The SAGE Handbook of
Drug and Alcohol Studies

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PART I

Central Social Science Theories in Drug and Alcohol Studies
The growing importance of drug and alcohol research for policy and intervention

Our general aim in producing this Handbook has been to map drug and alcohol research disciplines and to illustrate the contribution of different disciplines to the study of substance use. To our knowledge no such map currently exists. This map includes historical perspectives, and contemporary theoretical paradigms, it provides a state-of-the-art current debates and controversies, as well as sketching out emerging themes and new developments in the field.

In the last two to three decades, the interest in drug and alcohol issues has increased markedly in many societies. This is due both to an increase in worldwide use of substances and an increased political focus on both illegal and legal drug use. This societal interest is also reflected in academia, in social and health policy developments at national and international levels, and in the growth and diversification of professional services. Research on prevention, treatment, harm reduction, policy and recreational consumption has been conducted from a range of different disciplinary perspectives, e.g. sociology, political science, history, biology, psychology, psychiatry, pharmacology, cultural studies, gender studies, geography, anthropology and economics. Consequently, the field by its very nature is inter-disciplinary and this characteristic is reflected in the Handbook. As a result, the Handbook is divided in two volumes reflecting both a social science and a biological approach. While for many researchers, students and professionals both areas are important, the division into two sections allows a more meaningful way of compiling the contents in order to address the core interests of different groups of readers.

During the last 15 years or so, drug and alcohol studies has become a more established academic field of research involving researchers from different countries across the world.
globe. Currently, drug and alcohol research centres and specialist units exist in a wide range of countries, either as departments in universities or as independent (public or private) research institutions. As a consequence, programmes and courses in drug and alcohol studies are offered at a number of academic levels, including foundation programmes, undergraduate and postgraduate degrees, as well as specific training for professionals in the field and also bespoke courses for students from a range of other academic disciplines. The exponential growth in specialist alcohol and drug peer reviewed journals is a further testament to the growing importance of this area of research. In addition, drug and alcohol research is also being funded by both national and international funding agencies including for example, the Medical Research Council (MRC) and the Economic and Social research Council (ESRC) in the UK, National Institute on Drug Abuse (NIDA) and National Institute on Alcoholism and Alcohol Abuse (NIAAA) in the US, the National Health and Medical Research Council (NHMRC) and the Australian Research Council (ARC) in Australia, and the European Union. Consequently, the title ‘Handbook of drug and alcohol studies’ has been deliberately chosen as a way of reflecting this growing importance.

It has been our aim, that the Handbook reflects the state-of-the-art analytical and theoretical advances in the drug and alcohol research fields. As stated above, these advances stem from a range of different disciplines and research traditions. However, many issues and even key concepts are still contested, debated and discussed and therefore, the Handbook also covers such discussions and controversies. In this way, while we have not aspired to settle discussions about controversial issues by offering final authoritative arguments and summaries, we do hope that the Handbook will be an inspiration for readers to continue their engagement in reflecting on and debating contemporary and controversial areas of drug and alcohol issues. For instance, there is a growing discussion in the field about the concept of addiction, a concept which has now spread to other areas of research far beyond the confines of substance use. Also, we have witnessed recently an increased interest in issues of pleasure as essential components in drug and alcohol research, a situation rarely seen before. Other examples of the flux within the drug and alcohol research field include a growing interest in the use of new psychoactive substances, non-medical use of prescription medicine, and alcohol use among the elderly. In the Handbook we have found it useful to recognize such developments and to offer critical discussion of concepts and changes in empirical focus. Moreover, the drug and alcohol research field also involves a broad, debated and continuously changing terminology. Terms like use, misuse, substance use disorder or recreational use are used by researchers and policy makers alike to serve different purposes. Such multifaceted, unsettled and debated use of terminology is also reflected in the Handbook chapters in which one will find different definitions and perspectives, reflecting the diversity of the field.

Increasingly, the issue of ‘evidence’ underlies much of the debates, the fluctuating use of different concepts and terminologies and the proliferation of variable perspectives on drug and alcohol policy and practice. The demand for policy and practice to be ‘evidence based’ or at least ‘evidence informed’ has become a core element and even mantra of the research-policy-practice nexus. The chapters in the Handbook invite reflection on the nature of evidence, the types of evidence produced from research studies and the use – or lack of use – of research findings in policy and practice. Chapters draw extensively on a wide range of empirical studies that employ both quantitative and qualitative methods – experimental trials of different sorts, documentary analyses, focus group discussions, interviews and observational approaches, to name a few. But they also provide a critical
approach to this evidence, illustrating the often different and conflictual nature of evidence; the ways in which evidence develops and changes over time; the importance of considering the sources of evidence; the different types of evidence available to policy makers and practitioners and the ways in which evidence is produced and used in the alcohol and drugs field. These themes run throughout the chapters and offer the reader a window of opportunity to look more carefully and critically at the findings and insights derived from academic research.

Finally, although we intend the Handbook to provide an overview of a very disparate research field, we also believe that by demonstrating the role of the diverse disciplinary theories and methodological approaches in providing research based ‘evidence’ and insights, the Handbook also shows how the drug and alcohol research field thrives in its interdisciplinary approach and how it can contribute usefully to policy and practice.

It is our intention that the Handbook can provide academics, postgraduate and undergraduate students and drug and alcohol professionals with a high quality interdisciplinary reference book that covers contemporary key issues and central controversies in the drug and alcohol research fields. Moreover, currently, an increasing number of universities are offering programmes and courses in drug and alcohol studies, schools’ curricula cover alcohol and drug issues, and healthcare providers seek to equip those working in a variety of disciplines (such as, accident and emergency, mental health, social work/welfare, forensic services and the judiciary) with the skills to manage drug and alcohol use. Hopefully, the Handbook will be a resource for the growing academic drug and alcohol research community, especially at a time when the issues are gaining prominence in both policy and practice domains.

The Handbook contributors to this volume represent a wide range of expertise in the various disciplines in the social sciences. These authors have, we believe, been able to offer critical and up-to-date articles on contemporary issues and debates within drug and alcohol research. However, even though we have aimed at a geographically dispersed group of authors (Africa, Asia, Australia, Europe and US), we must also recognize that most authors are from the Global North or Anglophone countries. This may reflect our inability to engage a more geographically dispersed group of contributors. More likely, it also reflects the fact that most current written social science drug and alcohol research comes from a relatively small group of (affluent) countries and is published in English language journals. When reading the Handbook therefore, one should recognize and reflect on possible bias in the content and analyses in order to judge the potential global relevance of the different discussions in the chapters. In other words, maybe even the perspectives and assumptions which informed the development, content and approach of the Handbook are biased toward what was seen to be relevant within a Western context at the time this Handbook was assembled. In two chapters of the Handbook (chapter 31 and 32) such issues are addressed. Here the authors reflect on whether a Western discussion and issues of concern in the drug and alcohol field can be exported to non-western countries. We acknowledge that there are other biases and gaps in the Handbook coverage. The enormous range of issues in this field meant that choices had to be made about what to include and exclude. In particular, a decision was made not to focus on research into smoking. At the time when we were planning the Handbook there were few controversial issues or new debates in this field, although subsequently the widespread availability and growth in the use of e-cigarettes has brought renewed vigour into discussions and research around smoking. At the same time, many of the debatable and critical issues covered in the chapters could also be used to reflect on current policy and intervention in smoking behaviours (or other areas of addiction)
OUTLINE OF THE HANDBOOK

This volume includes 39 chapters, divided between three parts. Part I focuses on theoretical and historical issues, whereas Parts II and III have been chosen to reflect key substantive areas in drug and alcohol research, with particular emphasis on emerging issues. Part II is divided into four subsections, which cover the central ‘pillars’ within the area: regulation, prevention, treatment and consumption, focusing on the most important research areas as well as on new developments. Part III covers central controversies in policy as well as within drug and alcohol research. Some chapters deal with classic controversies, while others look towards emerging and future debates.

Part I

Part I introduces the field, first, by outlining the interdisciplinary nature of the drug and alcohol research field. Second, it provides an historical view of the production, consumption and distribution of substances in human societies focusing on the last two centuries. Third, it introduces the theoretical resources available for addressing current research areas in drug and alcohol studies. Together Part I provides an overview on how research and social science paradigms have developed in the field of drug and alcohol studies. While specific theoretical “ancestors” do not exist, it is nevertheless the case that the ancestors have been “borrowed” from other disciplines including sociology, psychology, anthropology, history and criminology, and most recently cultural and geographical studies. It should be noted, that while the Handbook does not include a specific theoretical chapter on economics, nevertheless a discussion of economic aspects of the drug and alcohol research are addressed directly in two of the chapters in Part III, focusing respectively on the legal (chapter 38) and illegal (chapter 37) drug and alcohol economy. Also, the Handbook does not have a theoretical perspective from the field of Epidemiology. The reason is that while critical reflections exist in Epidemiology itself, we found it difficult to uncover a similar critical reflection on public health and epidemiology from within the field of drug and alcohol research. Epidemiological thinking and research is however represented in chapter 12 on National preventive approaches and in chapter 36 on Public Health approaches to psychoactive substance use – a critique. Such ‘omissions’ however, also reflect the interdisciplinary status of (social science) drug and alcohol research. In fact, we argue that it can be difficult to determine exactly where the field begins and ends, and which disciplines and approaches should be included and which left out. In the Handbook the chapters in Part I represent our view as editors on those disciplines we believe have contributed most significantly to the theoretical development of drug and alcohol research. Part I also lays the basis for the rest of the Handbook by providing the historical and theoretical framework within which the Pillars and Controversies can be understood.

Part II

This section focuses on what we see as the four central pillars in drug and alcohol research: regulation, prevention, treatment and consumption. These pillars thematically encompass much of the pertinent social science research on drug and alcohol issues, in spite of the possible overlaps that exist between the categories. In Part II we have deliberately included articles examining the four central pillars from different levels of analyses. These analyses include: i) an examination of the role of global alcohol and drug policy in regulating policy internationally and nationally – raising questions of the extent to which international policy does in fact impact on national policy and action;
ii) an exploration of national policy and its links with strategic action at community level, which illustrate the potential and the constraints arising from growing trends towards devolved policy making and local governance of alcohol and drug service provision; iii) a consideration of changing perspectives regarding what is considered appropriate policy and practice responses – reflected in the chapter on harm reduction and recovery; iv) a discussion of organizational and practice based aspects of treatment, including issues around workforce development, a neglected area of research which, nevertheless, has become increasingly relevant as the drug and alcohol field in many countries experiences rapid structural, ideological and political change; and, finally, v) an interest in identities, context and discourses related to consumption. The different theoretical perspectives, which are presented in Part I are illustrated here as they link with the four pillars.

Part III

The final section has a focus on key debates and controversies that have existed in the drug and alcohol research fields, both historically and in the contemporary period. The controversies included here are not necessarily comprehensive as the field is fast moving, with new issues constantly emerging as knowledge, novel substances or political and policy contexts change and demand fresh thinking and new research. Some chapters present classic controversies, for instance, on the definition and understanding of ‘addiction’, on the (de)criminalization of drug use, and on the links between individual characteristics such as gender, ethnicity and socioeconomic status, substance use and the effects of use. These issues have been the focus of research and debate for the past two centuries and continue to spark lively exchanges and a stream of publications. Other chapters reflect controversies which have arisen in the past, died away and been re-awakened. For instance, the more recent shift to a broader population based view of consumption and harm from legal substances and the implications for policy and practice, is addressed in chapter 36 on public health approaches to substance use. Although, in some national contexts, there have been earlier population-wide measures aimed at regulating substance use, notably alcohol, we are again witnessing a rise in debates around the merits of adopting interventions, which target individuals compared to interventions aiming to influence the behaviour of populations as a whole. The role played by different stakeholders and interest groups in the alcohol and drugs field runs through the chapters with chapters 37 and 38 taking up current controversies on legal and illegal economies and drawing attention to the part played by major economic players as well as by less visible players in influencing the direction of policy. Emerging and possible future debates also find a place in this section in chapters which, for example, consider drug and alcohol consumption and responses to problematic use among prisoners, sex workers and among homeless populations, and development of interest in the ontological contingency of drugs and the discussion of possible policy implication hereof. Discussions merge and complement each other across chapters and may prove difficult to disentangle. However, while each chapter stands on its own, together the chapters provide a critical portrayal of the extent to which the drug and alcohol research fields are lively, politically value-laden, and highly contested.

CREATING THE HANDBOOK

We started work on this Handbook in 2011, submitting a proposal for the structure and chapter outline to Sage. Based on the valuable comments received from a comprehensive review panel and from our editorial
board members, we revised our outline; adding new chapters, modifying some and merging others. We then began the process of identifying potential authors and experts in order to represent the complexity and diversity of the field. We wanted to include authors from different parts of the globe, from different social science backgrounds, and at different stages of their careers. Completion of this task was lengthy and elaborate and we faced many challenges in recruiting the writers we wanted. As is increasingly the case, many of our colleagues felt that they were currently over-worked and when asked to contribute to the Handbook some declined because they did not wish to take on yet another commitment. Nevertheless, we were fortunate in achieving most of the objectives we had set ourselves and in gaining collaboration from an excellent range of experts in the field. Having chosen the authors, we encouraged them to amend, augment or, indeed, change, our initial summary outline of the chapter that we wished them to write, and add their own interpretations, views and ideas about the topic. Consequently, each of the chapters can be seen as a highly individual and original expert contribution. All chapter submissions were then anonymously reviewed by at least one external reviewer and by two people from the Editorial Board. Revised chapters were then re-reviewed and further revised until we considered them to be of a publishable standard. In sum, the Handbook can be seen as a collaborative project characterised by lively debates and discussions between us as editors, the individual authors, the editorial board, reviewers, and the publisher. Hopefully readers of the Handbook will also add their own layer of interpretation to the perspectives, insights and conclusions offered in the chapters, ensuring that the drug and alcohol research fields will continue to be debated, developed and never completely finalised.