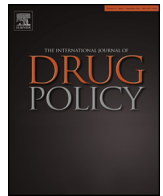




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Research paper

‘Enjoying the kick’: Locating pleasure within the drug consumption room

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ABSTRACT

Background: Harm reduction policy and praxis has long struggled to accommodate the pleasures of alcohol and other drug use. Whilst scholars have consistently highlighted this struggle, how pleasure might come to practically inform the design and delivery of harm reduction policies and programs remains less clear. The present paper seeks to move beyond conceptual critiques of harm reduction's 'pleasure oversight' to more focused empirical analysis of how flows of pleasure emerge, circulate and, importantly, may be reoriented in the course of harm reduction practice.

Methods: We ground our analysis in the context of detailed ethnographic research in a drug consumption room in Frankfurt, Germany. Drawing on recent strands of post-humanist thought, the paper deploys the concept of the 'consumption event' to uncover the manner in which these facilities mediate the practice and embodied experience of drug use and incite or limit bodily potentials for intoxication and pleasure. **Results:** Through the analysis, we mapped a diversity of pleasures as they emerged and circulated through events of consumption at the consumption room. Beyond the pleasurable intensities of intoxication's kick, these pleasures were expressed in a range of novel capacities, practices and drug using bodies. In each instance, pleasure could not be reduced to a simple, linear product of drug use. Rather, it arose for our participants through distinctive social and affective transformations enabled through events of consumption at the consumption room and the generative force of actors and associations of which these events were composed.

Conclusion: Our research suggests that the drug consumption room serves as a conduit through which its clients can potentially enact more pleasurable, productive and positive relations to both themselves and their drug use. Acknowledging the centrality of pleasure to client engagement with these facilities, the paper concludes by drawing out the implications of these findings for the design and delivery of consumption room services.

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Introduction

Harm reduction policy and praxis has long struggled to accommodate the pleasures of alcohol and other drug (AOD) use. Over the course of three decades, this struggle has been subject to continued critique (Duff, 2004, 2008; Moore, 2008; Mugford, 1993). Scholars have consistently exposed harm reduction's restrictive focus on the dangers and risks of AOD use and the routine dismissal of its subjective benefits (Keane, 2003). In response, a body of literature has sought to redress harm reduction's 'pleasure oversight' (Schnuer, 2013). This work has been instrumental in documenting pleasure's significance as both

motivator and mediator of AOD use and its centrality to diverse drug cultures (see Fitzgerald, 1998; Harrison, Kelly, Lindsay, Advocat, & Hickey, 2011; MacLean, 2008; Pennay, 2012). By continuing to ignore the significance of pleasure, critics have argued that harm reduction runs the risk of misunderstanding the variety and complexity of AOD use, hindering its capacity to respond to this use in more effective and innovative ways (Duff, 2008; Farrugia, 2014).

Whilst scholars have mainly examined how the pleasures associated with AOD use might be conceptualised and empirically assessed, how this interest in pleasure might come to practically inform the design and delivery of harm reduction policies and programs remains less clear. This may partly explain harm reduction's ongoing eschewal of pleasure, despite ample evidence to suggest its relevance and potential for program innovation. Reflecting on the situation nearly a decade ago, Race (2008)

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cautioned against the ‘straightforward voicing’ of pleasure’s absence, suggesting that we should also consider what is needed to ‘activate’ pleasure across harm reduction praxis. Given periodic interest in the problem of AOD pleasures, it is perhaps surprising that Race’s suggestion has met with so little action in the intervening years. So how exactly might pleasure be put to work in and for harm reduction? How might we begin to formulate a mode of harm reduction more responsive to pleasures and what would this harm reduction practice look like? The present paper begins to respond to these questions by two related lines of inquiry. Firstly, we challenge existing ways of understanding and researching pleasure by way of a critique of the drug using subject of pleasure and harm reduction’s role in shaping this subject. We argue for the need to subvert harm reduction’s adherence to neoliberal modes of subjectivity and knowledge practices (see Moore & Fraser, 2006), before turning to recent strands of post-humanist thinking for more productive alternatives. Secondly, we ground this theoretical analysis in the context of detailed ethnographic research in a drug consumption room in Frankfurt, Germany. Our purpose with this second line of inquiry is to move from conceptual critiques of harm reduction’s ‘pleasure oversight’ to a more focused empirical analysis of how flows of pleasure emerge and circulate and, more importantly, may be reoriented in the course of harm reduction practice. A key concern here is to identify new ways of accommodating drug pleasures in the design and delivery of novel harm reduction efforts.

The subject of harm reduction and the erasure of pleasure

As a number of critical AOD scholars have observed, the discursive deployment of harm reduction relies upon a very particular construction of the drug using subject (Moore, 2008; Moore & Fraser, 2006; O’Malley & Valverde, 2004). This is a subject conceived through neoliberal ideals of rationality, autonomy and prudence (Moore & Fraser, 2006). Within this framework, the subject of harm reduction is cast as “a health-conscious citizen capable of rational decision-making, self-determination, self-regulation and risk management” (Moore, 2008, p. 355). In appealing to this subject, harm reduction draws on the ostensibly objective traditions of epidemiology and biomedicine to help define and advocate specific forms of ‘healthy’ and ‘normal’ consumption (Moore, 2008; Race, 2008). Harm reduction’s rational actor is expected to embrace these dictates as they encounter, and instinctively seek to reduce, the implicit ‘harms’ of drug use (Duff, 2004).

Whilst this mode of subjectivity can be experienced as empowering for some, it has been argued that it might also restrict harm reduction’s capacity to consider pleasure (Moore, 2008). By invoking and responding to the neoliberal subject, harm reduction implicitly endorses the value of good health and the ‘inherent riskiness’ of drug use (Duff, 2008). This approach reinforces a logic of risk and risk avoidance which, when channelled through the discourse of harm reduction, is presumed to guide safe and appropriate drug behaviours (Duff, 2008). Pleasure does not fit readily within this frame, potentially disrupting harm reduction’s notion of the rational actor and its apparent responsibility and propensity for health and risk-aversion (Moore, 2008). As a result, understandings of pleasure have been sidelined in favour of normative themes of harm, risk, and negativity, which are considered the only viable and appropriate means of directing the rational actor (Farrugia, 2014; Taylor, 2016). The dominance of these themes partially explains the concomitant devaluation of drug pleasures as a legitimate field of knowledge in contemporary AOD research (Moore, 2008).

It should be noted, however, that pleasure is not completely absent from contemporary discussions of harm reduction; it is

instead reconstituted in terms of the rational and disciplined moderation of consumption of certain substances (O’Malley & Valverde, 2004). Moderation and self-control may accordingly be understood as the only appropriate or legitimate source of and path to drug related pleasures (Bunton & Coveney, 2011; O’Malley & Valverde, 2004). Those pleasures that fall outside of or in excess of this model, such as the physical or carnal pleasures of intoxication, are associated with irrationality, over-indulgence and ill-health (Bunton & Coveney, 2011; Keane, 2009). In short, these ‘excessive’ pleasures are converted into potential harms with no redeeming qualities (Keane, 2009).

An inability to conceive of and study drug use, the subject and pleasure in more heterogeneous and ontologically open ways arguably leaves harm reduction constrained in its capacity to observe the diversity of motivations, relations and affective states that shape the subject’s agency and engagement with AOD use. Obscured are the varied ways in which pleasures can be (or are) harnessed to make alternative forms of safety, well-being and harm reduction possible (Farrugia, 2014; Race, 2008). Invested in the neoliberal subject of reason, choice and rationality, harm reduction stubbornly clings to a research culture which prioritises the exploration and endorsement of normative notions of risk and harm, whilst devaluing those studies which seek to develop more inclusive and affirmative research agendas (Moore, 2008; Taylor, 2016). This reductionist approach is powerfully illustrated through the intervention of the drug consumption room, a site which is thus far bereft of sustained consideration of drug-related pleasures. As we aim to demonstrate, however, the drug consumption room also represents a particularly productive site from which to explore alternative ontologies of pleasure, and potentially amend, the (dis)connections between pleasure, risk and harm reduction.

Consumption rooms, harm reduction and pleasure

As innovative ‘safer environment interventions’, drug consumption rooms offer supervised, hygienic and low-risk conditions for the consumption of pre-obtained drugs (Rhodes et al., 2006). An expressed logic of ‘risk reduction’ underpins the aims, expectations and practices of these facilities (Fischer, Turnbull, Poland, & Haydon, 2004). Reflecting this logic, consumption room services are commonly promoted and sustained for their potential to (cost-effectively) promote less risky forms of injection practices, connect ‘high-risk’ drug users with health and social-services, decrease overdose rates and reduce the public disorder and nuisance associated with open drug use (EMCDDA, 2016; Potier, Lapr  v  te, Dubois-Arber, Cottencin, & Rolland, 2014). As Fischer et al. (2004) contend, this enterprise relies upon (and seeks to inculcate) harm reduction’s rational subject who, when presented with the progressive possibilities of the consumption room, is expected to enthusiastically make use of the facility to reduce the risk they pose to themselves and others.

This neoliberal rationality extends to the scientists and activists who advocate for drug consumption room services (Elliot, 2014). Overwhelmingly, the forms of knowledge that appear to inform and justify these facilities stem from quantitative assessments of risk and harm. Scholars have, for example, demonstrated the consumption room’s capacity to reduce overdose mortality (Marshall, Milloy, Wood, Montaner, & Kerr, 2011), prevent HIV infections (Andresen & Boyd, 2010; Pinkerton, 2011), increase the use of sterile injection materials (Stoltz et al., 2007), and reduce syringe sharing (Bravo et al., 2009; Kerr, Tyndall, Li, Montaner, & Wood, 2005). Whilst this research has undoubtedly played a key role in promoting the implementation and expansion of consumption rooms globally, our concern relates to the knowledges and opportunities left out of this analysis.

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