

Chapter 1 : Theories of drug addiction

My thesis is an ethnography of the harm reduction staff of the syringe exchange program (SEP) of Prevention Point Philadelphia (PPP) during a period of six months between and

Terms and definitions The evidence in support of interventions is based on individual studies and systematic reviews of evidence. Generally, studies compare an experimental intervention against a placebo or a control intervention, rather than against other competing interventions. Meta-analytic techniques allow us to overcome some of the problems arising from indirect comparisons and extract useful results from various existing studies. The three meta-analytic techniques used in this summary are defined below. Multiple-treatment meta-analysis Multiple-treatment meta-analysis allows comparison of interventions across different studies Caldwell et al. Pair-wise meta-analysis Pair-wise meta-analysis of studies is, in contrast to the other two approaches, a method based on direct comparison. It involves a pooled analysis of studies comparing an experimental intervention against a control. Psychosocial interventions for treating cocaine problems In the absence of an established pharmacotherapy for cocaine dependency, treatment options have made use of psychosocial interventions. Three general types of psychosocial intervention have been used to treat drug users: In practice there are many subtypes, variations and overlaps in the specific measures offered by service providers in different countries. Cognitive behavioural therapy CBT is a psychotherapeutic treatment modality that can be offered in an individual or group format Hofmann et al. It is empirically supported as a treatment for substance use disorders. In general, CBT interventions involve challenging irrational, negative thinking styles that are thought to promote negative affective states, which in turn promote maladaptive behaviours. CBT interventions promote the development of alternative coping skills and focus on changing behaviours and cognitions related to substance use through self-control training e. Initial treatment sessions often involve developing skills directly related to achieving and maintaining abstinence e. Later CBT sessions may focus on topics and skills indirectly related to maintaining abstinence e. Motivational interviewing MI is a client-centred, semi-directive method for enhancing intrinsic motivation to change by exploring and resolving ambivalence Smedslund et al. As a result, it is often used at the outset of treatment to help motivate clients to try more intensive measures, such as CBT. MI has been shown to be effective with both adults and adolescents and is an empirically supported intervention for substance use disorders. It is especially useful when clients are ambivalent about changing their behaviour. Contingency management CM is a type of treatment used in the mental health or substance abuse fields. Clients can be, for example, rewarded with vouchers that can be exchanged for retail items Vocci and Montoya, Several reviews have been undertaken to examine the effectiveness of psychosocial interventions for treating drug problems. For example, a systematic review Knapp et al. In particular, CM interventions have been shown to help to improve retention in treatment and, in turn, other treatment outcomes Vocci and Montoya, Consequently, measures following this approach to treating cocaine dependency rank as the psychosocial intervention with the highest efficacy Vocci and Montoya, More recently, a Belgian study reported that after six months of participation in a CM programme with community reinforcement, the rate of abstinence among cocaine users was three times higher than for clients in standard treatment Vanderplasschen et al. Find out more Further reading Markel, H.

Chapter 2 : Sociological Theory/Conflict Theory - Wikibooks, open books for an open world

The challenge of violent drug-trafficking organizations: an assessment of Mexican security based on existing RAND research on urban unrest, insurgency, and defense-sector reform / Christopher Paul, Agnes Gereben Schaefer, Colin P. Clarke.

Resources, education, language, nutrition, health, etc. Lifecycle phases, age Gender In addition, the results of ethnic group comparisons may not be consistent across the lifecycle. For example, Muthen and Muthen observed that gender and ethnicity effects related to alcohol consumption patterns among individuals in their twenties did not follow the same trajectory as for individuals in their thirties. Furthermore, American Indian experiences may vary tremendously depending on where they reside during different periods of their lives-in large urban centers, rural areas, within reservation areas, or as youths living in boarding schools. The White non-Hispanic and Black non-Hispanic groups had a similar rate 3. The rates of alcohol dependence were lower among other Hispanic respondents Caribbean, 1. Makimoto , like the National Household Survey, also found that the group of Asian Americans had higher rates of abstention and lower rates of heavy alcohol consumption compared to Whites, African Americans, and Hispanics. Moncher, Holden and Trimble observed that an aggregate sample of Native Americans who used alcohol did so at an earlier age and drank more heavily, compared to other ethnic groups in the United States. Diversity in drinking patterns also exists between subgroups of the same racial or ethnic group. The National Household Survey data concerning Hispanic groups reinforces the importance of disaggregating data on heterogeneous ethnic and cultural populations. Caetano and Raspberry observed that Mexican Americans born in the U. Furthermore, subgroups are also defined by age drinking decreases with age , gender men tend to drink more often than women , and national origin Delgado, ; SAMHSA, Similarly, Makimoto reported that Japanese Americans describe themselves as drinking more frequently and more heavily than do Chinese Americans, though these two groups are usually combined in research into a single "Asian American" category. Furthermore, Hawaiians in Hawaii have the highest rate of binge and chronic drinking, compared to Whites, Filipinos, Japanese, and other Hawaiian groups Mokuau, Some groups, such as the Chippewa Ojibwe have rates of alcohol use disorders that are similar to the general population Draguns, Prevalence rates vary by tribe and location-urban, rural, and reservation Draguns, , and problems with alcohol vary between reservations, depending on individual attachments to family and to the Native American community Milbrodt, Impact of Alcohol on Ethnic and Cultural Groups In addition to differences in drinking patterns, differences in the consequences of alcohol use may exist among various ethnic and cultural groups. The differential consequences may, in part, be a function of different vulnerabilities and resiliencies conferred by biological and genetic factors NIAAA, Or, differences in outcomes and impacts may be related to disparities in the timing and types of services experienced by individuals from various ethnic and cultural groups. Differential consequences of alcohol consumption can be related to: Differing vulnerability intrinsic, biological Service disparities access to intervention and prevention resources Differential rates of alcohol-related medical problems Differential rates of alcohol-related mortality Differential impacts may relate to "drink of choice" Differential impacts may relate to physiology As the U. David Satcher issued a statement concerning health disparities and service inequities that exist across our nation. His position is that some communities, defined by race and ethnicity, disproportionately bear the burden of disability from under- or poorly-treated mental health problems. For example, Hispanics in the U. For example, significant disparities in age and ethnicity appear among individuals who are served in, and complete, public sector alcohol treatment programs. Native Americans were more likely to complete treatment The authors conclude that these discrepancies are the result of several important interactive factors, including variable rates of under-diagnosing drinking problems and social class distinctions between the groups in terms of who receives public sector versus private alcohol treatment services. African Americans currently have higher rates of alcohol-related medical problems and mortality than Whites, despite having higher rates of alcohol abstinence Gray, They were three times more likely to develop cirrhosis of the liver and esophageal cancer, one of several alcohol-related cancers. Similar

findings have been reported from research with Native Americans who use alcohol. Rates of vehicular homicide, homicide, and suicide that are attributable to alcohol are higher among Native Americans than the general population Milbrodt, The incidence rate of esophageal cancer in Hawaii is much higher among Native Hawaiians than among Whites, and this may be attributable to a difference in the "drink of choice" between these two groups. Native Hawaiians choose beer and Whites are more likely to choose wine and spirits Mukuau, A fair amount of discussion about the drinking patterns among Asian Americans and Pacific Islanders addresses "flushing" reactions to alcohol consumption. This is a physiological response or sensitivity that many individuals experience to varying degrees in response to drinking alcohol, and may include a variety of chemically-induced, physically uncomfortable symptoms Kuramoto, ; NIAAA, While flushing has no apparent long-range health impact, it may or may not be related to the frequencies with which affected individuals choose to drink. Studies indicate that some individuals with this response drink less, while other individuals develop alcohol-related problems despite its presence NIAAA, Mental Health and Other Social Effects: Intimate partner violence IPV is one problem that has been associated with alcohol abuse. This is not true among White women perpetrators; their alcohol-related problems continue to predict the IPV that they perpetrate, but not IPV perpetrated against them. However, among Black couples, alcohol-related problems of men and women continue to be strong predictors of IPV. It should be noted that the key variable is the presence of alcohol-related problems, not the amount of alcohol consumed Cunradi et al. Some authors address the issues of social control and economic incursions that may be tied to alcohol use among members of certain ethnic and cultural groups. This history reports ways in which alcohol has been used to maintain and preserve an inequitable social order and to reinforce patterns of oppression. Milbrodt also describes historical roots of alcohol problems among Native Americans that are tied to interactions between Native people and Europeans. Alcohol was recognized by some tribal leaders as a source of their increasing vulnerability, poverty, persecution, and loss of traditional social order and resources Mancall, This conclusion was based on a set of observations of Navajo Indians. Many interventions are based on assumptions that do not recognize the importance of these norms, practices, and influences on alcohol consumption and abuse. Such a lack of cultural relativity may result in a misinterpretation of intervention outcomes Heath, For these reasons, Adrian cautions researchers to be alert to implicit assumptions about relationships between ethnicity and addiction, particularly in reference to differences in prevalence rates, associated problems, and use-related attitudes. Some cultures abhor any alcohol use. For example, among non-drinking adolescents, religion often plays a central role in life. In cultures that accept some alcohol consumption, norms govern what types are consumed. There are also norms concerning how much is consumed, and what are acceptable forms of intoxicated behavior. Thus, any specific type of substance use could be differentially viewed as normative, deviant to some degree, or quite deviant behavior, depending on the cultural context Oetting et al. Furthermore, socialization theory explains how specific drinking customs and rituals are transmitted across generations and from one individual to another within a family, ethnic, or cultural group Oetting et al. Drinking and other drug use behavior are also associated with the perception of risk associated with consumption, and the risk perception may differ among ethnic and cultural groups. Gutmann urges caution, however, in drawing conclusions about the role of acculturation in shaping alcohol consumption patterns: The process of acculturation alone may not be the primary factor shaping alcohol abuse patterns, but the stress of the acculturation process within hostile environments may influence alcohol use and abuse patterns. This is of concern, because practitioners and researchers may unwittingly and inadvertently contribute to the problematic drinking patterns through: In fact, a content analysis of empirical studies led to the conclusion that there is no support for a contention that substance use, substance-related problems, or substance-encouraging attitudes differ significantly between representatives of mainstream U. This is important because misrepresentation and over-inflation of the differences contributes to "further problematizing" the status of individuals from these groups p. However, it is also difficult to separate the effects of cultural norms and values from other contextual influences, such as unemployment and the loss of status that accompanies the loss of traditional tribal roles of importance. Relevant cultural norms may apply either to the actual consumption of alcohol, or more to the threshold of acceptable behavior while under the influence of alcohol Draguns, The Hispanic

community has strong cultural prohibitions about women drinking. These community injunctions do not exist for Hispanic men—a fact that is offered as a potential explanation for their significantly higher drinking rates when compared to Hispanic women. McNeece and DiNitto describe a culturally specific definition of alcohol and other drug problems that exists within segments of the Latino community. There is a perception of such problems as being the result of extrinsic, spiritual intervention, rather than as a phenomenon under individual control. In addition to addressing issues of religion and spirituality, culturally competent practice with Hispanic and Latino individuals should address issues of: Similarly, the influence of the Confucian and Taoist philosophies has been considered as an explanation for the low rate of alcohol consumption among Asian Americans. The degree of acculturation to American cultural patterns may also serve as a means of explaining differences in drinking behavior across Asian and Pacific Islander groups. Studies of youth and young adults generally associate higher degrees of assimilation with higher levels of drinking, particularly among men Kuramoto, Risk factors that have been identified through key informant surveys among Asian American groups include: Makimoto suggests that alcohol problems among Asian Americans are often related to struggles with the transition to Western culture. The transition process creates stress, disrupts traditional family structures and the extensive support system provided by extended family members, and can hinder self-identity development. Some individuals use alcohol to cope with the stress associated with these difficulties. West African traditions involved alcohol as an integral part of medicine, religion, and special celebrations, but placed high value on moderate drinking and disapproved of drunken behavior Gray, Slavery, emancipation, abolition, and civil rights have since intervened, and one contemporary result is a tremendous degree of variability and ambiguity in attitudes, meanings, norms, and behaviors related to alcohol consumption Gray, A large segment of the African American community is characterized by abstinence Herd, The cultural-specific approach to understanding alcohol use disorders leads to an awareness of where people seek and receive help with their problems. It is important to note that the research concerning drinking patterns among African Americans does not tend to employ ethnographic approaches or to address cultural theories, and therefore is limited in its usefulness for "within group" comparisons Gray, Caetano, Clark, and Tam indicate that drinking patterns observed among some Native American groups are consonant with the use of alcohol as a means of coping with low self-esteem, anxiety, and feelings of frustration, powerlessness, hopelessness and despair resulting from experiences with discrimination and oppression. Individuals at all socioeconomic levels experience racism and discrimination, which may explain why alcohol use patterns within some ethnic and cultural groups tend to cross over socioeconomic boundaries. Dixon adds that, particularly among African Americans, alcohol is often valued for the escape it provides, while the problems that its use may create are underestimated. Access to Alcohol Another factor that contributes to drinking patterns within an ethnic or cultural group is the extent to which alcohol is easily accessible. Highly segregated, low-income neighborhoods tend to have a high degree of access to liquor and density of liquor outlets NIAAA, For example, among a group of 7th grade White, African American, and Mexican American teenagers, Mexican Americans received the greatest number of substance offers. They were most likely to be offered substances by peers in the family and at parties. African Americans received offers of substances from their dates especially among girls and their parents, and were more likely to receive offers in parks. African American adolescents were the most likely to resist the offers and to use explanations in their refusal repertoires. Gender differences also appeared among these variables Moon et al. Prevention and Intervention The Social Work Code of Ethics directs social work professionals to acquire and adopt culturally competent practices see Section 1. This includes consideration of client language preferences and abilities. There are two general approaches to prevention and intervention of alcohol use disorders among members of specific ethnic or cultural groups. The first involves applying evidence-based practice and adapting interventions that have been empirically tested and proven to work with the general population. The second involves creating culturally specific programs "from the ground up. Those who do, often enter treatment for alcohol abuse as a result of seeking treatment for some other problem, such as an alcohol-related medical condition Booth et al, Therefore, the initial intervention objective may involve helping the client to enter alcohol treatment. The AOD Cultural Framework outlined by Amodeo and Jones specifically addresses the cultural dynamics

involved with seeking help for problems.

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Mescaline is taken by humans, but animals will not self-administer it. Drugs and Brain Reinforcement Systems The most popular contemporary view of why humans self-administer potentially lethal drugs is that these chemicals activate the reinforcement system in the brain. This system is normally activated by natural reinforcers such as food, water, sex etc. Reinforcers are thought to increase the effect of dopamine at receptors in the mesolimbic system which originates in the ventral tegmental area and terminates in the nucleus accumbens. Crack cocaine is thought to cause a massive and rapid activation of dopamine receptors in this system. Crack users report that the effects are much more intense than those produced by powerful reinforcers such as ejaculation or orgasm. Reinforcers all share one physiological effect: They increase the release of dopamine DA in the nucleus accumbens. This effect can be produced by addictive drugs such as amphetamine, cocaine, opiates, nicotine, alcohol, PCP, and cannabis as well as natural reinforcers such as food, water and sexual contact White, ; Di Chiara, As an example of this effect of reinforcers, Phillips found that that DA is released from the nucleus accumbens when a rat presses a lever that delivers reinforcing brain stimulation to its ventral tegmental area VTA Phillips et al, Click on the blue underlined text to view three pathways in the brain reinforcement system: This dual-loop system is thought to be critical for reinforcement. The effects of opioid drugs heroin and morphine are less clear cut but Koob Trends in Pharmacologic Sciences, 13, p, suggests they stimulate opiate receptors on opioidergic neurons which in turn make synaptic connections with the mesocorticolimbic system thus opioid drugs modulate activity in the mesocorticolimbic system If the mesocorticolimbic system is damaged most reinforcing drugs lose their reinforcing effects. Images of drug paraphenalia increase metabolic activity revealed by PET scans in areas receiving innervation by the mesocorticolimbic system Grant et al cited in Carlson. This was accompanied by the addicts reporting feelings of drug craving. There may be increased D3 DA receptor sensitivity in these areas. Stress triggers the release of DA in the nucleus accumbens. Therefore stress may trigger drug-craving. What is the role of dopamine in reward? However this conventional view has been challenged by Dr. Artificially stimulating the ventral tegmental area at a regular or irregular rate released dopamine in the forebrain. Rats can be trained to electrically stimulate the ventral tegmental area. Rats were unable to learn to self-stimulate if the stimulation produced no dopamine release As predicted this self-stimulation is accompanied by the release of dopamine in the forebrain However this effect does not last. Therefore the release of dopamine may not be critical for reinforcement once the task is learned. Seminar discussion themes Read Robinson and Berridge Annual Reviews of Psychology, Vol 54, available online The World Health Organization WHO stress that drug dependence always includes "a compulsion to take the drug on a continuous or periodic basis". As we have seen the most popular contemporary view of why humans self-administer potentially lethal drugs is that these chemicals activate the reinforcement system in the brain. This mechanism may explain why some people initially take potentially addictive drugs, but there are several aspects of addiction that may not be explained by the theory. Robinson and Berridge point out that although a significant number of people take potentially addictive drugs at some time during their lives, relatively few become addicts. As one addict put it: Figure 1 from Robinson and Berridge As you read Robinson and Berridge consider the following questions: Explain the opponent process theory of drug addiction. What is more effective - a priming drug injection, or precipitated withdrawal - in producing relapse into drug taking behaviour? Is relapse after detoxification programs consistent with opponent process theory? Explain the incentive-sensitization theory of addiction. Can sensitization explain individual differences in drug addiction? Can sensitization explain relapse in detoxified drug addicts? Physiology of Behavior, Allyn and Bacon, Boston. New insights on the neural basis of brain reward and alcohol drinking. Available online Deneau et al. Psychopharmacologia Berlin 16, Drug and Alcohol Dependency, 38, Phillips et al, Annals of the New York Academy of Sciences, , Robinson and

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*Competing Perspectives on Drug Use: The Dutch Experience [G.F. van de Wijngaart] on blog.quintoapp.com *FREE* shipping on qualifying offers. Wijngaart (psychology, Utrecht U., Netherlands) explains the two conflicting approaches that have shaped Dutch drug policy.*

Theoretical Assumptions[edit] Assumptions are taken for granted statements about reality that theories draw upon as their foundation. Following are some of assumptions of modern conflict theory: Human interaction results in conflict. Conflict and change are normal and inevitable in society. Competition over scarce resources e. Competition rather than consensus is characteristic of human relationships. If everyone had the resources they needed, conflict would not exist. Inequalities in power and rewards are built into all social structures. Resources are scarce and groups will always compete over these resources. Inequality exists in varying degrees with people having different amounts of resources; hierarchies exist. Macro changes occur as a result of conflict between competing interests rather than through adaptation. It is often abrupt and revolutionary rather than evolutionary. Key Terms[edit] Below are some of the key terms employed in social conflict theories. The struggle between groups occupying different socioeconomic positions in the same society. These groups compete for control of economic, political and social resources. Class conflict can manifest as physical violence, propaganda e. They exploit the proletariat by paying them less than their work is worth. Propositions[edit] Propositions are relationships proposed between the conceptual components of a theory. Various proponents of conflict theory have delineated propositions based on the above assumptions. Below are some of these propositions. The proletariat and bourgeoisie compete for control over scant resources. Societies evolve out of war and conquest resulting in the development of nation-states and unequal systems with master and slave relationships. The Protestant Ethic promoted hard work, creating an environment in which a capitalistic struggle for resources would thrive. Conflict exists between people of lower social statuses and the "Power Elite" those at the top of the socioeconomic hierarchy resulting in a struggle for resources and unequal distribution of influence. Historically oppressed, women struggle to gain equal access to power and resources from men. In an effort to increase their wealth, more powerful countries spread around the world. Countries compete with each other for status, wealth, and technology. Countries are divided into core countries, semi-periphery countries, and periphery countries, which are, respectively, arranged in a social hierarchy with the core countries at the top and the periphery countries at the bottom. Core countries extract resources from the semi-periphery and periphery countries and use their technology to turn those resources into consumer goods, which they can then sell back to people in the peripheral countries. History of Conflict Theory[edit] The ideas that make up the foundations of conflict theory can be traced back to early philosophy. Han Fei Tzu - BC and other ancient Chinese philosophers taught that men are innately weak and lazy. This assumption leads to the obvious conclusion that the only way men can be controlled, then, is through punishment. Those who have the power to punish can control society, as the fear of the power of punishment keeps men in check. He believed that people were like herds of animals. Weaknesses lead man to form communities in which the strongest and bravest person became the leader. He believed societies change and transition into a monarchy and that monarchies are based on justice and legitimate authority. Monarchies have an obligation to keep peace in society. Tyranny is, however, self-limiting. Once it becomes unbearable, the elite in society will figure out ways to overthrow the monarchy. Society will be in support of these new leaders because they give more liberty and equality. This cycle will repeat itself because the new leader will take some of the liberty and sense of equality away from the people. Polybius believed the only way to stop this cycle is to form a government that combines the best elements from monarchies, aristocracies, and democracy, like the Roman government during his time. Many sociologists have contributed to the development of conflict theory, including Max Gluckman , John Rex , Lewis A. However, Karl Marx is often credited as being the father of conflict theory. Karl Heinrich Marx " was a German philosopher, sociologist, historian, political economist, political theorist and revolutionary socialist, who developed the socio-political theory of Marxism. His ideas have since played a significant role in both the development of social science

and also in the socialist political movement. He published various books during his lifetime, with the most notable being *The Communist Manifesto* and *Capital*, many of which were co-written with his friend, the fellow German revolutionary socialist Friedrich Engels. Karl Marx died a poor man but his work and ideas have influenced the modern world. Max Weber proposed that power, prestige and property also added to social conflict and that such conflict was found in all aspects of society. Wright Mills also contributed to modern conflict theory. According to Mills, one of the results of conflict between people with competing interests and resources is the creation of a social structure. However, control over the social structure is largely in the hands of the elite wealthy, who generally oppose the interests of the non-elite. *Social Stratification* [edit] As civilizations undergo change from agrarian, rural groups into industrialized, modern societies, a social hierarchy emerges that effectively creates distinct classes based on wealth, power and prestige. Conflict theory also asserts that modern society and the "Wealth and Power Inequality" [edit] While the United States is purportedly a nation that values principles of equality, egalitarianism, meritocracy, hard work, and the pursuit of the "American Dream," the U. This extreme inequality in the level of power and wealth that currently exist in the United States exemplifies the central themes of conflict theory, namely that there is a competition for power between classes. The implications of this large disparity in wealth between social classes in the United States includes many disadvantages for those in the lower classes, such as a lack of access to quality health care, increased risk of violent crime, fewer educational opportunities especially post-secondary education, and the absence of a social network to provide opportunities for upward mobility. Greek provides an excellent explanation of this phenomenon: Theft of a television might receive a longer sentence than stealing millions through illegal business practices. More specifically, "Conflict theory holds that there are higher numbers of chronic drug abusers found in lower social classes, disorganized neighborhoods. *A General Theory of Crime and Deviance*. Does Inequality Increase Productivity? Conference Papers -- American Sociological Association. Wealth, Income and Power. Reflections on Conflict Theory.

Chapter 5 : Module10H-Ethnicity, Culture and Alcohol

Neuroscientific approaches to drug addiction traditionally have been based on the premise that addiction is a process that results from brain changes that in turn result from chronic administration of drugs of abuse.

It is confined to research on addiction in its original meaning as putative enslavement to a substance or activity rather than merely deviant or disapproved activity more broadly. As will be seen, though, there is a ubiquitous and theoretically interesting tendency even among those who contend to be writing about addiction as such to slip into modes of analysis that effectively substitute questions regarding the social approval of an activity for questions concerning whether it is voluntary or involuntary. Hence, one purpose of this article is to explore whether, and how, this slippage might be avoided. Introduction In sociology, addiction has been approached from several distinct theoretical vantage points. Regrettably, the term has often been used interchangeably with other terms including deviant drug use, drug misuse, and drug abuse. Such imprecision results in a confusion of questions concerning the social approval of various sorts of drug use with questions concerning whether this use is voluntary. Much of the history of social policy concerning psychoactive drugs has been predicated, at least ostensibly, on the claim that these substances possess unusual powers over people and must be regulated to protect citizens from their own personal proclivities to succumb to addictive use. We are also poorly equipped to evaluate social research that either endorses or rejects this idea. If it is to have any meaning at all, the term addiction cannot be considered synonymous with terms denoting voluntary drug use. As will be seen, though, there is a ubiquitous and theoretically interesting tendency even among those who contend to be writing about addiction as such to slip into modes of analysis that effectively substitute questions regarding the social approval of drug use for questions concerning whether it is voluntary or involuntary. Hence, one purpose of this article is to explore whether, and how, this slippage might be avoided. The article is divided into five sections. The following section outlines and evaluates critically the seminal contributions of Alfred Lindesmith to the sociology of addiction. Next I address the work of major functionalists who have sought to theorize addiction. In the further section, I consider the efforts of theorists who have sought to subsume addiction into the rational choice model of social action more generally. Finally, I discuss the important contributions to the sociology of addiction made by social constructionists inspired by the work of people like Michel Foucault and Bruno Latour. I conclude with a brief synopsis of my own position. More than 70 years after its original publication, his theory remains the classic sociological theory of addiction Akers ; McAuliffe and Gordon ; Stephens ; Weinberg a, Lindesmith noted that users who acquired heroin on the street were often vulnerable to addictive patterns of use, but those who had been administered opiates in hospital settings were not so vulnerable. He explained this by suggesting that whereas both hospital and street users experience physiological withdrawal symptoms upon cessation of use, only street users become consciously aware of the fact that the source of their distress lies in their heroin deprivation. Lindesmith argued that by using drugs specifically to alleviate withdrawal, mere drug users were transformed into genuine drug addicts. Most fundamentally, his theory relies on an outdated division of human perception into: Moreover, Lindesmith also presumes that physiological withdrawal distress is a necessary pre-requisite for the onset of addictive behavior. His work reflects the wisdom of an era wherein it seemed sensible to speak of distinctions between hard drugs defined by the fact that they produce physiological withdrawal symptoms and soft drugs defined by the fact that they do not do so. But the era has now passed when people could speak confidently of a distinction between drugs that produce genuine, or physical, addictions and drugs that produce only a more nebulous psychological addiction. Crack cocaine is widely recognized as extremely addictive by clinical professionals and non-professionals alike but, oddly enough, it produces no gross physiological withdrawal symptoms Gawin Theories that trade on the distinction between genuine physical addiction and a less severe psychological addiction cannot remain consistent in their explanations of relapse. This theory is plainly residual in the sense that it pastes a new subconscious mechanism onto the original physiological withdrawal-plus-knowledge-of-withdrawal theorem. Moreover, it is not consistently supported by empirical data on opiate addiction cf. Robins , and affords no explanation of

relapse into the use of substances like nicotine or crack, which do not produce gross physiological withdrawal symptoms in the first place. Given the analogous tendency of former crack and nicotine addicts to say nothing of behavioral addictions like eating, gambling, and sex to relapse, we are well advised to look beyond the generalization of withdrawal distress to adequately understand this process. But in so departing, these theories also slipped from analyzing addiction as a loss of self-control into analyses of merely deviant drug use. According to Merton, addicts could be understood as individuals who believe in the propriety of both the cultural goals and the institutionalized procedures society affords for achieving those goals but who cannot produce the desired results by socially sanctioned means. Contra Merton, Cloward and Ohlin suggested addicts were not opposed to adopting illegitimate means of achieving legitimate cultural goals, but rather were incapable of using even these means for securing social rewards. Hence, addicts were double failures in the sense that they failed to achieve by either legitimate or illegitimate means. Heavy drug use was held to alienate putative addicts from both mainstream and delinquent sub-cultures thus further reducing opportunities for social success. Some functionalists moved beyond explanations of the distribution of addicts across social structural positions to consider the social psychological processes that motivated addictive patterns of alcohol or drug use. Under such conditions the agent, be it a person or social group, will be unable to make unequivocal recourse to a consistent normative code concerning the use of alcohol or drugs and will thus oscillate between approval and disapproval of a given pattern of drug or alcohol use. He wrote, In essence, then, our argument is that, given a societal model with only two levels, the individual and the whole system, and given an assumption that norms operate only to constrain individual deviant behavior, an explanation of the occurrence and continuation of deviance which is not completely individualistic is. Room, There are, however, several significant difficulties with this explanatory rubric. First, it begs many questions regarding exactly how, when, and why norms come into conflict and presumes that normative conflict is necessarily a source of stress for those who do experience it. Secondly, it uncritically assumes that human behavior is somehow directly determined by social norms, a position that has been cast in considerable doubt cf. Bourdieu ; Garfinkel ; Wittgenstein Furthermore, even if it is allowed that under certain clearly specified conditions normative conflict does produce stress, we are still left to explain why this stress, in its turn, produces chronically deviant, let alone involuntary, behavior. Because existing normative ambivalence theories afford us no guidance with respect to these questions, I agree with Room when he suggests a healthy skepticism regarding their value as explanations of addiction. According to functionalists, apparently addictive behavior patterns are best regarded as eminently rational, if painful and socially notorious, adaptations to social structural conditions. Functionalist approaches tended to stereotype addicts as necessarily socially disadvantaged and to sometimes confuse the trappings of poverty with the trappings of addiction. Moreover, they remained conspicuously silent on the question of whether addictive behavior ought to be understood as involuntary or merely socially disapproved, largely forsaking attention to the former in favor of the later. But they did have the virtue of freeing sociological research from the presumption of a brute biological basis for addiction and of allowing sociologists to entertain the possibility that people might experience drug problems simply as a result of how they had learned to use these substances to cope with the social structural circumstances of their lives. Noting that modern societies were much more fragmented and conflicted than functionalists had usually allowed, these researchers advocated an agnostic moral regard for putatively dysfunctional or deviant behavior and an effort to empathize with those labeled deviant. No longer was it assumed that behavior reviled by the mainstream was necessarily problematic for those who themselves engaged in the behavior. Nor was it any longer assumed that the social mechanisms according to which these behaviors were produced and sustained need reflect a functional breakdown of either the individual or his or her society cf. Becker ; Preble and Casey ; Sutter Bourgois and Schonberg ; Finestone ; Johnson ; Rosenbaum ; Rubington, the social settings of drug activity cf. Sutter ; Wiseman, the ritual practices attendant on drug use in natural settings cf. Denzin ; Lindesmith ; Ray These studies form the tip of an enormous iceberg of naturalistic investigations of drug use and drug users that have vastly enriched our understanding of the meanings attendant on drugs and drug experiences for those involved in these worlds. However, so concerned were these researchers to avoid the appearance of moralism, they often overlooked the fact that the loss of

self-control over drug use is often taken seriously by drug users themselves and is not necessarily imposed from without by official agencies of social control. Indeed, only a small fraction of these studies actually speak explicitly to the nature of addiction itself. A closer look at an exemplary study will demonstrate the point. Ray is the most widely cited theoretical statement of how relapse can be understood from a symbolic interactionist vantage point. Ray concludes his classic essay, "socially disjunctive experiences bring about a questioning of the value of an abstainer identity and promote reflections in which addict and non-addict identities are compared. The relapser is an individual who rationally evaluates the pros and cons of being an addict versus being an abstainer before deciding to relapse. But does this sound like addiction? If Ray is correct, what sense is there in thinking that addiction is involuntary, that addicts are in any way disabled by their addictions, or require any kind of therapeutic assistance whatsoever? The main difficulty is that Ray provides no place for the visceral components of relapse—the embodied and emotional urges a great many people report experiencing, to which they themselves very often assign primary responsibility for their relapses, and which constitute the primary justification for therapeutic assistance. He is thus the only symbolic interactionist who has tried to move beyond the disembodied cognitivism, and its attendant implications of voluntarism, that uniformly mark other symbolic interactionist contributions to our theoretical understanding of addiction. While I would contend this appreciation of the role of emotion in the addiction process is a significant advance over previous efforts, it does not succeed in fully overcoming the voluntarism characteristic of earlier symbolic interactionist approaches. This interpretive work is construed not just as a possible component, but as an analytically necessary component of the relapse process. It thereby fails to explain how people could ever experience relapse not as a deliberate decision to resume drug use but as a steadfast commitment to a non-addict identity and lifestyle that is painfully and persistently thwarted by powerful visceral compulsions to use. Rational choice theories of addiction I have argued that neither functionalist nor symbolic interactionist theorists have managed to avoid the implication that addictive behavior reflects a conscious, deliberate, self-governed, quasi-rational, and, hence, voluntary choice to use drugs. Some economists and social psychologists actively embrace this position. While rational choice theory has contributed very few genuinely new insights into the mechanisms governing addicted behavior and has been criticized both for its rigid formalism and inconsistency with the empirical facts (Rojeberg ; West), it has nonetheless served to clarify the argument that addiction manifests nothing other than the cost-benefit calculations of addicts. Orphanides and Zervos seek to remedy this consequence by denying the addicted actor is fully aware of the consequences of embarking upon this path. While introducing the possibility of learning, regret, and inadvertently falling into addiction, this is all predicated on the initial ignorance of the actor as to the outcome of their initiating a potentially addictive course of behavior rather than inconsistent preferences or a failure of rationality. Others have suggested that the assumption of consistent preferences cannot be sustained in the case of addiction. Essentially, this means that we should think of human actors not as fully future oriented cost-benefit analysts but as often vulnerable to temptations against their better judgments. The greater the prospect of immediate reward and the greater the expected intensity of that reward, the harder we find it to remain attentive to our longer term plans. This approach forsakes the orthodox rational choice model, recasting cost-benefit calculation so as to better accommodate the fact that costs and benefits are often valued very differently depending on their perceived imminence. Others associated with the choice theoretic tradition have sought to better attune considerations of cost-benefit calculation to both its external environmental cue and internal visceral impulse sensitivity (cf. Most). Most now agree the argument that addictive behavior is consistent with the axioms of orthodox rational choice theory is not very credible. While modifications to the orthodox theory have marginally increased the credibility of choice theoretic arguments, even modified arguments remain tenuously grounded in empirical data and have been criticized for merely providing formal descriptions of idealized narratives of addiction rather than explaining actual empirical instances of it (Rojeberg). While it has offered little in the way of positive insight, by explicitly formalizing the thesis that addictive behavior is the product of rational and voluntary cost-benefit calculations, this tradition has served to draw into relief the stark difficulties that remain more tacit in other social scientific traditions that have construed addictive behavior as more or less deliberate and self-governed. In my view, it is in this

light that the broader analytic benefits of this literature are most properly construed. Social constructionist contributions In one sense, all social scientific contributions to our understanding of addiction are social constructionist insofar as they seek to identify social forces that influence the emergence and assessment of behavior deemed addictive. In this section, however, I confine my attention to studies that seek, more radically, to argue that addiction is not only influenced by social factors but is also fundamentally a culture-bound phenomenon – that it is unintelligible outside the nexus of cultural practices and beliefs within which it is found cf. Acker ; Campbell ; Gomart Other social constructionists have looked at the role played by the criminal justice system in giving shape to not only the contemporary status of addiction as a concept but also the lives of those identified as addicts cf. These studies highlight the importance of acknowledging that the concept of addiction has very often been used to legitimate the stigmatization, marginalization, and persecution of drug users whether or not they have lost control of their drug use. However, they rarely if ever speak to the question of whether some drug users sometimes do in fact lose control of their drug use, let alone how this might be best understood sociologically. Based on one of the most incisive and richly nuanced studies ever conducted with cocaine users and quitters, Waldorf et al. People who have something to lose tend to mitigate the damage drug use introduces into their lives better than those who do not. As crucial as this insight remains, it begs the question of whether addiction ought to be construed as simple bad judgment fostered by difficult circumstances or as a kind of syndrome, something seemingly more alien to us than our own faculties of judgment and by which it is possible to feel genuinely afflicted. Therefore, to the extent we wish to theorize how a learned pattern of behavior can emerge into a syndrome over which we feel little if any direct control and by which we can experience affliction , we need a theoretical framework that does not necessarily reduce all learned behavior to a singular faculty of judgment, subjectivity or self. I would argue that just such a framework is provided by the post-humanist tradition of social research Weinberg The humanist tradition pervades Western thought as it pertains to politics, morality, law, art, and is very clearly evident throughout the sociological research on addiction that I have considered here. Adherents to the humanist tradition embrace an axiomatic commitment to the principle that the irreducible atoms of social life must inevitably consist only of human subjects – integrated, intentional, deliberative agents possessing interests and investments in cultural frameworks that endow their worlds with meaning, value, and distinctive rationalities. Post-humanists worry that, among other things, this imagery reifies human nature and neglects the extent to which scientific studies of primates, cyborg technologies, and artificial intelligence modify what it means to be human and, indeed, encourage the breakdown of decisive conceptual boundaries between the human and the non-human cf. Haraway ; Hayles

Chapter 6 : Govert Frank Van De Wijngaart (Author of Competing Perspectives on Drug Use)

The laws led to (1) increased price of narcotic drugs, (2) a heroin "industry," (3) corruption of the law enforcement system, and (4) major health problems involving parenteral drug use.