Rolando*, *Beccaria* and *Duke* explore the continuing relevance of stigmatisation and marginalisation in understanding why young people are sometimes motivated to both use drugs and to commit crimes. In this realm, existing academic research informs us of the key role environment (Stevens, 2011) and social exclusion (Seddon, 2006) can play in predicting the coexistence of drug-using and offending behaviour. Here, however, the authors find that relatively advantaged young people across Europe are also at risk of coming into contact with the criminal justice system because of their drug use and related offending behaviours, raising the interesting question of whether, amongst some populations, drug use and even drug dealing have become so normalised that the consequences related to their illegal status are overlooked when engaging with them.

References

- Becker, H.S. (1963). *Outsiders*. Free Press.
- Biernacki, P. (1986). *Pathways from heroin addiction: Recovery without treatment*. Temple University Press.
- Blau, M. (2017, June 27). STAT forecast: Opioids could kill nearly 500,000 Americans in the next decade. *STAT*. <https://www.statnews.com/2017/06/27/opioid-deaths-forecast/>

- Bourdieu, P. (1977). *Outline of a theory of practice* (R. Nice, Trans.). Cambridge: Cambridge University Press. <https://doi.org/10.1017/CBO9780511812507>
- CDC. (2020). *Overdose deaths accelerating during COVID-19*. Centers for Disease Control and Prevention. <https://www.cdc.gov/media/releases/2020/p1218-overdose-deaths-covid-19.html>
- Christie, N., & Bruun, K. (1969). Alcohol problems: the conceptual framework. In M. Keller & T. Coffey (Eds.), *Proceedings of the 28th International Congress on Alcohol and Alcoholism* (pp. 65-73). Hillhouse.
- Drogenbeauftragte. (2021, March 25). *Zahl der an illegalen Drogen verstorbenen Menschen während der Coronapandemie um 13 Prozent gestiegen* [Number of people killed in illicit drugs increased by 13 percent during corona pandemic]. Berlin: Die Drogenbeauftragte der Bundesregierung. <https://www.drogenbeauftragte.de/presse/detail/zahl-der-an-illegalen-drogen-verstorbenen-menschen-waehrend-der-coronapandemie-um-13-prozent-gestiegen/>
- EMCDDA. (2020). *European drug report 2020: trends and developments*. Publications Office of the European Union. <https://www.emcdda.europa.eu/edr2020>
- Goffman, E. (1963). *Behavior in public places: notes on the social organization of gatherings*. Free Press.
- Holt, M. & Treloar, C. (2008). Editorial: Pleasure and Drugs. *International Journal of Drug Policy*, 19(5), 349–352. <https://doi.org/10.1016/j.drugpo.2007.12.007>
- Kaló, Z., Tieberghien, J., & Korf, D.J. (Eds.). (2019). *Why? Explanations for drug use and drug dealing in social research*. Pabst Science Publishers.
- Levine, H.G. (1978). The discovery of addiction: Changing conceptions of habitual drunkenness in America. *Journal of Studies on Alcohol*, 39(1), 143–174. <https://doi.org/10.15288/jsa.1978.39.143>
- Moore, D. (2008). Erasing pleasure from public discourse on illicit drugs: On the creation and reproduction of an absence. *International Journal of Drug Policy*, 19(5), 353–358. <https://doi.org/10.1016/j.drugpo.2007.07.004>
- NRS. (2020, Dec 15). *Drug-related deaths in Scotland in 2019*. Edinburgh: National Records of Scotland. <https://www.nrscotland.gov.uk/files//statistics/drug-related-deaths/2019/drug-related-deaths-19-pub.pdf>
- Parker, H., Aldridge, J., & Measham, F. (1998). *Illegal leisure: The normalisation of adolescent recreational drug use*. Routledge.
- Potter, G.R., Fountain, J., & Korf, D.J. (Eds.). (2018). *Place, space and time in European drug use, markets and policy*. Pabst Science Publishers.
- Schlag, A.K. (2020). Percentages of problem drug use and their implications for policy making: A review of the literature. *Drug Science, Policy and Law*, 6, 1–9. <https://doi.org/10.1177/2050324520904540>
- Seddon, T. (2006). Drugs, crime and social exclusion: social context and social theory in British drugs–crime research. *The British Journal of Criminology*, 46(4), 680–703. <https://doi.org/10.1093/bjc/azi079>
- South, N. (1998). *Drugs: cultures, controls and everyday life*. Sage.
- Stevens, A. (2011). *Drugs, crime and public health: The political economy of drug policy*. Routledge.
- UNODC. (2020). *World drug report 2020* (United Nations publication, Sales No. E.20.XI.6). <https://wdr.unodc.org/wdr2020>

- Warburton, H., Turnbull, P., & Hough, M. (2005). *Occasional and controlled heroin use: Not a problem?* Joseph Rowntree Foundation.
- Young, J. (1971). *The drugtakers: The social meaning of drug use*. McGibbon & Kee.
- Zinberg, N.E. (1984). *Drug, set, and setting: The basis for controlled intoxicant use*. Yale University Press.