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Introduction: From Criminalization to Informed Use

Harm reduction programs emerged out of the need for pragmatic strategies to minimize the risk of HIV transmission among people who inject drugs and evidence of successful needle exchange programs in the Netherlands, the United Kingdom, and Australia in the 1980s (Erickson, Riley, Cheung, & O'Hare, 1997; although see Seddon, 2010, pp. 86–88, for a discussion of harm reduction in earlier periods). Both as theory and practice, harm reduction evolved as a critique and alternative to controlling drug use and drug users through legal sanctions. Its proponents claim that prohibitionist approaches aggravate both harms to health and society by stigmatizing and marginalizing drug users, in effect turning them into criminals.

A wide range of harm reduction programs have evolved since the 1980s, targeting the use of substances ranging from heroin and amphetamines to cannabis, tobacco, and alcohol. Some programs provide users with safer means to administer substances such as clean needles to inject heroin or patches to deliver nicotine. Others promote safer alternatives such as buprenorphine or methadone to replace illegal heroin. Yet other projects create spaces that facilitate safer substance use and disseminate information designed to minimize harm rather than promote abstinence. The success or otherwise of such programs has been reported in regular conferences and a wide range of journals, including a journal dedicated to harm reduction, launched in 2004.

Early harm reduction efforts that focused on “high-risk” groups such as injecting drug users and sex workers often assumed drug users to be relatively powerless in the face of potent substances, the victims of environments that mediate unsafe and illegal drug use (e.g., Duff, 2008; Rhodes, 2009). More recently, harm reduction efforts aimed at broader publics have called on smokers and drinkers to take responsibility for their own health. Such efforts have been analyzed extensively through the Foucauldian lenses of biopower and governmentality (Campbell & Shaw, 2008). Hernandez, Leontini,

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and Harley (2013), for example, show how anti-binge drinking campaigns on Australian university campuses dovetail with neoliberal aims to reduce health-care costs. Appeals to drinking in moderation that target young women may also invoke “conservative ideals of femininity and respectability” (Hutton, Wright, & Saunders, 2013, p. 476).

With their focus on illicit drugs, addiction, and overdose, many extant harm reduction programs downplay the normalized status and the positive effects that many drugs have for their consumers: excitement and pleasure (e.g., Duff, 2008; Hunt, Evans, & Kares, 2007; Malins, 2004; Martinic & Measham, 2008), a heightened sense of solidarity (e.g. Fletcher, Bonnel, Sorhaindo, & Rhodes, 2009; Kelly, 2006; Niland, Lyons, Goodwin, & Hutton, 2013; Romo, Marcos, Rodríguez, Cabrera, & Hernán, 2009; Ter Bogt, Engels, Hibbel, Van Wel, & Verhagen, 2002), and a “deeper connection to the spaces one moves through and the people one encounters in these spaces” (Duff, 2008, p. 391). Failure to acknowledge what many young people consider to be the benefits of substance use, we argue, makes harm reduction efforts less effective.

The Netherlands, the home base of two of the guest editors, is known for its innovative policies toward drugs and harm reduction. It is the only country we know of where a government-sponsored TV station can air a youth program called *Sputten en Slikken* (Injecting and Swallowing), in which youth presenters try out new party drugs and report on their experiences. The Netherlands’s pragmatic approach is also evident in its pill-testing facilities for ecstasy and other party drugs. An initiative by the *Adviesburo Drugs* (Advice Bureau for Drugs) set up facilities at festival sites to test pills and disseminate information about adulterated pills and safer use. While the central government for many years funded pill testing across the country, negative publicity about ecstasy production in the Netherlands has since refocused government attention (and funding) on policing production (Uitermark & Cohen, 2005).

Another harm reduction model developed in the Netherlands—one that seeks the active engagement of drug users—is the so-called *Junkiebond*, a union for drug users launched in the late 1970s (Moore & Wenger, 1995). Similar associations have been trying to influence drug policies in numerous countries, with mixed success. The French drug users’ group, *Auto-Support des Usagers de Drogues*, for example, lobbies for drug use to be seen as a choice, not an illness, and for recognition of their members’ experiential and pharmacological knowledge (Jauffret-Roustide, 2009).

The seven case studies that make up this special issue provide us with insights into the pragmatic regimes of drug use in young people’s everyday lives. They explore how youth make sense of the benefits and harms of substance use, what they do individually and collectively to reduce experienced risks, and how they assert reflexive agency to shape safer environments to protect themselves from harm. We call their practices *harm reduction from below*. In their different ways, the authors suggest that, far from being “out of control,” drug use is generally self-regulated within social networks and spaces and that young people are extremely creative in their strategies to reduce or avoid harm. In highlighting this collective self-regulation, this special issue responds to earlier calls to recognize the social control exercised among drug using peers (Chatwin & Porteus, 2013; Decorte, 2001; Dunlap, Johnson, Sifaneck, & Benoit, 2005; Hathaway, 2004; Moore, 1993, 2010; Waldorf, Reinerman, & Murphy, 1991; Zinberg, Jacobson, & Harding, 1975).

The contributions are based on ethnographic research on young people’s own harm reduction strategies in Amsterdam and Utrecht in the Netherlands, Paris and Lyon in France, Vilnius and Kaunas in Lithuania, Brooklyn in the United States, and in the virtual world of the Internet. Research was conducted among university students; bartenders; entertainers; drag queens; *vapoteurs* (electronic cigarette users); attendees at festivals; and after-parties, members of the *chem-sex*, and *slamming* gay subculture; and participants of online drug use-related forums, blogs, and story sites. The authors address substances ranging from alcohol, nicotine, and prescription medications to cocaine, amphetamines, traditional party drugs, and new designer drugs. Most rely on a combination of repeat in-depth interviews and participant observation; some are the result of prolonged immersion in the field. All but one are based on research carried out within the European Research Council-funded Chemical Youth project.

Caring and Sharing

A burgeoning literature exists on how the social environments of marginalized youth may encourage drug use (see Pilkington, 2007; Rhodes, 2009). In the United Kingdom, for example, Fletcher, Bonnel, Sorhaindo, and Rhodes (2009) show how being a cannabis user can provide a “safe” identity for students attending rough inner city schools. In the very different circumstances of the *lorong* (slums) of Makassar, Indonesia, young men turn to locally brewed spirits, benzodiazepines, marijuana, and heroin to project “*rewa*—braveness or toughness, a vital indicator of manhood” (Nasir & Rosenthal, 2009, p. 240). Such studies suggest that drug taking is a response to dangerous social environments, in which drug-related harm is a likely outcome.

The studies in this special issue deal with a different set of issues. The participants in our studies, who are perhaps better resourced than those in the studies cited above, do not take drugs to mitigate what are commonly understood as environmental risks. Their peers do not “pressure” them into unsafe drug use; more often than not, their peers provide protective environments in which they can experiment with drugs while pursuing other goals.

In the first contribution to this special issue, Inge van Schipstal, Swasti Mishra, Moritz Berning, and Hayley Murray explore how recreational drug users in the Netherlands, as well as in online drug-experimenting communities, manage the risks and minimize the harms that can potentially arise from their use of party and designer drugs. The authors focus on the situated practices and techniques that youth themselves invent, employ, and share in their quest for pleasant, *hassle-free* highs. These include creative and sometimes intricate methods for dosing and administering drugs as well as practices to make the space as conducive as possible to positive *trips*. These practices are informed by the values that animate drug-using communities, which the authors summarize as practices of *sharing* around drug use and *caring* for the larger community of drug-using peers. Youth care about the quality, purity, and dosing of substances; about their friends, safety, well-being, and quality of leisure time spent together; and share their knowledge, experiences, and warnings of trips gone bad for the benefit of their drug-using peers and a wider community of online experimenters. “Harm reduction policies that do not consider the intentions and lived experiences of drug users,” the authors conclude, “will most likely fail. Harmful or risky behavior does not adequately describe how many users engage with drugs; it remains an outsiders’ perspective tied to particular ideas of control as articulated by government and public health officials” (Van Schipstal et al., this issue).

Romain Amaro in his contribution explores the practices of *chem-sex* on the fringes of the gay dating scene in Lyon and Paris. *Chem-sex* involves injecting drugs during (often unprotected) sexual encounters. The practice—which emerged in France with the appearance of new low-cost designer drugs that facilitate bodily contact, sexual intercourse, and emotional openness—has been condemned as risky, extreme, and deviant, a practice divorced from the sentimental norms of stable relationships in the era of legalized gay marriage. Amaro, however, seeks to provide a more nuanced understanding of how the practices of injecting drug use are entangled with the search for love, and his findings are anything but straightforward. Feelings of euphoria and *love fusion* when new relationships blossom often encourage risk taking within symbiotic couples, where syringe sharing is experienced as a sign of trust and love. Romantic breakups can trigger periods of breaking loose, *craze*, and uncontrolled drug use. But romantic relationships also provide crucial symbolic and material support to place limits on drug use in ways that reduce harm. While acknowledging the risks of sharing needles, Amaro’s study shows that the most severe harm is experienced by those who are lonely and do not have others to care for them.

The next contribution continues the focus on France as Imogen Bevan examines the growing popularity of electronic cigarettes among youth who have quit or are trying to quit smoking. But e-cigarette technology, which delivers nicotine minus the tar and carbon monoxide of cigarettes, is controversial: The World Health Organization and the French Agency for Safety of Medicine and

Health Products have denied it the status of interim substitution product in the cessation of smoking, while the possibilities for pleasure are seen as a threat to the message of total abstinence promoted by France's public health council, the *Haut Conseil de Santé Public*. In the meantime, tobacco companies entering the e-cigarette market champion the cause of individual freedom and harm reduction. User associations demand consumer rights and *vaping* communities are blossoming, with their members meeting online and in public parks to socialize, share advice, and best practices (on the best flavors, the right dosage to reduce the body's tolerance to nicotine, the most natural organic cotton filters, alerts about the resistance wires in *vaping* equipment containing toxic heavy metals, and support and companionship in the cessation of smoking). "Substance use, or its cessation," Bevan points out, "has the power to irrevocably transform relationships." Against the public health message of self-discipline and renunciation, *vaping* provides "occasions for social bonding, gustatory pleasure, and the non-medicalized management of health with endless possibilities for individualized tailoring" (Bevan, this issue)—values that clearly resonate with many French youth.

Frederik Bøhling has pointed to the affective dynamics of alcohol and other drug use, and how they can change the capacity of subjects to relate to music, friends, and sexual partners present in the space. Drugs, he suggests, "might be interpreted as something that augments the body and mind of the subject (biologically and psychologically) to become more responsive to the affective flows of the club assemblage" (Bøhling, 2014, p. 374). The affects generated through the joint administration and consumption of GHB at after-parties, the joint injection of designer drugs in *chem-sex* parties, and the joint *vaping* of e-cigarettes in public parks encourage interpersonal bonding and solidarity, creating a social group of mutual care. Hernandez et al. (2013) observed a similar phenomenon among Australian students who reported feeling more protected when drinking in groups and having friends who were looking out for them. In this light, we were pleasantly surprised by a new harm reduction campaign set up by the Netherlands Red Cross, called "How to survive a festival." Apart from advising youth to drink enough water, wear comfortable shoes, and avoid the sun, it calls on them to keep an eye on each other and to help if something threatens to go wrong (<http://www.rodekruis.nl/afdeling/amsterdam/jongeren/nieuws/overleven-festivalseizoen-ehbo>).

Balancing Good and Bad Effects

Two contributions to this special issue emphasize the ways in which young people use drugs to become more productive in their daily lives. The practices reported in these articles are consistent with the turn toward enhancement and self-mastery highlighted in much recent social science (e.g., Hogle, 2005; Martin, 2000; Rose, 2003). Emily Martin argues that people nowadays tend to see themselves as a "flexible collection of assets," which they develop to "position themselves in a rapidly shifting global economy" (2000, p. 582). For the young people encountered in the Chemical Youth Project sites studied by Aleksis Hupli, Gabija Didžiokaitė, and Marte Ydema, and Tait Mandler, the desired "assets" are greater focus, motivation, creativity, confidence, empathy, and stamina, which enable participants to be clever students, affable bartenders, or vivacious, entertaining drag queens. Harm reduction programs generally fail to acknowledge the value of drugs in achieving these and other comparable goals.

In their contribution to the special issue, Hupli, Didžiokaitė, and Ydema examine the experiences of university students in the Netherlands and Lithuania with cognitive enhancement drugs (CEDs). To privilege user experience, the authors let their participants define what substances they consider to be CEDs. They find that students turn to well-known prescription stimulants such as Ritalin (often without a doctor's prescription), drugs such as cannabis and LSD, and various nutritional supplements marketed as good for the brain in order to enhance focus, motivation, memory, mood, and creativity. Although the desired effects differ, how prescription drugs, illicit drugs, and nutritional supplements are seen as functional tools to attain specific aims remains broadly similar. Most of the university

student participants in the study have clear goals for their use of CEDs and are well informed about the safety and efficacy of the substances they use. Their use is “not, as critics often assume, a reckless undertaking driven by peer pressure” (Hupli, Didžiokaitė, and Ydema, this issue). They experience both beneficial and adverse effects, and self-regulate their use of CEDs to balance benefits and harms, ensuring that their use remains moderate and thoughtful.

Tait Mandler’s contribution turns to chemical use among queer nightlife workers—self-described as producers, promoters, DJs, hosts, artists, performers, drag queens, musicians, stage managers, bartenders, environment enhancers, and personalities—in Brooklyn, New York. Mandler begins by pointing out that to be commercially viable, venues must “produce the kinds of social spaces of pleasure that partygoers want to consume” and that the labor of many nightlife workers consists of “producing pleasure for others by experiencing pleasure themselves.” Mandler’s participants use a veritable pharmacy to stay energetic at night, to remain engaged and sociable regardless of their mood, and to establish charismatic rapport with their audience. Their harm reduction strategies include being meticulous with timing and dosing, only using chemicals at work that aid their productivity, scheduling their use around other commitments, and taking breaks from chemical use when their bodies feel this is necessary. Overall, they feel capable of monitoring and moderating their use—on their own terms. “Use that may be seen as problematic or unpleasant in a given time and place,” Mandler points out, “may be productive and pleasurable in others. The contextual, experiential, embodied reality of chemical use is also the most promising source of effective harm reduction” (Mandler, this issue).

Experimenting Online

Two contributions to this special issue study harm reduction in the virtual spaces of the Internet. Science and technology scholars have documented how the Internet is changing the structure of scientific authority and how established boundaries between biomedical and lay expertise are breaking down as amateur chemists engineer new psychoactive substances and develop their own rules and protocols for experimentation (Langlitz, 2009; Rabeharisoa & Callon, 2004).

In their contribution, Moritz Berning and Anita Hardon examine how experimentation with novel psychoactive substances (NPSs) or *designer drugs* is mediated by online spaces. The participants of the forum they study describe their *trying out* of unexplored designer drugs in the form of *trip reports*. They give guidance on where to procure substances, how to dose them, and what effects can be expected. In attempts to reduce the pharmacological uncertainty associated with ingesting (relatively) unknown substances, forum participants advise each other on techniques such as using micro-gram scales and *allergy dosing*, which arguably contribute to a sense of control in the face of possible product toxicity. Berning and Hardon argue that online forums allow the self-experimenting community to rapidly adapt to the challenges posed by the appearance of new compounds, for instance, in the form of substance warnings and immediate, practical peer support for members experiencing problems. But in conducting these experiments, leaps of faith are needed; forum participants rely on the reports of others whom they have never met, entailing trust in the virtual testimonies of others. Nevertheless, Berning and Hardon are cautiously optimistic that the experiential knowledge contained in online fora can be analyzed and marshaled to inform harm reduction efforts online.

In the final contribution to this special issue, Dave Boothroyd and Sarah Lewis take a multi-case study approach to nine online drug sites, including forums, blogs, and story sites that mediate exchanges on NPSs and the non-medicinal use of prescription drugs. They argue that the peer-to-peer co-creation of knowledge, sharing, and support constitutes an emergent and constantly evolving form of “practical wisdom” about drugs and drug use. Drawing on Bent Flyvbjerg’s (2001; Flyvbjerg, Landman, & Schram, 2007) accounts of phronetic social science as practice, which proposes a permeable boundary between theoretical and practical inquiry, and Isabelle Stengers’ (2005) account of the

“collective voice from below” as always embedded within an “ecology of practices,” Boothroyd and Lewis offer an interpretation of online drug culture revolving around users’ shared aims of “doing drugs well.” Phronetic social science, they point out, rejects the epistemic principle of modernity that “expert knowledge alone can solve the social problems that it abstractly identifies and describes.” It acknowledges that social subjects in particular situations know the risks and potential harms that are at stake and recognizes the value of what is learnt and known from living through problems—in this case, of “how to live well with drugs.”

Taken together, the contributions gathered in this special issue point to the broad range of practices that young people in different contexts use to reduce harm when taking drugs. Ranging from rational techniques to trust and rituals of caring and sharing, they provide us with insights into how youth get along with drugs—on their own terms. Whether they are using illegal substances or using prescription drugs for non-medical purposes and whether they are taking drugs for pleasure, social bonding, or for some form of enhancement, young people rely on their peers’ experiential knowledge. Drug use among young people is almost invariably a social activity: They pop, snort, drink, and smoke in groups and are continually comparing and discussing their positive and negative experiences. Peer groups have norms for how, when, where, and with whom to use drugs. Limits exist, and ignoring them is generally frowned upon. Online spaces allow for the sharing of such practical wisdom with others elsewhere. The social groups in which youth take drugs and the online spaces through which they connect provide a wide range of resources for reducing harm from below.

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