

35th Annual Conference of the European Society for Social Drug Research



ESSD

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Book of Abstracts

Hosted by the

Centre for Drug Policy and Social Change (DPSC), Manchester Metropolitan University and the
Department of Criminology, University of Manchester

ESSD 2024 Organising Committee

Liviu Alexandrescu, Felipe Neis Araujo, Rebecca Askew, Robert Ralphs, Mike Salinas,
Meropi Tzanetakis and Lisa Williams



Programme

Day 1

Session 1: Drug Policy and Stigma



Chair: Mike Salinas

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2. Vegard Haukland - [From Stigma to Support: The therapeutic potential of everyday interactions in Heroin-Assisted Treatment](#)
3. Lindsey Metcalf McGrath, Helen Beckett Wilson - [Stigma and Stress: The impact of prohibition on the experiences of prescribed cannabis patients](#)

Session 2: Culture and Moralities: Contexts and scenes of drug use



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3. Zsuzsa Kaló - [Methodological challenges in conducting qualitative drug research in warzones](#)

Session 3: Creative Approaches to Harm Reduction and Public Engagement



Chair: Rob Ralphs

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Session 4: Harm Reduction: Principles, challenges and change



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Day 2

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Chair: Lisa Williams

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3. Richard G. Alexander - [Psychedelic Soldiers: Beyond Psychotherapy](#)

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Chair: Liviu Alexandrescu

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Day 3

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Chair: Meropi Tzanetakis

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Chair: Tom Decorte

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Book of Abstracts

in alphabetical order by presenter

Drifting in and out of hybrid digital drug dealing

Kristoffer Aagesen

University of Copenhagen, Department of Sociology

Keywords: Illicit drugs, Drug Dealing, Cocaine, Social Media, Drift

Abstract

Background: Drug markets are increasingly housed on open social media and shaped by the affordances of the platform. Previous research has shown that both drug users and non-users are exposed to drug dealers by platform structures and recommendation algorithms. This greatly affecting sellers' commercial reach and market dynamics. This paper seeks to examine how increased exposure to drug content and decentralized access to a broad customer base might influence drug sellers' drifting in and out of hybrid digital crime.

Methods: This paper will explore personal narratives of drifting in and out of different aspects of digital crime through qualitative interviews. Focus for the interviews will be dealers' motives and methods of engaging with drug markets, risk assessment, and narratives of life trajectories including conception of their future possibilities in or out of drug dealing. Informants will be sampled through an ongoing digital ethnography into Danish and Nordic drug markets. Interviews will be conducted online through text or video at the interviewee's convenience. To foster trust and gain access to personal narratives, the interviewing researcher will be open about their identity.

Results: The study is still in its early stages, but emerging data from digital ethnography suggest different motives for entry into hybrid digital drug dealing. With social media widening available customer pools and providing out of the box infrastructure for reaching consumers individual drug users or people with deviant but entrepreneurial aspirations, might easily drift into selling of drugs. Pathways into selling can also follow a more classic peer driven ingroup recruiting into organised groups. These different motives result in different tolerances for risks and future aspirations in or out of digital crime.

Conclusions: Based on the initial data I suggest that Social media affordances greatly influence the shape of modern online drug markets, not only from the perspective of consumers. The platforms offer technological infrastructure fit for recruiting dealers, expanding customer network, checking out competition, or live out entrepreneurial aspirations. The barrier of entry into recreational or professional drug dealing is lowered for people who otherwise would not have the peer-groups to start dealing. By analysing narratives on drift into, and potentially out of, drug dealing a more complete understanding of social media drug markets is formed.

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Funding sources: TrygFonden, The Danish Crime Prevention Council, Ulla V. Bondesons Stiftelse

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Biography: Kristoffer Aagesen is a PhD fellow at the Sociological institute at the University of Copenhagen and a part of the Microsociology of Online Deviance LAB. His PhD delves into modern youth crime with a specific focus on how digital aspects of social life and crime affects crime scripts and drift. The project relies on digital and qualitative data and aims to contribute to the field of digital methods, by developing new approaches to study social media and their governing algorithms. Aagesen has previously examined Nordic social media drug markets.

Psychedelic Soldiers: Beyond Psychotherapy

Richard G. Alexander

Universiteit Utrecht, Willem Pompe Institute

Keywords: Psychedelic drugs, psilocybin, military, subcultural

Abstract

Psychedelic drugs and their use are being increasingly ascribed with medical meanings as the psychedelic 'renaissance' continues to drive interest in their psychotherapeutic applications. Amidst the clinical contexts being explored the PTSD afflicted military veteran has become a key figure, both as an ideal psychedelic patient and as a narrative lynchpin of the associated advocacy efforts. This qualitative, ethnographic study challenges the dominate discourse of the medicinal paradigm by examining the unregulated, non-clinical psychedelic drug use of several former soldiers. Observation of the distinctive practices surrounding their procurement and use of wild psychedelic mushrooms highlights the prevalence of self-regulating rituals, informed by an existing subcultural folklore and further shaped by processes of individual and collective identity performance. The findings of this study point to new, critical criminological understandings of psychedelic drug use that place emphasis on the meanings being narratively constructed by non-clinical users. Such understandings should be incorporated throughout future psychedelic research, discourse, and advocacy efforts.

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Funding sources: South East Network for Social Sciences (Economic and Social Research Council)

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Biography: Richard G. Alexander is an assistant professor in the Willem Pompe Institute of Criminal Law and Criminology at the Universiteit Utrecht, holding a Bachelor in Criminology from Manchester Metropolitan University, an MA in Global Criminology from Universiteit Utrecht, and an MA in Social Research Methods from the University of Kent. Richard achieved his PhD in 2024 having conducted ethnographic research into the narrative meanings being ascribed to psychedelic drug use in non-clinical contexts. As a researcher Richard is principally interested in ethnography with drugs, drug use, and drug users, and the culturally constructed meanings surrounding them.

The rise and fall of cannabis clubs in Spain: A case of contentious politics

Arturo Alvarez-Roldan

Non-presenting authors: Juan F. Gamella, Iván Parra

University of Granada, Department of Social Anthropology

Keywords: cannabis, clubs, contentious politics, Spain

Abstract

Background: The formation and evolution of cannabis user clubs in Spain are deeply intertwined with a prolonged and contentious political process. Over three decades, anti-prohibition activists, aiming to change the legal status of cannabis, organized into associations. Collective cultivation of marijuana emerged as a pivotal action leading to cannabis club establishment, becoming a top priority for the cannabis social movement.

Methods: This presentation reviews the history of this political dispute, analyzing a broad spectrum of documents, including academic publications, technical reports, websites, press news, judicial sentences, and legislative proposals.

Results: We divided the period into four stages: emergence of the social movement, configuration of the club model, diversification and diffusion of clubs, and decline. The rise and fall of cannabis clubs in Spain were shaped by three key factors: the challenge of reconciling personal drug use rights with penalization for supply exceeding private consumption limits; persistent contentious politics between autonomous communities and the central government, and a highly protective judicial system causing prolonged legal processes. The Spanish political regime, characterized by power distribution among different parties and government levels, provided fertile ground for the cannabis club dispute, particularly in autonomous communities like Navarre, the Basque Country, and Catalonia. Despite substantial autonomy, their support or opposition to club legalization often reflects political opportunism rather than steadfast conviction, resulting in shifting stances. Cannabis clubs exhibited dual aspects—a political dimension and a commercial one. Spanish judges tolerated the former but were punitive toward the latter, especially as clubs transitioned from political activism to commercial ventures. Legal challenges intensified with the commercialization of illegal products, leading to condemnatory judicial sentences and club dissolution.

Conclusions: The history of cannabis user clubs in Spain reflects a complex interplay between political, legal, and societal factors. Ongoing legal challenges and shifting political stances underscore the intricate landscape surrounding cannabis clubs, emphasizing the need for a nuanced approach to address the diverse dimensions of this complex issue.

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Biography: Arturo Alvarez-Roldan is an Associate Professor in the Department of Social Anthropology at the University of Granada, Spain. His research is currently focused on three related topics: dual cannabis-tobacco use, cannabis policy, and illicit drugs markets. His latest publications in this field: (2023) Attitudes toward cannabis of users and non-users in Spain: a concept mapping study among university students, *International Journal of Mental Health and Addiction*, 21: 3952–3970; (2023) Differentiating people who use cannabis heavily through latent class analysis, *Substance Abuse Treatment, Prevention, and Policy*, 18: 31.

Sheds and Benches: Comparing smaller outdoor open alcohol and drug scenes in Norway and Denmark

Jonas Strandholdt Bach¹

Non-presenting authors: Trond Erik Grønnestad², Anne Schanche Selbekk²

1) Aarhus University, Center for Alcohol and Drug Research; 2) University of Stavanger, Department of Public Health

Abstract

Public spaces where alcohol and other drugs are openly used and marginal citizens gather, exist in many Nordic cities. The biggest open drug scenes in the Nordic countries are in cities like Oslo and Copenhagen, where Christiania and Vesterbro have attracted people from far and wide. However, there are smaller but similar scenes in other, smaller cities, centered around shed-like structures, offering some form of shelter and a designated space for marginalized groups of drug and alcohol users hanging out in public space. This presentation builds on an article where we make an early attempt to investigate, in a comparative perspective, the characteristics and functions of smaller open alcohol and drug scenes, and how their existence is negotiated in the local community and among the citizens using them. *Methodology:* This article is a comparative case-study based on data from fieldwork (participating observation and interviews) carried out in two specific locations in Denmark and Norway between 2017 – 2022. A cross-case analysis was performed to identify commonalities and differences. *Results:* Smaller open alcohol and drug scenes are non-regulated spaces of ambivalence and ongoing negotiation in local communities. Based on the data across locations, they represent possibilities for informal care and community for citizens in marginalized situations. The scenes are further, across location, characterized by a mutual agreement of performing decency, e.g., not allowing minor drug sale/use and “behaving properly”. *Conclusion:* To enable public spaces as smaller alcohol and drug scenes can play a role in reducing harm for marginalized citizens. Communication and dialogue between citizens using an open drug scene and the wider community may help reduce stigma.

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Biography: Jonas Strandholdt Bach, anthropologist, PhD, Assistant Professor, has worked on various projects on the intersections between ageing, substance use and marginalization, including projects on ageing substance users in need of care, and marginalized people in public and semi-public spaces. He is also currently working on a project about adolescent alcohol use and role of parents and authorities.

Exploring crack cocaine consumption among vulnerable populations and its impacts in urban public spaces

Frédérique Bawin and Jean-Lionel Lacour

safe.brussels

Keywords: Crack cocaine, vulnerable populations, public space, mixed methods, Belgium

Abstract

Background: The prevalence of crack cocaine use in European urban areas, notably in Brussels (Belgium), raises concerns regarding public health and safety. There are indications that both the market and the consumption of crack have evolved, including the increasing visibility of crack use in public spaces. This study addresses the limited knowledge on crack consumption in Brussels by focusing on its evolution, user profiles, consumption patterns, supply dynamics, and impacts on public spaces and the local area.

Methods: We employ a triangulated approach, combining two focus groups with professionals (N=18), including the police, public transport, prevention, harm reduction, and treatment services, and a survey with vulnerable people who consume crack (N=104).

Results: Results indicate that crack consumption is not solely a product-related issue but is intricately linked to unfavourable conditions, including rising precarity, deteriorating mental health, homelessness pressures, and migration challenges. Crack is mainly used to cope with mental difficulties, although the duration of crack's effects is short ("*flash*"). Crack is described by consumers as highly psychologically addictive, leading some individuals to frequently purchase cocaine and consume it immediately and intensely in public, depending on available resources. The cocaine market is undergoing changes, with a diversification of offerings, including smaller pre-prepared doses of crack. Initial discoveries of makeshift production facilities and respondents' reports about dealers appear to be associated with specific communities. However, unprocessed cocaine is still more widely available and highly accessible. Most respondents reported preparing crack themselves regularly, while buying crack was less common. Finally, our results underscore challenges in the existing treatment system, with the first-line services facing saturation, a lack of continuity with the second line, diminishing resources for the second line, and a fatigue among first-line responders. The police and private security actors find themselves with limited means to address the needs of crack consumers, highlighting gaps in the current support infrastructure.

Conclusions: The insights from our study highlight that while drug trends among vulnerable populations in public spaces may fluctuate, the specific characteristics of crack exert a particular influence on consumption patterns and purchasing behaviour, consequently impacting public spaces. Through acquiring an exhaustive comprehension of crack consumption, authorities can better address public safety concerns, strengthen harm reduction strategies, and tailor treatment options to meet the specific needs of individuals who use crack.

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Biography: Frédérique Bawin works as an analyst at safe.brussels (Belgium) conducting policy oriented research on drug use, markets and organised crime. Prior to her current role, she held a position as a postdoctoral researcher at the Institute for Social Drug Research at Ghent University. She has a PhD in

criminology. Her research interests include illicit drug use, drug markets and the non-medical use of psychoactive substances.

Reform Amidst Friction at the Commission on Narcotic Drugs

Pamela Bong

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Keywords: Commission on Narcotic Drugs, international drug policy, drug policy reform, harm reduction.

Abstract

Background: The emerging tension in drug policy discourse at the Commission on Narcotic Drugs (CND) highlights division in international drug control. At the 67th CND held in March 2024, the term 'harm reduction' had finally been accepted in a CND resolution, becoming an agreed language which was previously not recognised in any CND documents. This momentous occurrence is unprecedented as the resolution was unconventionally passed by a voting procedure involving 53 member States of CND and broke the longstanding tradition of the Vienna consensus. This significant breakthrough at the CND has two important implications: the recognition of harm reduction policies at the CND; and the clear fragmentation in international drug policy. It signifies how national level drug policy reform with a public health focused agenda in European countries affect changes at the CND. Correspondingly, with the recognition of harm reduction at the CND, national drug policy reform efforts are supported internationally, paving the way for future reforms.

Methods: This study is an early-stage PhD research based upon the contentious issues deliberated at the CND. Through document analysis, these issues will be discussed to demonstrate how national level participations play important roles in determining the outcomes of the CND.

Results: This presentation discusses the inter-governmental decision-making processes at the CND. It provides an account of how inter-governmental interactions affects the outcome of the CND sessions which impacts national and international drug policies.

Conclusions: To conclude, this presentation provides an understanding on the interrelation of national drug policy and international drug policy evident in CND deliberations.

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Biography: A PhD Criminology student at the University of Manchester exploring the roles of States in shaping international drug policy, with a focus on countries implementing prohibitive drug policies. With an interest in the inter-governmental interactions at the Commission on Narcotic Drugs, I endeavour to produce a thesis that contributes to the existing knowledge regarding the relationship between national drug policies and international drug policies.

New Wine in Old Bottles: Icelandic Drug Policy in an Age of Drug Market Change

Julia Buxton

University of Manchester, Department of Criminology

Keywords: Iceland, abstinence, synthetics, harm creation

Abstract

Background: Iceland is known for the durability of its drug prevention and abstinence-based treatment approaches (The Iceland Model). Drug and alcohol programmes have traditionally invested in the social capital of youth and promoted the 12-step programme for people seeking support and treatment for problematic use. This paper argues that the historic resilience of Icelandic drug prevention is being eroded by the increased availability of imported substances (such as cocaine and synthetics and as demonstrated in wastewater analysis), domestic cultivation of cannabis, overprescription of pharmaceutical stimulant drugs, and new mechanisms of social dealing. Pressure to revise Iceland's historically robust criminalisation framework, improve the availability and quality of harm reduction services, and align national strategy with rights-based approaches faces institutionalised resistance from conservative forces and a powerful treatment sector.

Methods: 20 semi-structured in person interviews in Iceland with politicians, academics, harm reduction workers and members of the three government committees on policy reform. Visits to the main treatment clinic, a women's emergency shelter and a harm reduction facility.

Results: The interviews revealed the enduring influence of 12-step treatment approaches and training. Iceland's experience of beer prohibition (lifted only in 1989) has forged norms and perspectives inclined to strengthen criminalisation and abstinence as a means of addressing new substance challenges. Civil society led mobilisation for drug policy change is relatively weak. Progress by proponents of policy change has been hesitant but is increasingly connected to transnational advocacy and international human rights agendas.

Conclusions: Iceland's isolation from global trafficking is unsustainable. Key elites assume that historic 'insulation' can be maintained by building on established approaches. This is unrealistic, relies on stigmatising norms, obscures the reality of existing domestic drug markets and denies harm creation in the application of traditional strategies to address contemporary challenges.

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Funding sources: British Academy Global Professorship

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Biography: British Academy Global Professor researching contemporary global illicit drug market trends, drugs and development and the gendered impact of drug policy enforcement. Previously Professor, Associate Dean and Acting Dean School of Public Policy, Central European University Budapest; Region Head (Americas) Oxford Analytica.

Virtuous Drug Use in the Neoliberal Age

Caroline Chatwin¹

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Keywords: drugtaking; normalization; morality; drug-related discourse; popular culture

Abstract

Background: In neoliberal societies all across Europe, agency over personal happiness has become established as a normative discourse within the self-interested agendas of the neoliberal individual. Within this context, we argue that it is possible to frame drug use as 'virtuous'.

Methods: In this presentation, we aim to: i) provide evidence that a neoliberal individualized presentation of drugtaking as 'virtuous' is emerging; and ii) explore the processes by which such a framing is legitimated by society. We apply a neoliberal twist to a virtue ethics perspective, defining 'virtuous' drug use as: 1) enhancing happiness; 2) informed by the sustained impetus of neoliberal reason; 3) conforming to the neoliberal emphasis on healthism and risk avoidance; and 4) not interfering with productivity.

Results: Findings suggest that drugtaking, even macro doses of illegal substances, can be constructed as 'virtuous' when engaged in by good neoliberal citizens as part of the rational pursuit of personal happiness. An examination of the recent rapid shift in construction of psychedelics demonstrates the methods by which drugtaking can be culturally accommodated and socially legitimated within the neoliberal context.

Conclusions: Ultimately, the construction of 'virtuous' drug use protects the status quo and proliferates the inequalities prevalent in constructions of drugtaking.

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Biography: Professor Caroline Chatwin works within the School of Law and Criminology at the University of Greenwich. Her research interests encompass European and global drug policy, New Psychoactive Substances, online and offline drug markets, and prison leaver outcomes.

THE XTC-SHOP in Ghent (Belgium): An 'Experiential' Public Research on XTC Regulation in Belgium

Tom Decorte

Ghent University, Department of Criminology, Institute for Social Drug Research

Keywords: XTC regulation, public research, experiential methodology, harm reduction, policy advocacy, Belgium, participatory engagement, societal impact

Abstract

Together with the Netherlands, Belgium is one of the top global producers of MDMA, the active ingredient in XTC. An estimated 12% of all ecstasy pills seized worldwide come from Belgium. The production and (international) trade in XTC has far-reaching social consequences: incidents of violence, large-scale tax evasion, money laundering practices, corruption in the police, municipalities and other government institutions, and dumpings of drug waste in the environment. Amid an often heated public debate about the impact of the ecstasy trade, MDMA is making a comeback in therapeutic settings. In addition to the fact that a substantial number of people use XTC in a recreational and non-problematic way, the question of whether drug policies are still in line with a new reality is becoming increasingly urgent. There is not yet a consensus in society about the desirability, let alone the feasibility, of (otherwise) regulating MDMA.

In the Netherlands, drug researchers from the Poppi Museum, in collaboration with researchers from Utrecht University, have developed three scenarios for alternative regulation of the sale of MDMA to consumers. The sales locations devised here were a smart shop, a pharmacy and a club/festival. This choice was built on the theoretical exercise around an XTC shop, as developed in the Netherlands in 2019 by a group of experts from the think tank MDMA9, and on a British publication from that same year of Transform Drug Policy: "How to Regulate Stimulants".

The citizen movement Smartondrugs wanted to translate this Dutch project into a Belgian context. The citizens' movement wants to use a public survey among various stakeholders and experts (drug researchers; healthcare and law enforcement professionals; and people who use MDMA or might use it) to find out how they concretely experience and estimate the effects of these scenarios. To estimate the degree of acceptance for three different points of sale - each with its own sales conditions - we opted to stimulate dialogue in a non-polarizing or moralizing manner through the use of 'immersive design', where the visitor interacts with the design and is immersed in the experience of buying XTC. With the help of artists, the three scenarios are translated into an 'Ecstasy shop', which will be open from 15 April to 15 May 2024 in the city of Ghent.

THE XTC-SHOP is a physical space designed to simulate a regulated marketplace for XTC, providing a controlled environment for participants to engage in simulated transactions, interact with informational exhibits, and partake in facilitated discussions. Participants are invited to explore different scenarios, ranging from varying regulatory models to harm reduction strategies, and share their perspectives on the societal, health, and legal dimensions of XTC use and regulation.

At the nexus of academia, public engagement, and policy advocacy, THE XTC-SHOP represents a pioneering endeavor in exploring public attitudes, behaviors, and perceptions surrounding XTC (MDMA) use and regulation. This research initiative aims to offer nuanced insights into the complexities of drug policy by fostering a participatory environment that engages stakeholders, policymakers, and the wider community.

The presentation will delve into the multifaceted components of THE XTC-SHOP, detailing the conceptual framework, design considerations, and methodologies employed to elicit diverse viewpoints. Attendees will gain an understanding of how experiential public research can contribute

to evidence-based policymaking and foster informed public discourse on sensitive issues such as drug regulation.

The findings from THE XTC-SHOP are expected to offer valuable insights into public attitudes towards XTC regulation, inform policymakers about potential regulatory frameworks, and contribute to the ongoing discourse on harm reduction strategies. Moreover, this presentation aims to stimulate dialogue among conference participants about the role of experiential research in shaping public policy, particularly in contentious domains like drug regulation.

THE XTC-SHOP project underscores the importance of innovative research methodologies in bridging the gap between public opinion, policy formulation, and societal impact, serving as a pioneering model for collaborative, participatory research on sensitive socio-political issues.

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Biography: Tom Decorte is Professor of Criminology and director of the Institute for Social Drug research (ISD) at Ghent University. His research interests include patterns of substance use, on the supply side of cannabis markets, and on the implementation of local drug monitoring systems. He has been advisor to a range of organizations on policies to improve public health relating to the use of drugs around the world.

What happened to a ‘new normal’? The rise and fall of delivering opioid agonist treatment differently after Covid-19

Fay Dennis

Goldsmiths, University of London, Department of Sociology

Abstract

With the arrival of SARS-CoV-2 and the global pandemic that quickly ensued, healthcare had to radically change to reduce transmission risk. Although these were terrifying times, with instability also brought possibility. For the harm reduction community, the pandemic created an opportunity for doing care differently. Scholars, activists, and practitioners alike heralded it as a time of ‘emergent adaptation and experimentation’ (Grebely et al 2020). For Judy Chang and others at the International Network of People who Use Drugs (2020), the pandemic potentialized a ‘new normal’ – ‘an occasion to rethink the function of punishment, to reform the system and to work towards ending the war on drugs’.

In the UK, like many European countries, tightly controlled opioid agonists (used in the treatment of opioid dependency) were made available to take home, removing stigmatising supervised consumption practices (EuroPUD 2023). A new long-acting formulation of opioid agonist also arrived at this time. Drawing on a UK-wide qualitative survey and interviews with people who use, provide and commission drug services in the UK, this paper reflects on the freedoms, flexibilities, and new subjectivities these technologies enabled. But what happened? Participants also overwhelming remark that ‘everything is back to normal!’. Therefore, while exploring this air of potential, and, namely, as realised in new opioid agonist formulations and forms of prescribing, I attempt to unpick what made some of these changes so easily reversible and its care unrealisable, and the politics this reveals for who is worthy of care.

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Biography: Fay Dennis is a Senior Research Fellow in the Department of Sociology at Goldsmiths, University of London. Her work explores the socio-material processes of drug use and drug-related harm using ethnographic and arts-based methods. Her current study is funded by the Wellcome Trust and explores the changes and innovations in UK substance use treatment after Covid-19. She is Assistant Editor at the *International Journal of Drug Policy* and Editorial Board Member at *Contemporary Drug Problems*.

Beyond the beat: Exploring drug use rituals and harm reduction in rave culture within a prohibitionist context

Jesper Dunell

Stockholm University, Department of Social Work

Keywords: rave culture, harm reduction, drug policy

Abstract

Background: Drug use could be considered an integral part of rave culture. Previous studies suggest that drug users at raves implement harm-reducing measures, motivated by maximizing pleasure while mitigating undesired effects. Studies of drug checking at raves and festivals have shown that individuals are less inclined to consume drugs that contain different substances from what they are marketed as. Sweden has a long history of a prohibitionist drug policy and harm reduction efforts have been perceived as sending the wrong signal in the pursuit of *a drug-free society*. We lack knowledge about the drug-taking rituals and harm-reducing practices among ravers in a prohibitionist context. This study explores how illegal drug use at the Stockholm rave scene is shaped by the political and material conditions of which it is a part. Of specific interest is how drug policy trickles down to the dancefloor and shapes drug use.

Methods: Ethnographic fieldwork, including participatory observations at raves, and interviews with rave attendees and organizers, is carried out during 2024 in the Stockholm rave scene. The fieldwork has recently commenced; therefore, the results that will be presented are preliminary.

Results: Raves are at constant risk of being shut down by authorities, hence, organizers meticulously ensure venue safety by maintaining on-site security, clearing up fire exits, illuminating hallways and staircases to prevent accidents, providing security, and preventing authorities from intervening and interrupting events. Fieldwork suggests that the organizers look the other way regarding attendees' drug use and take no responsibility for negative consequences related to this activity. Their primary goal is to ensure that the rave can continue.

Conclusions: In this way, the Swedish drug policy appears to limit the possibilities of rave organizers to help attendees reduce the potential harms of drug use. Initiatives like drug checking or sharing risk management information related to drug use, which could suggest tacit approval of or involvement in this activity by the organizers, are unthinkable as they might attract unwanted attention from the authorities. The rave scene was previously characterized as a clandestine setting, where party information was shared word to mouth and access had to be gained from someone initiated, and it is now becoming more accessible through information about events online. The knowledge about drug use, rituals, and harm reduction that was embedded in the previous rave culture, and that was passed on from seasoned attendees to newcomers, is now at risk of being lost.

SLIDES NOT AVAILABLE

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Biography: Jesper Dunell is Ph.D. student at the Department of Social Work, Stockholm University, Sweden. His main research interest surrounds the meanings ascribed to drug use by individuals and in society at large.

Drug testing at the core of youth substance use treatment in Sweden

Mats Ekendahl and Patrik Karlsson

Stockholm University, Department of Social Work

Keywords: drug testing, treatment, youth, staff, drug prohibition

Abstract

Background: Drug testing plays a key role in youth substance use treatment in Sweden. Young people treated for substance use problems are routinely required to leave urine samples, and there is often controversy between patients and staff around its relevance. The vast majority of youth who are referred to treatment in Sweden have been caught using cannabis and drug testing often concerns this substance. Still, there is a lack of research on how stakeholders in this treatment make sense of this practice. The presentation contributes to this knowledge through an ANT-inspired (Actor Network Theory) analysis of how urine testing is enacted in youth treatment.

Methods: We attempt to tease out what kind of socio-material object urine testing is according to both youth and staff, and how it affects treatment. The study is based on interviews conducted in the Stockholm region during 2023, with 25 previous patients (mean age 17) and 20 treatment staff (counsellors at outpatient treatment facilities and case managers at municipal social services).

Results: The analysis shows that youth enacted urine testing as both a stable object that creates binaries in knowledge networks (use or non-use), and as a flickering object that appears in and affects diverse drug-body-treatment assemblages (even outside the clinic). They had internalised the importance of leaving negative samples to get discharged and avoid further adult surveillance. In tandem with treatment staff, they described a practice that turned substance use into a demarcated, individual and treatable problem. According to youth, urine testing devalued their ability to be honest about and regulate own conduct. More elaborated results from the staff interviews are yet to be detected.

Conclusions: Through establishing substance use as a simplified either/or phenomenon and through attributing patients with the agency to become non-users only, urine testing appears counter-productive if treatment is to strengthen informed decision-making and responsibility among soon to be adults. The strong emphasis in Swedish substance use treatment on controlling youth through drug testing is likely to increase suspicion and dishonesty between service providers and users. This prohibitory and rigid treatment policy stands in stark contrast to recent developments in other European countries, where cannabis use is becoming increasingly accepted and normalized. It will be interesting to follow the impact of different policy solutions on concrete treatment delivery, not least how they affect the legitimacy of harm reduction services for youth.

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Funding sources: Forte 2021-01726

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Biography: Mats Ekendahl is a Professor of Social Work at the Department of Social Work, Stockholm University, Sweden. His research covers a wide range of topics in the context of Swedish alcohol and drug policy, such as user perspectives, drug discourses and policy processes. Patrik Karlsson is a Professor of

Social Work at the Department of Social Work, Stockholm University, Sweden. His research broadly covers substance use, including studies on user perspectives, treatment and epidemiology.

Understanding polysubstance use with SCRAs in the UK: Emergent patterns, self-medication & user needs

Elena Gaschino

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Keywords: SCRAs; Spice; Polysubstance use; self-medication

Abstract

Background: Synthetic cannabinoids (SCRAs) are a prevalent drug among vulnerable populations in the UK, especially homeless persons. However, little qualitative research to date has specifically explored polysubstance use in the context of SCRAs. In order to better understand user needs and avenues for harm reduction, this research seeks to outline the motivations for polysubstance use among a population of SCRA users from the greater Lincolnshire area.

Methods: 21 semi-structured qualitative interviews with 10 SCRA users and 11 recovery / harm reduction practitioners working in the greater Lincolnshire area, analysed using thematic analysis.

Results: Many SCRA users take them as part of a broader drug-using routine, and are not 'exclusive' users of Spice. SCRAs are often used when other drugs (heroin, alcohol) cannot be accessed, as they are a prevalent and cheap alternative for dealing with the underpinning motivations for drug use among vulnerable persons (trauma, pains of life on the street). While participants typically used depressant drugs in their primary drug routine, among those who used crack and amphetamine, Spice was also used as a 'downer' in a manner akin to speedballing. While polydrug effects of stimulants with heroin/benzos are understood, the use of SCRAs for this purpose is a significant emerging trend. A key finding was the use of SCRAs as a form of self-medication for withdrawal when detoxing from heroin or alcohol. Spice was credited with being able to 'knock out' participants so they did not experience the full pain of the withdrawal period. This appears akin to a community-developed equivalent of the 'rattle packs' provided by harm reduction agencies to deal with symptoms of withdrawal, but can be accessed without facing the potential stigma or expectations of recovery that accessing packs through services may come with. However, there was a notable gendered difference in spice use for this purpose, with female participants discussing the heightened risk associated with being 'knocked out' and vulnerable compared to men.

Conclusions: Polysubstance use with SCRAs is prevalent among vulnerable populations in the UK, and increasingly important to understand in order to reduce harms. Importantly, user needs must be understood, and self-medication for withdrawal necessitates consideration of why SCRAs are preferred to accessing existing services. This points to a need to reduce feelings of stigma and scrutiny associated with accessing medical means of managing withdrawal, including removing perceptions that services have an expectation of permanent recovery.

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Biography: Elena Gaschino is a former recovery practitioner with 16 years' experience working in the third sector. Elena retains a wealth of knowledge in the areas of substance misuse, addiction, harm reduction, recovery and desistance. Currently working as a lecturer in criminology at the University of Lincoln, Elena is in the final year of her Doctorate, investigating the value of emotions in achieving and maintaining recovery. Research interests include: recovery and addiction with a particular focus on SCRA's, positive and cultural criminology and the sociology of emotions.

'It's not about drugs, it's about people': Qualitative evaluation of the first year of the Drug Consumption Room in the city of Porto

Filipa Gonçalves¹

Non-presenting authors: Diana Castro², Catarina Simas^{1,2}, Marta Pinto^{1,3}

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Keywords: Harm Reduction, Drug use, DCR, Social Support

Abstract

Background: Many studies have reported benefits of implementing a drug consumption room (DCR), although many answers are still missing, especially regarding the best conditions for the design and implementation of those facilities. A pilot-project with one of those facilities was launched in August 2022 in the city of Porto, including a supervised injection room and a smoking room. This study aims to understand which are the strengths, challenges, and recommendations for improvement in respect to the DCR functioning, through the voice of PWUD and technicians.

Methods: Qualitative surveys were applied to 64 users and 2 focus groups were conducted with 10 PWUD in total to explore perceived changes in their lives and recommendations for improvement in respect to the DCR. Semi-structured interviews with 6 technicians were conducted to understand their satisfaction, potential obstacles and needs for improvement. Content analysis was conducted. Participant observation inside and outside the facility was also used to complement the previous approaches.

Results: Many benefits are mentioned by the service users- protection from discrimination and violence, companionship, feeling of belonging, hygiene, food, motivation to self-care, health and social support. Users complain about the small size of the facility, the short time to consume in the smoking room- both aspects considered as bringing more conflict-, the lack of privacy outside the facility, the insecurity they feel when the facility closes, the lack of space for social gathering after consuming and the need for more psychological support. Opinions are shared by PWUD on how to deal with conflicts and resistances.

Conclusions: Besides all the positive aspects, the physical structure requires adaptation to incorporate additional space, facilitate social gatherings following drug use and deliver high-quality emotional support interventions administered by the professionals. The major relevance attributed to this relational dimension by PWUD claims for more psychosocial models of DCR instead the more common medicalised. Those results will be integrated with the results from other studies with the aim of building guidelines on how to implement a DCR and how to solve common issues.

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From Stigma to Support: The Therapeutic Potential of Everyday Interactions in Heroin-Assisted Treatment

Vegard Haukland

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University of Oslo, RusForsk, Oslo University Hospital

Keywords: Stigma, destigmatization, heroin-assisted treatment, opioid agonist treatment

Abstract

Background: Stigma significantly impacts heroin users, leading to social rejection, discrimination, and barriers to recovery. Erving Goffman's framework on stigma provides insight into how negative labels and moral judgments alienate individuals, reducing their social identity and reinforcing marginalized statuses. Internalized stigma exacerbates feelings of shame, low self-worth, and hopelessness among heroin users, hindering their motivation to seek help and engage in recovery efforts. The therapeutic relational dynamics within heroin-assisted treatment (HAT) programs have the potential to mitigate these stigmatizing effects and promote positive identity reconstruction.

Methods: This study explores the relational dynamics within the Norwegian HAT program, analyzing data from 57 semi-structured interviews with 26 patients conducted over 18 months. The inductive thematic analysis was employed to identify key themes related to the therapeutic and destigmatizing effects of patient-staff interactions within HAT settings. Participants were recruited during their bi-daily clinic visits, ensuring a diverse representation of patient experiences.

Results: Three primary themes emerged from the data: the supportive role of staff, the honesty and active contribution of patients, and the positive social milieu of the clinic. Patients highlighted the non-judgmental, empathetic approach of staff members, which fostered trust and openness. The clinic environment, characterized by frequent, supportive interactions, allowed patients to feel valued and understood, counteracting internalized stigma and promoting positive self-concepts. Patients reported that the honest and open dialogue within the clinic, free from punitive measures, facilitated a sense of acceptance and reduced feelings of shame and secrecy.

Conclusion: The relational dynamics within Norwegian HAT programs play a crucial role in destigmatizing heroin users and supporting their recovery. Frequent, positive interactions between patients and staff contribute to the deconstruction of negative social labels and the reconstruction of more positive identities. This study highlights the importance of the therapeutic relationship in addiction treatment, suggesting that HAT programs can serve as effective social tools for reducing stigma and fostering healing. The findings underscore the need for further research into the destigmatizing processes within addiction treatment settings and their impact on patient outcomes.

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Note: This paper is in writing and has not been published yet. Results are preliminary and can be subject to change.

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Biography: Vegard Haukland is in his first year of his Ph.D. course in criminology. He holds an MSc in sociology and has worked as an addiction support worker in the Norwegian welfare system for the past five

years. He has also been involved in the street paper industry and prison work. His research interests include opioid addiction, welfare, social inequality, and the prison system.

Harm Reduction in the Community from Canada to Dyfed: the ‘Spike on a Bike’ Project

Joseph Janes¹ and Siân Roberts²

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Keywords: Harm Reduction, Rural Healthcare, Public Health, Drug Injecting Practice, Naloxone Delivery

Abstract

Harm reduction is one of the key strategies to improve the safety of drug injecting practices. This includes needle and syringe exchange which has numerous benefits, not least reducing the risk of blood-borne virus transmission, such as hepatitis.

During the coronavirus pandemic, most notably during the intervals of lockdown, there was a reduction in the uptake of harm reduction services. Dyfed Drugs and Alcohol Service (DDAS) observed a drop in service activity and as a result, a novel project was initiated. This was called ‘Spike on a Bike’ (SOAB) and provide a mobile harm reduction service. The objective of the service is for motorbike riders from DDAS to deliver pre-ordered harm reduction equipment to service users.

An evaluation was embedded alongside the service delivery and a Steering Committee was formed involving DDAS, Swansea University, University of Wales Trinity St David’s, Public Health Wales, and Hywel Dda University Health Board. This presentation will draw on the Canadian model that first enacted this novel methodology for low-threshold harm reduction services and fast-paced support distribution. Comparison and contrast between the models and lessons learnt for delivering harm reduction services from the local to the international sphere will be central to this presentation.

One primary finding is that this was a much-needed service for a potentially difficult-to-reach group as measured by a large uptake of harm reduction equipment. SOAB is particularly valuable in a rural area where the availability of public transport may be a barrier to accessing services.

Another finding was the wide geographical uptake for the service. Whilst it is unsurprising that major towns across Carmarthen, Ceredigion and Pembrokeshire had the highest uptake, services were also delivered to smaller communities across the area. This might suggest an unmet need in these communities. More than half of those using the service were under the age of 40 years of age and 50% were female. SOAB may thus be particularly valuable service to young adults who inject drugs in rural areas.

It is recommended that steps be taken to implement SoaB in other areas across Wales and wider. There is a clear need for the programme. It fills a serious gap in provision for service users, especially in rural areas, and embraces those who would not normally engage in services, as stated by a service user:

“I would never have engaged with services if it was not for Spike on a Bike; where I live and how I live my life made this nearly impossible; if the rider had not engaged with me several times, I wouldn’t have come into the service.” (Service User, Mr Thomas)

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Funding sources: BAROD, Hywel Dda University Health Board, Swansea University.

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research specialisms are within Harm Reduction and Substance Use as well as Welsh Policy and Devolution within the youth justice system. His current working projects include Spike on a Bike, in collaboration with the Hywel Dda Health Board and Dyfed Drug and Alcohol Service, alongside a project for Public Health Wales mapping hidden populations of substance users in Wales as well as a project exploring harm reduction and drug testing at UK festivals. 2) Siân Roberts works for Barod, a Welsh substance use charity, as their Operations Manager. Siân has worked within the Health and Social Care field for 19 years, dedicating most of her career to the substance use sector. She has lived experience having been a young carer to a family member who is alcohol dependent. She is a true harm reductionist and is passionate about making a difference to people's lives. She has led change and innovation in service delivery and operations.

Methodological challenges in conducting qualitative drug research in warzones

Zsuzsa Kaló¹

Non-presenting authors: Judit Szécsi², Róbert Csák³, Dániel Varga⁴, Katalin Felvinczi¹

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Abstract

Background: The Hungarian InterChurch Aid commissioned a study from us to conduct qualitative drug research among young people and treatment providers. The goal was to understand the circumstances and experiences of drug use and the treatment facilities in Ukraine. However, due to ethical considerations and a confidentiality agreement with the Hungarian InterChurch Aid, we are unable to disclose the actual results. Instead, we aim to highlight the methodological challenges encountered while conducting qualitative drug research amidst the chaos and instability of conflict zones. Researching drug use and its socio-cultural implications in war zones presents unique methodological challenges due to the volatile and unpredictable nature of such environments.

Methodological challenges: 1. Ethical considerations loom large in this endeavor. Ensuring the safety and anonymity of both researchers and participants in conflict-affected areas is paramount. Navigating ethical dilemmas such as informed consent, confidentiality, and potential harm to participants requires careful planning and sensitivity. 2. Access to populations of interest poses a significant challenge. Conflict zones are often characterized by restricted movement, security concerns, and distrust towards outsiders. Establishing rapport and gaining entry into these communities demand patience, cultural sensitivity, and often, the assistance of local intermediaries. 3. Ensuring the reliability and validity of data collected in such contexts is challenging. The fluidity of conflict dynamics, rapid population movements, and the clandestine nature of drug-related activities make it difficult to employ traditional research methods. Researchers must employ innovative approaches such as snowball sampling, participatory observation, and digital ethnography to capture the nuances of drug use in warzones accurately.

Lessons learned: Risk Assessment: Conduct thorough risk assessments before entering a conflict zone. Identify potential threats and plan accordingly. Local Partnerships: Collaborate with local organizations and individuals who have a deep understanding of the area and its dynamics. They can provide critical insights and assist with navigation and logistics. Access and Trust: Gaining access to participants can be difficult. Building trust is essential and may take time. Utilize local intermediaries to facilitate introductions and vouch for your intentions. Despite these challenges, such research is crucial for understanding the complex interplay between drug use, conflict, and resilience in some of the world's most vulnerable communities.

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Funding sources: Hungarian InterChurch Aid

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‘Becoming an addict means coming home’

Petter Karlsson

Lund University, School of Social Work

Keywords: drug ethnography, medical theology, moral sociology, genealogy, Narcotics Anonymous

Abstract

Background: The UN drug conventions, which have been ratified by almost every country, mandate punishment for those who intentionally use substances classified as “narcotic drugs” or “psychotropic substances”. The rationale is that these people could have chosen not to use the drugs regulated by the conventions, and therefore they should be punished. At the same time, the UN insists that people who are recognized as drug dependent should not be punished because they did not choose to use drugs. In other words, people who use drugs in ways that the UN deems inappropriate are simultaneously recognized as criminally responsible and innocent. The focus of this study is on how this contradictory framing of people who use drugs in ways that are considered inappropriate has emerged historically.

Methods: The study is based on a three-year ethnographic study of a Narcotics Anonymous group in Sweden and a genealogical study of different conceptualizations of drug use that are considered morally illegitimate.

Results: The analysis suggests that Narcotics Anonymous concepts of addiction, recovery, and relapse are based on the medical-theological doctrine of Original Sin formulated by the church father Saint Augustine. The same is true of the concept of “abuse” used in the UN drug conventions. Furthermore, the analysis suggests that the concept of “drug dependence,” which holds that some people who use drugs in ways considered inappropriate do so unintentionally, is based on Rene Descartes concept of free will and Jean-Jacques Rousseau’s reversal of the doctrine of Original Sin.

Conclusions: The study challenges the premise of the “medicalization of deviance” theory, arguing that the traditional Christian concept of sin does not differentiate between immoral behaviour and disease. Rather than transitioning from badness to sickness, there has been a historical shift in the understanding of disease.

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Managing competition in hybrid drug markets: Competitive edge, co-operation or conquering the competition

Nina Tvede Korshøj

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Keywords: Drug markets; Hybrid; Social Media; Competition; Conflicts; Co-operation

Abstract

Background: Handling and dealing with competition in drug markets isn't a new phenomenon, but social media platforms, such as Facebook, Snapchat, Reddit and Telegram, have enabled young drug dealers to scout their competition and gain information in new and innovative ways. This presentation will explore how hybrid drug dealers utilize opportunities mediated by social media platforms (specifically Snapchat) to position themselves in the drug markets and deal with competitors in various ways.

Methods: The presentation draws on in-depth online mediated oral interviews with 25 young Danish adults, who all have experience with dealing drugs via different social media platforms, and netnography conducted on various social media platforms and encrypted messaging apps.

Results: When the young dealers position themselves in the markets, the technologies can mediate different opportunities for action and strategies. These opportunities can create complex dilemmas and relations between the dealers, and the pros and cons of what action to take, must be taken into consideration. From my study, I have characterized these actions and strategies as ranging from, 'conflict' to 'co-operation', which I have divided further into three subcategories: 1) conquering competition, 2) competitive edge, and 3) co-operation. By giving examples of different actions within the three categories, and the potential dilemmas that can follow, I will explore what role the technologies play, when young people try to navigate in these competitive relations.

Conclusion: The young dealers' actions and decisions have the possibility of resulting in future cooperations or rivalries. By exploring a common (and previously studied) phenomenon in the drug markets, through a 'new' technological lens, I will contribute to existing drug market research, by demonstrating how young dealers scout their competition and position themselves in the hybrid drug markets. Further, I will also illustrate how these actions play out both in online and offline spheres, underlining the hybrid nature of dealing drugs via social media.

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Stakeholders' possibilities and attempts to influence drug policymaking in Sweden

Tuulia Lerkkanen

Stockholm University, Department of Public Health Sciences & Centre for Social Research on Alcohol and Drugs

Keywords: drug policy, stakeholders, influence strategies, lobbying, Sweden

Abstract

Background: Reflecting on drug policies in different countries, various actors seek to achieve certain policy goals by using different methods. The use of different influence strategies in this highly polarized and value-loaded area may vary among stakeholders, as much as the access to strategies. In this presentation, the possibilities and attempts to influence drug policymaking are discussed by using a Swedish case study. It is asked “What kind of influence strategies do different stakeholders use while trying to influence drug policymaking in Sweden?” and “How do the stakeholders discern their own and other stakeholders’ possibilities to influence drug policymaking within the Swedish drug policy field?”

Methods: The data consisted of semi-structured key informant interviews with stakeholders within the national-level Swedish drug policy field (N=38). Qualitative content analysis was used as a method, and previous literature on political influence strategies and the power/interest matrix by Ackermann and Eden (2011) were applied as a theoretical framework.

Results: The preliminary results show that the majority of the stakeholders use both “direct” and “indirect” strategies when trying to influence drug policymaking. Some of the stakeholders have more resources to choose strategies than others hence indicating the importance of power. The majority also argued that they have possibilities to influence drug policymaking, despite that many stated that they do not actively try to influence. The respondents agreed people who use drugs (PWUD) and significant others are two stakeholder groups that cannot get their voices heard, and possible solution suggestions were reflected.

Conclusions: This study provides insights about different actors and their power and interest in drug policymaking processes. Certain strategies are considered more legitimate than others, and access to resources is linked to better possibilities to influence – hence power is more important than interest which puts PWUD and significant others in a weak position.

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Biography: Tuulia Lerkkanen is a PhD candidate at the Department of Public Health Sciences at Stockholm University. Her PhD project focuses on stakeholder interests in drug policymaking in Sweden. Her research interests include public health policy, drug policy, and addictive substances and behaviours.

‘Are we there yet?’

Michael Linnell

Keywords: Harm Reduction, Media, Public Engagement

Abstract

‘Are we there yet?’ is a discussion of the trials and tribulations of the early pioneering years of producing harm reduction information the UK and introduction to his exhibition, A Harm Reduction Retrospective.

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Biography: Michael Linnell did his first degree in fine art and his MSc in Health Education. He once earned a living by diving off the top of a Transit van into a bucket as part of a comedy acrobatic act. He was the former Director of Communications for a national drugs charity before establishing his own business in 2014. In the 40 years he has worked in the drugs field he did everything from working on needle exchanges when they were still illegal in the U.K to running drug research projects in Siberia; although his main job involved researching with the target audiences, writing, illustrating and designing hundreds of harm reduction booklets, posters and animated films. In 2016 he wrote the national guidelines for drug early warning systems (EWS) and currently manages the EWS for Greater Manchester, Lancashire, Cumbria, Cheshire West and Chester and Bradford. He also co-ordinates UK DrugWatch and works as a researcher on the annual drug trends study for Greater Manchester.

The worried public in local media reporting on harm reduction: Rightful local witnesses or uneducated obstacles to change

Josefin Månsson and Katarina Winter

Stockholm University, Department of Social Work

Keywords: media, harm reduction, public, counterpublic

Abstract

Background: In 2018, the planned opening of a second Needle and Syringe exchange Program (NSP) in Stockholm, Sweden was stopped with reference to loud protests from the public. In local Stockholm media, politicians are cited saying that the initiative was taken by politicians who had “zero knowledge about what makes citizens upset” and referred to reported public concern about a pre-school in the vicinity of the planned NSP. This illustrates the importance of the public – and the idea of public opinion – in relation to political and medial aspects of alcohol and other drug (AOD) issues. Turning to the influential work on publics and counterpublics by Michael Warner (2002), our aim is to scrutinize how “the public” is produced in local print media reports on harm reduction measures such as the NSP, to illuminate how these representations operate and what reality/ies they co-produce.

Methods: We analysed 171 articles reporting on harm reduction in local Stockholm print media (years 2012-2023). The themes identified in the analysis are a combination of data-driven empirical observations along with a theory-driven approach based in the literature on publics.

Results: The overarching articulation in the material is that of a single and homogenous public. Public opinion related to local experiences of individual drug use and harm reduction is described as guided by fear and worry of having to live side by side with “messy others”, producing a public of worried local community witnesses. This articulation however takes on two different meanings depending on the narrative of the articles: 1) as righteous and entitled, 2) as ignorant and irrational. The public thus comes to operate as either a consulted public who should be given consideration in implementing harm reduction policies or as an uneducated political obstacle to change.

Conclusions: It has been suggested before that when scientific knowledge has been covered by the media, it is hard to ignore in policy-making processes. It can be argued that it is equally difficult to ignore the singular image of a worried public once it has been represented in the media. The implications of such media representations are significant as they risk disguising the complex nature of publics as a multiple group of individuals and reproduce taken for granted ideas about local communities opposing harm reduction measures. As such, they can limit well-needed policy responses to AOD issues.

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Note: The study is located within the research project Risks of Injecting Drug Use in a Swedish context (RISK): Prevention of harms in practice according to users, treatment staff and societal actors.

Funding sources: This work was supported by FORTE (dnr 2021-01712).

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Stigma and stress: The impact of prohibition on the experiences of prescribed cannabis patients

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Keywords: Cannabis; stigma; drug policy, prescribing

Abstract

Background: A change to UK drug law in late 2018 legalised cannabis prescribing. This creates a contradictory social and criminal justice policy environment, in which those who are prescribed cannabis occupy a liminal position - lawfully medicating in a context where it remains otherwise illegal. The commitment to prohibition, and the fact that the law change has not been widely publicised, mean that cannabis stigmas persist. This paper examines the impact of this on people who are prescribed the drug. This is relevant to contemporary policy discussions occurring throughout Europe around whether to prescribe and indeed whether to legalise generally. In this nascent European policy context, it is helpful to draw on data from countries who have a history of prescribing, decriminalisation and/or legalisation to understand the impact of drug policy on people who need cannabis medicine.

Methods: This paper presents data from qualitative online interviews in the first sociological study of UK cannabis patient experiences. It compares this with findings from countries with different legal contexts. The paper employs concepts of 'stigma power' (Link and Phelan, 2014) and the 'stigma machine' (Tyler, 2020) to situate these experiences, focusing on the harms caused by neoliberal agendas and subsequent commitments to prohibition.

Results: The research identified that contradictory policies; a lack of training for professionals; and the legacy of prohibitionist constructions of cannabis, result in a range of harms for UK cannabis patients, particularly stigma. Patients are not passive recipients of stigma, employing what we term concealment, (re)construction and evangelism, to resist these processes. Research findings from contexts without prohibition demonstrate that stigma harms can be reduced.

Conclusions: This paper evidences the need for comprehensive professional and public education about the legality and status of cannabis as a medicine in the UK, to try to reduce stigma. It argues that to reduce stigma and inequality for cannabis patients, education must be accompanied by critical reforms of drug policy. These findings are timely for European countries who are currently (re)considering their approach to cannabis policy.

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Funding sources: Liverpool John Moores University

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Biography: Dr Lindsey Metcalf McGrath and Dr Helen Beckett Wilson are Senior Lecturers in the School of Justice Studies, and members of the Centre for the Study of Crime, Criminalisation and Social Exclusion (CCSE) at Liverpool John Moores University. Lindsey has a background in sociology, criminology and social policy research. She has lived experience of supporting someone with a cannabis prescription for their chronic illness. Helen is a drug policy analyst with a background in (inter)national criminal justice policy research. Our collective experience motivated us to research the journeys of other cannabis patients.

'Being such a woman': Making sense of the client role in low threshold drug services

Maike O'Reilly

University of Bremen, Institute of Public Health and Nursing Research

Keywords: low threshold drug services, drug related welfare policy from below, drug using women

Abstract

Background: Since the mid-1990s, low-threshold facilities in Germany have been regarded as a central instrument for the so called socially acceptable regulation of open drug scenes. In this field research is largely dominated by quantitative evaluation studies that aim to provide objective and evidence-based proof of the effectiveness of individual programs. However, it is largely under-examined how clients perceive their use of these services, how their use affects their self-image and which strategies they adopt to deal with the institutional framework and the professional attributions conveyed there.

Methods: In total 18 episodic interviews were conducted with female users of low-threshold drug services in Frankfurt/Main. The interviews were analysed according the 'pragmatic' Grounded-Theory-Methodology. A reconstructive approach has been chosen to examine how users present themselves when talking about their use of low-threshold drug services, how they interpret their actions and how they make sense of their experience.

Results: A typology of three different modes of appropriation was reconstructed: affirmation, sovereignization and self-assertion. A first group of women insist on their own reintegration efforts and their high willingness to cooperate in helping relationships (affirmation). They thus distance themselves from the ideal type of 'junkies' who are, so the discourse, unruly and unwilling to change. A second group relativizes the idea of their need for help and the associated ideas of personal failure, vulnerability, and personal deficits (sovereignization). These women emphasise much more their everyday problem-solving skills and their control over their consumption and their living conditions and present themselves in an autonomous, capable, and sovereign role. A third group of users take the role of an advocacy corrective and scandalize the structural power asymmetry and stigmatization of drug users by staff in low threshold drug services (self-assertion). However, they do not argue morally, but politically and refer to inalienable social rights such as health, social participation, and equality, which they believe are insufficiently considered respected in low-threshold drug services.

Conclusions: The results show that the use of low-threshold services is ambivalent for the clients and is interpreted as a stigmatising marker of downward social mobility and deviation. However, it is becoming evident that female users develop various strategies to deal with these subjectively problematic aspects of the client role.

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Biography: Maike O'Reilly studied sociology and gender studies and is currently a doctoral student at the University of Bremen. Her research is interested in the impact of welfare transformations on the users of social services.

Social determinants of drug-related harms: harm reduction in precarious times.

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Keywords: Harm reduction, drug-related deaths, health inequalities

Abstract

Background: Drug related harms and deaths cluster in areas of deprivation and are contextualised by high levels of social and health inequalities and precarity. Harm Reduction tends to focus on technocratic and clinical solutions to address risky substances and risky behaviours – broader social and structural factors are left unaddressed. The mandate for the new European Union Drugs Agency (EUDA) acknowledges the impact of the social determinants of health (SEDs) on drug use and its implications for policies and responses and heralds a new direction for drug and harm reduction policies. This paper, based on research conducted in Scotland which has one of the highest rates of drug-related deaths in Europe, provides an illustrative case study of how the SEDs (the conditions in which people are born, live and their access to power and resources) impacts on drug use.

Methods: A ‘social autopsy’ methodology traced the lived experience of young people and their interactions with services and state agencies prior to their drug-related death. A social determinants of health (SDH) conceptual framework (Dahlgren and Whitehead, 1991) informed a thematic analysis of all available data (both paper and electronic) from health, social care, police, and post-mortem records for a cohort of young drug-related deaths in a Scottish region (n=22).

Results: The study found a high level of ill health, particularly poor mental and physical health, among the cohort of young people. Under each of the categories of the social determinants’ framework (Socioeconomic environment; Healthcare; Networks; and Lifestyle) a pattern of adversities, systemic barriers, and structural violence underpinned and exacerbated their drug use and its outcomes. Drug use harms were just one of many difficulties the young people experienced, yet this was the primary focus of drug services and health and welfare agencies.

Conclusions: Using a Social Determinants of Health analysis provides an in-depth understanding of the complex interconnected factors and unmet needs that underpin drug-related harms and deaths. This analysis attends to the need for drug policy and harm reduction responses that move beyond neo-liberal tropes of individualisation and responsabilisation and address broader social contexts.

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Funding sources: Corra Foundation, Scotland. <https://www.corra.scot/>

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Biography: Professor of Substance Use and Social Policy at the University of the West of Scotland (UWS). Director of the Centre for Social, Health and Environmental Inequalities Research. Leads a programme of co-produced social research exploring the social, structural and policy contexts of drug-related harms and deaths. Former Board member of ESSD (2016-2022), current director of the International Society for the Study of Drug Policy (ISSDP).

Understanding the cultural significance of cannabidiol in the United Kingdom

Joe Price

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Keywords: Cannabidiol, Cannabis, Drugs Cultures, Legal Drugs, Ethnography

Abstract

Background: The cannabidiol (CBD) market has grown exponentially in the UK in recent years. The rapid growth of the industry has caused confusion over the legal and regulatory status of the substance. This raises questions over the cultural understanding of CBD and cannabis. Previous research has shown clear medicinal and pharmacological benefits of CBD but has lacked any understanding of the social and cultural aspects of consumption. Examining the reasons, patterns, and barriers of consumption will produce a clear understanding of the environment and purpose of CBD consumption. Therefore, this research project is investigating the history and cultural significance of CBD and the demographics of consumption within the UK. Specifically, analysing the relationship between CBD, cannabis, health, and wellbeing cultures.

Methods: The project is analysing the potential connections between CBD culture and cannabis culture through interviews and ethnographic fieldwork with consumers of CBD in addition to CBD shop owners and consumers. Online anonymous questionnaires and interviews will assess the culture around CBD, by asking consumers about the environment, reasons, and ways they learnt about the substance. Participant observations in the CBD stores will evaluate the environment and customers' experiences when purchasing the substance.

Results: An extensive literature review of cannabidiol culture, the legal framework for CBD and the pharmacological literature on CBD will be outlined. In addition, the data from the online survey of CBD users and CBD store owners will be reported to show the trends and findings. The results from the participant observations of CBD users around CBD stores in Manchester and Birmingham will also make part of the presentation.

Following on from the introductory presentation of my project last year, this time I will present an in-depth analysis of my findings after another year of intense research.

Conclusions: A clear link has been identified between CBD culture and other cultures, most notably cannabis culture and health and wellbeing culture, with tension evident between different cultures. There is also significant association with CBD and medicinal cannabis as well as an association with the wider cannabis legalisation movement.

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Biography: I am a postgraduate researcher at Lancaster University Law school with research interests in drugs cultures, specifically CBD and cannabis culture. My research specifically looks at the interactions between legal and illegal drugs in the United Kingdom. I work as an associate lecturer in the Law School, teaching research methods and academic writing skills. I am also working as a researcher on the widening participation project in the Law school.

Beyond a 'club drug': The diverse motivations for ketamine use and implications for harm reduction

Rob Ralphs

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Keywords: Ketamine, trauma, urology, harm reduction

Abstract

Background: Self-reported ketamine use has steadily increased in the UK in national surveys since the mid-2000s. Its use has been most associated with young adults and the electronic dance music scene and categorised as a 'club drug'. This presentation is focused on the increasing use of ketamine and associated harms by young people in Greater Manchester, England. It highlights key changes in its use from this year's GMTRENDS survey including increased ketamine use by younger, school-aged children; changing patterns of use beyond a 'club drug' to wider settings and motivations for use; and increases in the number of young people/young adults presenting to services for treatment (many with ketamine as their primary substance), often incorporating mental health and urological needs.

Methods: GMTRENDS is the UK's only regional annual drug trend survey. It is an interdisciplinary, mixed-methods project that incorporates online surveys of young people and professionals, covering 44 groups of substances from alcohol to Z-drugs; interviews with key professionals working with people who use drugs and forensic chemical analysis of drugs. The survey findings are used to direct drug testing priorities and more in-depth 'trend focus' reports for young people and adults. In 2023/24, the young person trend focus was on ketamine. This resulted in an additional 22 in-depth interviews with young people who used ketamine aged 14 to 24. In addition, we requested from local treatment providers: i) current ketamine related treatment data, and ii) case studies, to enable us to further our understanding of the scale of treatment need and the type of presentations, support needs and outcomes.

Results: Almost two-thirds (63%) of the 132 professionals who completed the survey reported an increase in ketamine use in Greater Manchester, typically in relation to young people. Of the 400 young people who completed the survey, one in six (16%) reported past year use, an increase from 6% in the 2022 survey. The motivations for using ketamine are wide ranging, including self-medicating anxiety, to chill-out at the end of the day and aid sleep. Professionals often discussed the relationship between dependent use of ketamine and childhood trauma. Because young people are using ketamine at a younger age, they are also presenting with urological complications at an earlier age. There is a lack of awareness of the risks associated with ketamine use and where awareness does exist, myths around risk-mitigation such as crushing ketamine to prevent bladder damage are common.

Conclusions: There is a need for more awareness raising for both young people and medical professionals regarding the risks of ketamine use and early signs of bladder damage. This includes a requirement for medical professionals to ask about ketamine use when patients are presenting with symptoms such as stomach pains. A whole systems approach is also necessary, including the development of a national ketamine treatment protocol. We also need to change the discourse around ketamine as a 'club drug'.

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Funding sources: Greater Manchester Mayor's Office Police and Crime Commission

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Biography: Rob Ralphs is a Professor of Criminology and Social Policy and Deputy Director of the Drugs, Policy and Social Change (DPSC) Research Centre at Manchester Metropolitan University. He has over 25 years drug related research experience that has spanned substance use, drug markets, drug policy and treatment responses. This has incorporated researching drug dealing gangs, prison drug use and markets, homelessness and substance use, image and performance enhancing drug use, new psychoactive substances, heroin, and crack cocaine, chemsex, 'club drugs', and evaluating and developing treatment responses.

From Research Subjects to Research Partners: Participatory Action Research as a Tool for Emancipation

Rebeca Marques Rocha¹

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Keywords: Participatory action research, Young people who use drugs, Decolonial approaches, Action-oriented research, Community engagement

Abstract

Background: Traditional academic epistemology based on Western paradigms requires scholars to be objective and impersonal. However, such research ethos carries a harmful potential, enhancing divisions and power imbalances between the researcher and the “researched”. This article argues that the stigma surrounding drug-related topics demands that social drug researchers embrace approaches aiming beyond the “do no harm” principle and embodying a transformative praxis that promotes good. Aligned with feminist and decolonial approaches and taking intersectionality as a provisional concept, we outline the positive contributions of participatory and action-oriented methods for social drug research.

Methods: Reflecting on two case studies of Participatory Action Research (PAR) conducted with young people who use drugs (YPWUD), we highlight the methodology’s generative power to respond to stigma resulting from the colonial legacies of the international drug control regime.

Results: In advocating for a paradigm shift to a more participatory, ethical, and inclusive research approach, the goal is not merely to refine methodologies but to redefine the role of research within society. Through the lessons of Youth RISE’s initiatives, we encourage more researchers to employ PAR to study drug-related issues. The pursuit of knowledge in partnership with communities can lead to transformative outcomes, ultimately striving towards research that not only seeks to understand but also to enact positive societal change.

Conclusions: Ultimately, PAR fosters community engagement and action, creating spaces for coalition building that enable the empowerment and emancipation of historically silenced populations.

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Funding sources: The two case studies highlighted in this paper were funded by the Robert Carr Fund through the Harm Reduction Consortium. The Harm Reduction Consortium is a global consortium working to challenge the global war on drugs (the critical factor affecting the rights of PWUD), to scale up access to HIV-related harm reduction services, and to advocate for greater resources for harm reduction. More information: <https://robertcarrfund.org/networks/2019-2021/the-harm-reduction-consortium-1>

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Biography: Rebeca Marques Rocha, the recipient of a 2023-24 Presidential Scholarship, is a PhD candidate in CEU’s Doctoral School of Political Science, Public Policy and International Relations, in Vienna. Her dissertation focuses on youth and community responses to drug-related challenges, focusing on drug policy and harm reduction. Rebeca is originally from Brazil and brings extensive experience as a practitioner and consultant in the field. She is currently the International Communications and Advocacy Programme Lead at

Youth RISE, an international network of young people who use drugs or who have been impacted by the war on drugs advocating for full spectrum harm reduction and human rights-based drug policies.

An evaluability assessment exploring policy change on the use of Ketamine for treatment of depression and addiction in Scotland

Anna Ross

Non-presenting author: Than-Lan Gluckman

University of Edinburgh, School of Health in Social Science

Keywords: psychedelics, ketamine, therapeutic, evaluation, drug policy

Abstract

Background: Ketamine is a promising rapid treatment for a range of mental illnesses including substance abuse and treatment-resistant depression. In the UK, ketamine treatment (+/- therapy) is available privately. In Scotland Forth Valley Hospital is listed as a study site for the upcoming phase 111 multi-site trial of Ketamine assisted therapy for alcohol addiction, The Royal Edinburgh Hospital in Edinburgh has plans to deliver 'esketamine nasal spray for treatment-resistant depression, and Eulas clinic intends to open Scotland's first Ketamine clinic.

Methods: Following Leviton (2010) process for conducting an evaluability assessment, the researcher spent 6 months carrying out interviews, workshops and documentary analysis to understand what pathways for ketamine treatment currently exist or are planned to exist, and how these pathways operate in form and function depending on the provider

Results: The implementation of Ketamine (+/- therapy) has no coherence or national policy underpinning it, and where policy exists, it is being implemented inconsistently.

Conclusions: The report from this project has identified barriers and pathways that exist, and makes suggestion for ketamine policy reform. Unless this framework is implemented there is a risk that ketamine therapy – and ergo psychedelic therapy – will not be implemented successfully across Scotland, and the UK.

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Funding sources: iTPA Wellcome Trust Accelerator Round 8 Grant

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Biography: Anna Ross completed her PhD in Sociology at the University of Edinburgh with a focus on drug policy stakeholder engagement. She has worked for the UK Government as Special Advisor to the Scottish Affairs Committees Inquiry into Problem Drug Use in Scotland, in addition, she has been on a range of drug policy advisory committees in Scotland, set up the Scottish Drug Policy Conversations: a multi-stakeholder deliberative group exploring drug policy issues in Scotland, is co-founder of the Scottish Psychedelic Research Group, is secretary to the Cross Party on Medicinal Cannabis, founder of the Scottish Cannabis Consortium, and co-convenor of the Drugs Research Network Scotland (DRNS): a Scottish government funded drugs research network.

A visual ethnography from a collection of 200 premium cannabis packets

George Simpson

University of Kent

Keywords: Cannabis, Cali Pack, Weed, Markets

Abstract

Background: Against a global backdrop of changing cannabis control for recreational use, this paper presents findings from an early analysis of a visual ethnography that explores the influence of Californian cannabis products on UK markets. The demand for and supply of high quality, premium, 'Cali' cannabis products is conceptualised here by presenting a sample selection from a collection of 200 premium cannabis packets gathered by the author from Kent. The central themes of this work are as follows; Part 1 – 'The Disneyfication of domestic cannabis markets in the UK' explores the emergence of Californian styled cannabis products, that have since become common in UK markets, Part 2 - 'UK flavours, UK flowers', presents findings on national cannabis brands that have emerged in the UK as direct competitors to these American imports. Finally, Part 3 – 'Down on Kent Valley Farms', explores the glocalization of cannabis markets and the influence of these Californian products in the design of packaging at local levels. Taken together these themes explore the evolving commercialisation of domestic cannabis markets in the UK. Overall, the paper finds that UK cannabis markets are becoming increasingly commercialised by distinctive brands that replicate their Californian influences as they compete with international imports in evermore open markets.

Methods: Visual ethnography, specifically sample selection from collection of 200 premium cannabis packets.

Results: Californian styled cannabis products have become commonplace in UK markets and whilst the exact origin of these imported products is up for debate their influence on the marketing and design of national and local cannabis products is clear to see through the packaging alone. Whilst the influence is clear, national and local cannabis suppliers have been able to craft distinct brands that can compete with American imports.

Conclusions: Overall, the paper finds that UK cannabis markets are becoming increasingly commercialised by distinctive brands that replicate their Californian influences as they compete with international imports in evermore open markets.

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Harm reduction in Vienna

Alfred Springer

Medical University of Vienne

Keywords: Harm reduction, historical perspective, scope of HR offers; future direction

Abstract

Background: Background: The implementation of the principles and guidelines of the harm reduction (HR) approach is an essential foundation of Vienna's drug policy. It is historically anchored and has its roots in the health policy of "red Vienna" in the 1920s and early 1930s. This health policy was taken up by Hans Hoff when 1950 he took over the management of the Vienna Psychiatric Clinic. This early type of HR was initially applied to the treatment of alcoholics and later extended to the treatment of adolescent drug users. During this period, influences from the Anglo-American world were also adopted: „release“ and other bottom-up initiatives; substitution treatment (Dole and Nyswander); conceptualization of harm reduction by authors such as Cartwright, Joseph, etc.

In Vienna, a comprehensive multidimensional system of HR offers was subsequently developed, including: - Safer use: syringe and needle exchange; safe use and safe sex counseling, - structural offers, - social work and street work, employment projects, vocational and social integration support, - survival support, food support and facilities for bathing as well as sleeping places and sheltered living spaces, - Support of Self-competence and empowerment, - medical offers: maintenance; social medicine; vaccination, etc., - innovative concepts and facilities. Particular importance is attached to a drug checking project that is offered on the premises of the scene without age restrictions. The results of the quality testing are made available to the help seeking individuals and, anonymised, to concerned professionals and authorities involved.

The expansion of medical support services has given Vienna's HR a more specific tone. Vaccination against hepatitis is offered and since some years a project for the treatment of hepatitis C is running in Vienna's addiction help center (Suchthilfe Wien). In the current situation, there are plans to expand hepatitis treatment to include other stigmatized populations, such as prison populations, individuals who belong to the LBGQT spectrum and sex workers. While no medically supervised consumption rooms have been approved in Vienna to date and no heroin substitution projects have been set up, a project has been implemented in the last two years in the Viennese addiction support system ("Suchthilfe Wien") in which opiate addicts are provided with hydromorphone for self-injection in a professionally supervised room. Naloxone is available in support facilities. Recently, the application of harm reduction strategies in tobacco/nicotine control has increased due to the recent development in dealing with legal everyday drugs.

Methods: Presentation of the development of the scope, tasks and methodology of the harm reduction principle in relation to problematic manifestations of substance use in Vienna.

Interpretation of the development from a political, historical and sociological perspective, taking into account personal experience as a player in this social and health policy field.

Results: The principles and demands of the harm reduction movement are comprehensively implemented in Vienna. Special emphasis is placed on the socio-medical care of problematic clients and highly developed drug testing. The wide-ranging development and implementation of the harm reduction concept in Vienna, which differs from comparable initiatives in other regions of Austria, can be understood as partly due to historical and political circumstances

Conclusions: The harm reduction system is well developed but must always be adapted to reflect changing problems. This currently includes expanding the diversification of substitution services for

opioid addicts, as well as improving/facilitating access to harm reduction services for various stigmatized individuals and social groups.

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The actors of community-initiated safer supply on the darknet: aggregated findings from a multistage research

Ákos Szigeti¹

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1) University of Public Service; 2) Simon Fraser University, School of Criminology

Keywords: darknet, cryptomarkets, safer supply, mixed methods, text mining

Abstract

Background: In the midst of the opioid crisis, darknet markets have provided new platforms for people to sell and buy drugs, reducing their perceived risks. Assessing how darknet markets actually reduce the risks is limited by the difficulty of directly reaching the anonymous actors. However, the emergence of text mining techniques has provided new research opportunities.

Methods: The first research stage was a multi-method study implementing qualitative content analysis and topic modelling on data scraped from the Dark0de Reborn darknet market. This was followed by a mixed methods study that implemented qualitative content analysis on the Dread darknet forum and evaluated the results in focus group discussions with harm reduction practitioners in Hungary and Canada.

Results: The research confirmed the applicability of Norbert Elias's social figuration theory to the darknet drug trade, framing it as a form of community-initiated safer supply, but also highlighting the shortcomings. In addition, the findings shed light on the crucial roles of delivery providers and harm reduction professionals among the other actors involved in the darknet drug trade process.

Conclusions: Safer supply surfing beyond the boundaries of national drug policies via the dark side of the internet calls for professional and universally accessible harm reduction and drug checking services. The methodological remarks of this research envisage the extension of the study to more darknet markets and other forums, as well as the inclusion of other actors in the harm assessment of the darknet drug trade.

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‘Why don't we just build it in a square hole?’- Developing and operationalising a multi-component drug and alcohol outreach service for young people aged 16-25 in England

Zoë Welch¹

Non-presenting authors: Sam Wright¹, Karen Duke²

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Keywords: Coproduction, young adults, harm reduction, resilience, outreach

Abstract

Background: In England over the last decade young people/adults' illicit drug use and drug-related harm has increased whilst youth-specific provision, outreach, and referrals for specialist substance use support have decreased. Recreational drug use is often normalised with young people/adults not recognising the risks.

Since 2018, Derbyshire's 1625 Outreach service has delivered a combination of universal, selective, and indicated harm reduction interventions in urban and rural settings across the county. The unique multi-component model aims to reduce drug-related harm and associated risky behaviours by increasing knowledge, skills and resilience through education, responsive outreach, festival stalls, night-time economy interventions and targeted social media campaigns.

Interventions are guided by multi-agency stakeholder input, targeting those most vulnerable to drug use at key transition points where risks are highest. This enables support to diverse, underserved groups, who typically do not engage with services

This paper explores how to operationalise a multi-component co-produced outreach model, its translatability and sustainability and ways to demonstrate its impact.

Methods: A scoping review of the drugs outreach and community engagement literature was conducted, a Patient and Public Involvement group of 4 young people co-produced the research design, and a Stakeholder Advisory Group comprising 7 local professionals oversaw the research activity.

The fieldwork defined the model, explored its place in the wider system, the workforce's leadership, knowledge, credibility and communication, and ways to measure impact. Fieldwork comprised: logged observations in 10 outreach settings; focus groups with three diverse groups of young people (n=19) representing age cohorts 16-17 and 18-25 (who co-produced a Theory of Change), and two practitioner groups (rural and urban) (n=12), and semi-structured interviews with young adult service managers (n=3). Two participatory workshops facilitated consultation and further exploration of themes (n=54). Qualitative data from each activity was recorded, captured, and analysed thematically.

Results: The multi-component/multi-agency model was agile, facilitating innovative responses to changing local drug use. Multiple placed-based approaches including digital outreach reached significant numbers of underserved groups including those with neurodiversity, LGBTQ+, and not in education, training, or employment. Lived experience of workers gave credibility and trust to relationships, and the team's position as lead agency in a multi-stakeholder system facilitated verification of local intelligence to provide a rapid, tailored response.

Conclusions: The model's place in the system allowed 'expert' leadership that inspires confidence and commitment. Young adults require specialist interventions and outreach services show promise in reaching groups vulnerable to drug-related harms. Findings have informed a pilot 1625 evaluation, now underway.

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Funding sources: This project was funded by the National Institute for Health and Care Research (NIHR) under its Invention for Innovation Programme (i4i) Programme (Grant Reference Number NIHR205261).

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Engaging the senses: The value of creative and arts-based methods for public understanding and engagement with drugs research

Lisa Williams

Keywords: arts-based methods, creative methods, public engagement

Abstract

Creative and arts-based research methods have developed and multiplied in recent decades, providing social scientists with alternative ways of knowing and understanding the world. They can help answer complex research questions and through their multi-sensory outputs engage different audiences with research. This paper draws on creative and arts-based methods projects undertaken by the author and others researching drugs. Their value in providing a more nuanced understanding of complicated phenomenon, improving public engagement and understanding, and achieving wider impact is discussed. The paper aims to inspire more drugs researchers to use these approaches to collect, analyse and present their data.

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Biography: Lisa Williams is a Senior Lecturer in Criminology. She has been researching drugs for over 25 years. Her interests revolve around: recreational drug taking, including why people take drugs and how their drug taking changes over the life course; dependent drug use, recently publishing about synthetic cannabinoids consumption among vulnerable populations; and creative research methods, especially arts-based and visual techniques. Her most recent research, a visual ethnography of recreational drug taking in the home, collected images of where and how people store their recreational drugs in the home and has been exhibited nationally and internationally.

Substance use among the Flemish Deaf Community: preliminary results and methodological reflections

Tamie Wuytjens¹

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Keywords: Deaf community, substance use, nature and extent, perceptions, qualitative research

Abstract

Background: International research shows that people with disabilities often face challenges that increase their risk of substance use disorders. Deaf individuals are no exception and may encounter even more risks linked to specific aspects of the deaf community, such as cultural and linguistic differences, and the realities of being a minority group. However, there is a lack of understanding both of the patterns of substance use within the deaf community and how these differ from those in the hearing society, as well as of the perspectives and experiences of deaf individuals themselves. This study seeks to provide more insight into the perceptions, extent, and nature of substance use among deaf individuals within the Flemish deaf community.

Methods: A comprehensive literature review was conducted on existing studies regarding the prevalence of substance use among deaf and hard-of-hearing individuals. Further, literature pertaining to research methodologies with deaf populations was extensively examined to ensure the approach was adequately adapted for the Flemish deaf community. Eleven respondents, ranging from 21 to 69 years old from various provinces in Flanders, participated in semi-structured interviews where they shared their personal experiences with substance use. All respondents identify with the deaf community and prefer Flemish Sign Language as their primary language. The interview transcripts were analysed using thematic analysis.

Results: Various prevalence studies suggest that there are no significant differences in substance use between deaf and hearing individuals, with a few exceptions. Additionally, important methodological lessons have been learned from previous research on deaf populations, and these lessons have been incorporated into this study. The results from the interviews indicate a preference for alcohol and cannabis, which are primarily used during activities within the deaf community. Substance use tends to be more frequent and intense among deaf individuals compared to their interactions with hearing individuals, with social dynamics and peer pressure playing significant roles. Due to the small size of the community, there is a taboo atmosphere surrounding open discussions about substance use and related issues. Furthermore, participants noted that current information on substance use is not adequately tailored to the needs of deaf individuals, and they face several barriers to treatment.

Conclusions: Since this is one of the first qualitative studies in the field of substance use among deaf individuals, further research is necessary to gain a deeper understanding.

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Attitudes towards substitution treatment among opioid dependent members of drug scenes

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Keywords: OST, drug scene, mixed-method

Abstract

Background: Despite high availability of OST in Germany, the number of treated patients remains stable since years. Our cross-sectional study aimed to evaluate OST attitudes and obstacles from perspective of “open” drug scenes.

Methods: A quantitative survey and accompanying qualitative interviews have been conducted in 2023 in Hamburg, Frankfurt, and three smaller cities. Eligible were adult opioid dependent individuals currently not in OST (never in OST or last OST more than 6 months ago). Participants were recruited through low-threshold drug services. Finally, 234 opioid users participated in the questionnaire and 27 of them in the interview.

Results: Almost 70% (n=162) have ever been in OST before. Former OAT was discontinued because of the desire to become abstinent (39%), the lack of take-home medication (32%), continued drug use (19%) and insufficient flexibility of the treatment procedures (19%). Lack of flexibility implied as not being involved in decisions about dosage and treatment duration. Respondents who never participated in OST rather often refused this treatment in principle (40%) as they regard the state as dealer or because they want to stick to drug use. In general, homelessness and crack use were important treatment barriers.

Conclusions: Beside OST refusal, the consumption of crack and increasingly of cocaine explain why OST is not an adequate treatment option. Individuals in need for OST clearly demand for participation in treatment decision-making.

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Funding sources: Camurus

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