Editorial

Sociological approaches to the study of drug use and policy

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Sociology has contributed much to the study of drug use and dependence, as numerous reviews can attest (e.g. Adrian, 2003; Allen, 2007; Bergeron, 2009; Faupel, Horowitz, & Weaver, 2004; Rhodes, 2009; Weinberg, 2011). However, the study of drug policy has often been left to economists, with assistance from operational researchers, public policy specialists, lawyers and psychologists (e.g. Boyum & Reuter, 2005; Caulkins, Tragler, & Wallner, 2009; Donohue, Ewing, & Peloquin, 2011; Kleiman, 2009; MacCoun & Reuter, 2001). As Peter Reuter recently stated, while economics has provided useful contributions to the analysis of the drug trade seen as a market, economists have too often failed to question or verify the – often grand – assumptions that they tend to bring to the study of these markets (Reuter, 2011).

Readers will be familiar with the standard critique of the classical *homo economicus* who seeks only to maximise pleasure and minimise pain, who is miraculously perfectly informed and whose preferences add up smoothly with those of others to create optimal equlibria of social welfare. They may well be aware that this model is at odds with social and economic reality: that people do not always act in their own best interests; that they can be ignorant and irrational in their use of information; and that this irrationality can be multiplied when it is shared with others (this is to say that they may have lived through the bank crashes of 2008 with their eyes open). Defenders of economics will retort that the critique of *homo economicus* is hopelessly outdated and that the dismal science has updated itself through the influx of experiments that inform game theory and behavioural economics. Indeed, these advances have borne fruit in interesting approaches, such as those applied to deterrence and sanctioning by Mark Kleiman (2009).

However, even though economists may have updated their assumptions on individuals, they are still (in general) stuck with a vision of the context in which these humans operate that is as out of touch with social reality as the idea of *homo economicus* is with humanity. Economic models play out in flat, hypothetical social worlds where *ceteris paribus* rules. See, for example, the monochrome checkers board inhabited by Kleiman's theoretical probationers. This is not a world where people are striving to create social reality through bending divergent environmental resources to their felt needs and embodied expectations. It is rather a world in which people respond directly to stimuli that are applied to them as to units in a gigantic calculator.

Sociology provides a broader - although often less well specified - approach to these issues. It recognises that people choose their behaviours, not just in response to external stimuli, but in ways that enable them to create their own meaningful experience of life (Giddens, 1979). It draws attention to the range of resources in people's lives that they draw on in creating these experiences. It shows how people can share common ways of making choices, but that the outcomes of these choice processes can be fundamentally different according to the features of class, gender, race and the various forms of capital to which they have access. And sociology is also fundamentally questioning of the origins of the environments within which these choices are made. While economically informed analyses tend to reify the current legal framework of prohibition, sociologists must ask how this framework has come to be. What are its conditions of existence, and by which mechanisms is it reproduced?

These are the kinds of questions that were asked at a special workshop of the International Society of the Study of Drug Policy in Santa Monica in March 2010. The papers presented there help shape this special issue (Seddon, 2011; Measham, Williams & Aldridge, 2011; Nasir, Rosenthal and Moore, 2011; vander Laenan, 2011; MacGregor & Thickett, 2011). These are supplemented by other articles (Lunnay, 2011; Järvinen and Fynbo, 2011; Rhodes et al., 2011; Mckenna, 2011; Chen, 2011; Fraser & Moore, 2011) and editorials (Duff, 2011; Keane, 2011; Race, 2011; Hammersley, 2011). Taken together, this special issue aims to promote discussion and advancement of the contribution of sociological theory and methods to the study of drug use as well as the development and effects of drug policies. This editorial introduction aims to discuss sociological concepts and methods that have the potential to contribute to the study of drug policy. The articles which follow will then allow readers to judge whether this potential is being fulfilled.

Structure, agency and drug policy: the call for methodological structuralism

Of course, there are multiple versions of sociological theory that could contribute to the study of drug policy (as exemplified in the papers presented in this issue). I will suggest in this brief introduction that the key contribution that is common to all of them follows the emphasis of Émile Durkheim on the necessity of providing social explanations for the existence of patterned regularities in societies. Just as he found that it would be impossible to explain patterns of suicide (or its regulation) without attending to the factors that operate at the level of the group rather than the individual, so sociologists can see that neither drug use nor its prohibition can be analytically divorced from their social settings. Durkheim was notoriously prone to providing 'oversocialised' (Wrong, 1961) explanations which neglected the role of individual agency in creating these social patterns, just as economists have provided 'undersocialised' (Granovetter, 1992) analyses of drug policy which have assumed that we are impervious to the influence of social relations that operate within markets and other institutions. The work of Pierre Bourdieu encompasses a consistent attempt to overcome such antinomies, as suggested by Loïc Wacquant's paraphrase of his approach:

> Cumulative exposure to certain social conditions instils in individuals an ensemble of durable and transposable dispositions that internalize the necessities of the extant social environment, inscribing inside the organism the patterned inertia and constraints of external reality… An adequate science of

society must encompass both objective regularities and the process of internalization of objectivity whereby the transindividual, unconscious principles of (di)vision that agents engage in their practice are constituted. (Wacquant, 1992: 13)

In *The Logic of Practice* (1990) and other works, Bourdieu encourages the use of 'methodological structuralism' which - though it makes no assumptions about the ontological nature of social reality - posits that the best approach for understanding social action and institutions is to develop logical models that account for the pattern of observed facts (Lizardo, 2010). He argues that people learn about how to be and how to act within the limitations that their environment sets for them. We can create sociological models that help us to understand, explain and even predict these patterned actions. These models are distinctively sociological because they refer to the influence on action of the web of social relations within which people act[1]. Bourdieu provides us with a way to think about the social conditions that both drug policy makers and drug users face and then reproduce in their turn. What dispositions do these conditions lead them to internalise? What principles of vision and division do they then use when they come to perceive and act on the social world?

In his sociological practice, Bourdieu also emphasised the need to examine the actions of elites and hierarchies in recreating the social world which shapes and constrains us all. His gaze fell on elite academics (Bourdieu, 1996) and (via Norbert Elias) on members of the court of the French kings of the *ancien régime* (Bourdieu, 1998: 27). Our gaze could equally fall on the research bodies that create the drug use statistics and concepts of addiction that inform current drug policy, or on the entourages of the various national and international drug 'tsars' in the current regime of drug control. Indeed, the creation of drug laws themselves could be seen, in Habermasian terms, as an attempt to resolve crises in political legitimacy that occur when people's consumption preferences run counter to legislators' wishes and interests.

Jürgen Habermas (1996) differentiated administrative from communicative power, with the former expressing power through the threat of sanctions and the latter through deliberative consensus. Strategic use of administrative power (such as the creation of selectively prohibitive drug laws) leads to a "steering trilemma" in which the administration's instructions are (firstly) not obeyed, (secondly) lead to further disorganisation and (thirdly) these instructions overstretch the capacity of the legal system and undermine normative foundations of the political system (Ibid: 446). We see just such a trilemma – with its attendant threat to the legitimacy of state power – in people's wilful non-compliance with laws that ban them from possessing and trading in illicit substances, and the consequent overloading of the criminal justice system in countries which aggressively enforce these laws (e.g. the USA and Russia). In these circumstances, social actors who have privileged access to the process of law making seek to regain their legitimacy by creating laws which putatively represent norms that would be agreed through free deliberation, even though they often do not rest on the actual practice of such disinterested communicative action. So the crises that are an inevitable consequence of the instrumental operation of capitalist markets

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[1] They are therefore fundamentally different to the 'pure' form of methodologically individualistic economic models, in which – according to Friedman (1966) – it does not matter if the assumptions do not hold, as long as the model is sufficiently predictive. The problem is, of course, that many economic models fail to predict behaviour precisely because their assumptions are unrealistic.

are regulated, in part, through the use of laws (of which drug laws are a subset) that seek to justify the exercise of administrative power. This is an example of the kind of sociological model that Bourdieu called for to explain the observable facts; in this case, the facts of drug policy. It offers us a way to explore not only the development and trajectory of national and international drug policies, but also predicts the existence of the disorganising 'unintended consequences' that they have been observed to have, even by their most powerful proponents (Costa, 2008).

It is worth inserting a short discussion here of the concept of unintended consequences as they are so often observed and discussed in drug policy. Such outcomes have long been a subject of sociological enquiry. Robert Merton (1936) was not the first to observe that unforeseen consequences are not necessarily unwelcome for some people, or that social action is not always aimed at a clearly foreseen goal. Anthony Giddens (1984) used Thomas Schelling's[2] (1978) model of ethnic residential segregation to show how social conditions can occur - when they are not consciously chosen and pursued - as a result of "an aggregate of acts… each of which is intentionally carried out [e.g. people moving to neighbourhoods where they are not in the minority]. But the eventual outcome is neither intended nor desired by anyone. It is … everyone's doing and no one's" (Ibid: 11). Giddens' theory of structuration suggests that "unintended consequences may systematically feed back to be the unacknowledged conditions of further acts" (Ibid: 8). In contemporary drug policy, we see a large variety of outcomes that were not explicitly intended by drug policy makers, but persist and continue to feed back into the actions of people who engage in policy debates. A well-known contemporary example is the ethnic disproportion in drug law enforcement. It is unlikely that, if put to the vote, US and British citizens would consciously choose to over-incarcerate people of African heritage, but this has been the result of a combination of laws and social policies that have been chosen by the people with the power to influence legislation and public expenditure. The fact that this over-incarceration damages both the social status of black people and their ability to take part in policy debates (especially in those US states where drug law offenders are automatically disenfranchised) feeds back into policies that may further exacerbate inequality, as well as inspire social movements of resistance to it (Stevens, 2011a).

Reification, ideology and the inequality of drug harms

The work of Bourdieu. Habermas and Giddens, as that of many other sociologists, calls into question the reification of contemporary social institutions, such as drug laws and policies. Examples of such reification include important books by Griffith Edwards (2004) and by three leading researchers on US drug policy (Kleiman, Caulkins, & Hawken, 2011). These books excellently outline both the failure of current drug policies to achieve their stated aims of eliminating illicit drug use and

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[2] The use of Schelling's model of micromotives by Giddens and other sociologists (e.g. Hedström & Bearman, 2009) shows that individualistic game theory does have something to contribute to sociological understandings. But it is important to note that the set of problems that are amenable to analysis through the application of such "simplistic complexity" does not exhaust the range of interesting questions in the analysis of drug policy. It cannot take account of causes that emerge in the interaction between systems and sub-systems. Such macro-level interactions require attention to the trajectory of cases and are more amenable to analysis through qualitative comparative analysis (Byrne, 2005), as recently exemplified by Federico Varese's (2011) study of the transplantation of organised crime groups between countries

some of the harms which these policies produce. But they baulk at taking the next logical step of recommending experimentation with new forms of regulation (see Hall, Fischer, Lenton, Reuter, & Room, 2011). They both argue that this would represent a dangerous step into the unknown. This seems to accept the current international framework of prohibition as a given fact which requires less explanation and justification than any possible alternative would It ignores the configuration of sectional professional and national interests which led to the initial creation of prohibition, as has so usefully been documented by social and medical historians such as Virginia Berridge (1999), David Courtwright (2001) and the late David Musto (1999).

In the presentation of current social arrangements as immutable and inevitable, non-sociological analyses show how drug policy and its representations can operate as ideology. This key sociological concept - which has been declared dead so often that its obituaries almost outweigh its expositions - still offers a powerful conceptual lens through which to view the creation and implementation of drug policy. We see that harms – both of drug use and of drug control – are distributed unequally within and between nations. In the affluent countries of the global North, it is the poor and ethnic minorities who suffer most from drug-related morbidity, mortality, arrest and imprisonment (Alexander, 2010; Singer, 2008; Stevens, 2011a). These harms are significant, but far more poverty-stricken people suffer in the drug producing and transit countries of the global South: from displacement, destitution and armed conflict in Colombia, Afghanistan and Burma/Myanmar; from the destabilisation of fragile states in West Africa; from the spectacularly brutal drug wars at Mexico's northern border; and from a widespread lack of opiate analgesics to patients that need them (Human Rights Watch, 2009).

According to John Thompson's (1990) formulation of the concept, ideology involves the production of symbolic forms which serve to sustain systematically asymmetrical relations of power. The deep and enduring inequalities referred to here are not only reproduced by drug policy, but are (in line with both Habermas' ideas on steering trilemmas and Giddens' ideas on feedback from unintended consequences) then taken by some powerful drug policy makers as justifications for implementing even more disproportionate measures which serve to further deepen the inequality of drug related harms. A few examples out of the many possible illustrations include the merging of criminal justice and treatment systems in both the USA and the UK (Bourgois & Schonberg, 2009; Stevens, 2007), the militarised expansion of Plan Colombia (Stokes, 2005) and the immiseration of farmers and an epidemic of HIV in Burma/Myanmar (Kramer, Jelsma, & Blickman, 2009). These policies do not just have effects on the scale and distribution of drug use, production and harms. They also reinforce certain ways of thinking about drug users and producers. They constitute such people as a threat to the healthy social body and so serve to justify other policies which seek to exclude and control them.

Sociological methods and drug policy

These brief applications of the concepts of methodological structuralism, structuration and ideology suggest that sociological theory offers useful, broad conceptual frameworks within which to place the study of drug policy. But these frameworks need data and analysis in order to apply them to the actual practice of drug policy.

Here again, we can make a distinction between the methods of 'pure' positivist economics and the practice of sociology. Even the most sophisticated and interesting econometric drug policy models (e.g. Dray et al., 2011) tend to abstract from individuals to create homogeneous multitudes of agents who respond to stimuli according to probabilistic rules that are set for them within the model. These rules are sometimes derived as generalisations from behavioural surveys that are of questionable value in understanding people's actions and motivations in performing illicit, hidden and stigmatised behaviours (Young, 2004). If - again following Giddens - we refuse to conceptualise humans as merely obeying probabilistic rules, but rather see them as agents who are capable of bending any rules to their own needs (whether unconscious or explicit), then we need to make space for the close study of human behaviour *in situ*.

In addition to the survey, sociologists have developed (often by appropriation from other fields, with anthropology being a primary source) a variety of methods by which to examine how and why people behave as they do. It is perhaps the commitment to understanding people's actions from their own point of view that most distinguishes sociological from other methods for examining drug policy. The most straightforward methods that are used to create such *Verstehen* involve simply asking people to describe and account for their actions, most often through forms of structured or semi-structured interview. But the problems of this approach are numerous. They include the tendency for interviewees to create second order accounts which conform to the expectations of the interviewer and especially to the implicit belief that actions must always have 'reasoned reasons'. It is for this reason that phenomenological sociologists have explained that they seek rather to understand social action through 'first order', spontaneous accounts of lived experience. Such accounts do not demand that interviewees account for themselves, but rather take seriously the ways in which research subjects communicate their own meanings in their own natural expressions (Allen, 2007). The search becomes one for methods in which such natural experiences and meanings can be gathered. The various techniques of ethnography have provided a wealth of such data, and new techniques involving, for example, visual and participatory methods are being developed (Dowmunt, Dunford, & van Hemert, 2007; Ferrell, Hayward, & Young, 2008; Pink, 2007). This is not to say that the more traditional interview has been abandoned. But it has become common for sociologists to acknowledge and interpret the co-production of interview data in the interaction between researcher and subject (Holstein & Gubrium, 1995), and to pay attention to the narratives (whether fictional or not) that people create in interviews (Presser, 2009).

All these techniques are applicable to the study of drug policy makers, just as they are to the study of drug users and traffickers. If drug use and dealing is often hidden from the researchers' gaze, then so too is the process of drug policy making. This often takes place behind closed doors among people who occupy the 'higher circles' (Mills, 1956) of society. They are well able to restrict and resist the activities of researchers. They may not be inclined to award funding to research that questions their activities, rather than those of the usual subjects of addiction research. Nevertheless, there have been useful direct studies of the actions of drug policy makers (e.g. Bergeron, 2011; Chatwin, 2011; Kübler, 2001; MacGregor, 2011; Monaghan, 2008; Ritter, 2009; Stevens, 2011b; Valentine, 2009). They have shown that methods of interviewing,

documentary analysis and participant observation can provide valuable insights into the self-understandings of these policy makers and their actions.

There is a danger in emphasising the value of 'studying upwards' in drug policy that we forget that drug policy is not just the content of decisions and documents that are produced by politicians and bureaucrats. Drug policy also consists of the combination of individual interactions that take place within the framework provided by these instruments of power. Sociologists working in the afterglow of Michel Foucault's revelatory work on sexuality, imprisonment and mental health have emphasised that power is not just a force that travels from the top downwards. It runs through us and is continually produced and reproduced in our bodily practices and utterances. It is therefore necessary to study drug policy in all the contexts that it is produced and practised; in the halls of government, in the rooms of residential and other institutions of treatment and correction and in the slums, skyscrapers and streets where drugs are traded and used (see, for example, Bourgois, 2000).

Conclusion

The spread of articles in this issue across countries, locales, research methods, samples and theoretical backgrounds demonstrates some of the multiple ways in which sociology can be brought to bear on issues of drug policy and use. They highlight the crucial influence of social contexts on the elaboration of drug policies and their effects. They reveal some of the interplay of structure and agency and the potential of sociological models to help us characterise and understand such complex interactions. They show how drug policies are the outcomes of specific conjunctures of political, socio-economic and cultural factors that are spatially and temporally specific and are open to change through social action. It is hoped that they demonstrate that sociology has a place - alongside economics and various other approaches to policy analysis - in the development of knowledge about drug policies and so in the effort to improve them.

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