This initiative is very worthwhile and overdue. I am all in favour of anything that de-mystifies drug users, and admits that they are not really ‘them’ but ‘us’.

Kate Holden, author of In My Skin

LIVES of substance

Australia’s first dedicated website presenting carefully researched personal experiences of alcohol or other drug addiction, dependence or habit.
New narratives, new selves: A critical analysis of ‘addiction’ biographies

Kiran Pienaar

www.addictionconcepts.com | @AddictConcepts

www.livesofsubstance.org | @LivesSubstance
Introduction

- ‘Addiction’ in public discourse is pathologised and stigmatised
- Challenge existing ways of framing regular AOD consumption
- Note on terminology
- Present personal accounts on an informative website: livesofsubstance.org
Method

• 60 in-depth qualitative interviews

• Recruitment materials ask: do you consider yourself to have an AOD addiction, dependence or habit?

• Wide range of experiences

• Participant biographies reconstructed from interview material

• NB: Biographies checked and approved by participants who chose to review them
Personal narratives assumed to present the ‘facts’ of a life: seen to offer a perfect window on an apparently pre-existing reality.

Narratives actually help to *produce* life experiences & identities. In the process a range of other phenomena are also produced, e.g. health, disease, stigma, drugs.

How might research help to challenge stereotypes and transcend narrow, stigmatising formulations of AOD use?
My name is Sofia and I am a recovering addict and alcoholic. I started using when I was 12 years old. What started out as drinking alcohol and smoking weed quickly escalated into regular use of narcotics, and by the age of 13 I was abusing cocaine and prescription pills on a regular basis.

[...] My life was out of control [...] I used in order to stop feeling and thinking about all the negative things in my life [...] After an incident in which I threatened to commit suicide, I was forced into a [...] drug treatment program where I resided for nearly three months. This experience [...] saved my life [...] With the support of my family, the tools I learned while in treatment, and my newfound desire to change, I was able to successfully complete treatment and begin my journey of recovery. Today, I have been clean and sober for nearly seven years.

Source: www.drugfree.org
• Narrative arc: increasing AOD consumption > decline > collapse acting as the catalyst for change > renouncing AODs

• Linear downward trajectory in which only available option is to renounce AOD consumption.

• Conversion narrative: ‘a retrospective reinterpretation of the past in the light of a more enlightened present identity’ (Keane 2001: 568).
Helen has completed a PhD which involved research overseas, and has written several books. In the past she worked in the health sector. She has a teenage child and describes becoming a mother as ‘the best thing [she] ever did’. She’s fond of walking, travelling and spending time with her child.

- Avoid reducing individuals to their AOD consumption; constitute them as whole people with rich lives.
In her early twenties, Helen [...] says she ‘drifted into’ a ‘population of people’ who took heroin and began taking it herself [...] continuing for several years, while completing her university studies and working [...] 

Helen says that having ‘a habit on heroin’ has become ‘exhausting’. She now wants to ‘cut right back’ to a level she ‘can afford’ and is ‘comfortable with’ [...] Currently on Suboxone®, Helen plans to take heroin only ‘every now and then’. She feels ‘really positive’ about the future and intends to begin a new course of study [...] and resume working overseas.
Emma was working full-time and feels she wasn’t coping with ‘being a wife, a mum, and earning money’. She began drinking heavily and taking Xanax, valium and codeine ‘to get through the day without having an anxiety attack’. Emma’s husband was very concerned and organised for her to go into a short detox. She wasn’t keen to go and expressed some ambivalence about the experience in that ‘it was a way to escape the anxiety [she] had at home’ but when she returned home she still had to cope with it. A few months later she resumed drinking [… and eventually] reached a point where she felt she ‘couldn’t cope any more’.

Telling stories, shaping selves: Emma
Concluding remarks

• Personal narratives produced through this research complicate familiar assumptions

• Challenge the view that research uncovers a prior reality (the ‘facts of addiction’)

• Consider the politics of research:
  – How do particular research practices produce the ‘problem of addiction’?
  – How might they contribute, however unintentionally, to reproducing stigma and marginalisation?
Thank you

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