

ANTH1006:

Drugs Across Cultures - S3 2020/2021

WEEK 1

- 2 Drugs, Pharmaceuticals and Anthropology
- 2 Ethnographies of Drug Use
- 3 Hallucinogens
- 5 Drug Symbolism
- 6 Drug Law Reform
- 7 Readings

WEEK 2

- 10 Cannabis
- 13 Cocaine
- 14 Readings

WEEK 3

- 16 Neuropharmacology
- 19 Drug Abuse and Addiction
- 23 The War on Drugs
- 25 A Law Enforcement Perspective on Drugs
- 28 Drugs and Incarceration
- 32 Alcohol, Drugs and Indigenous Australia

WEEK 4

- 34 Political Economy of Opiates
- 38 Political Economy of Tobacco
- 43 Tobacco and Shamanism
- 46 Readings

WEEK 5

- 49 Erectile Dysfunction Drugs
- 50 Steroids
- 52 Emergency Contraception
- 54 The Placebo Effect
- 56 Readings

WEEK 1

Drugs, Pharmaceuticals and Anthropology

- The effects of drugs aren't determined solely by its pharmaceutical properties – we also need to look at it from a social standpoints (i.e. why different people have different reactions to drugs, the effect isn't same for everyone – i.e. seen through the rat experiments).
- “Just how addictive are drugs, anyway? The examples of cocaine and opium.”
 - A lot of people are addicted to cocaine. But only a small percent of them ever go in for treatment, get help or get arrested and go through court proceedings.
 - Opportunistically, as in they only took the drugs because an opportunity presented itself, they wouldn't go out of their way to get cocaine.
 - 28% use frequently and regularly, but they can still carry on with their lives (I.e. with their jobs, other aspects of life) - they can still function.
 - 14% compulsive, addicted. (Cocaine seen as an extremely addictive drug but out of users, only 14% of people are actually addicted).
 - Robson p. 23 - part about Opium. [**Important point – majority of opium/cocaine/other illicit drug users who have been addicted at one point, manage to get through it without rehab/professional help**].
- Zinberg [**Important – drug, set and setting (social sanctions + social rituals)**]

The effect of a drug is due to three variable and their interaction:

 - **Drug**: the pharmacological action of the substance itself.
 - **Set**: the attitude of the person at time of use, including his or her personality structure and what they *expect* the drug to do. (individual attitudes are significantly influenced by social values and social expectations).
 - **Setting**: the influence of the physical and social setting in which use occurs. 2 dimensions:
 - Social sanctions: e.g. drinking with friends is normal (we don't associate this with someone who has problems), but if someone drinks for breakfast, this is viewed as atypical.
 - Social rituals
- Refuting the myth that drugs are chiefly defined and determined by their pharmacological properties: Drugs and their effect on individuals can only be fully understood by taking into account the particular social, cultural, political, and economic contexts, in addition to their pharmacological properties

Ethnographies of Drug Use

- **What is Ethnography?**
 - Both a research method and a type of writing
 - Participant observation, extended period of time

- Lots and lots of ‘informal interviews’
- Intimate participation in community studied
- **Bourgois on the essential elements of ethnographic research methods:**
 - Understanding social networks, finding a legitimate social role within the community to observe behaviour in a minimally intrusive manner.
- **Qualitative (in-depth, formal) interviews ≠ Ethnographic research**
 - E.g. there are things you will never find out through doing an interview.
 - What people say vs. what they do (i.e. they want the interviewer to like them).
 - Or some things are so obvious that they don’t think to even mention it.
 - E.g. if you ask someone what they ate during the day vs. if you got them to track it in a diary – the results would be different, just because people tend to forget/think it’s obvious enough that they don’t think to mention it.
 - Diachronic perspectives (how perspectives change over time): relates to drugs, e.g. being addicted to drugs when you’re young and somehow, as you get older, you grow out of it.
- **Sudhir Venkatesh** – ethical dilemmas regarding research when it comes to communities who are engaging in illegal activity. Up until what point do you protect these people and at what point do you need to report them to the police?
 - E.g. Sudhir Venkatesh was in the room when the gang was planning a drive by shooting – when he told this to his supervisor, his supervisor freaked out because if someone had been injured/killed in the drive by shooting, he would be involved in a felony. So, after that, he just stepped out of the room whenever they are discussing drive by shooting plans.
 - Another ethical issue: must keep things confidential. Sudhir didn’t do this as he shared to the apartment manager the ways in which the gang members were making money off but didn’t report/pay taxes for and once the manager found out (because she gets a cut of everyone’s money), she went and beat people up/shook them up. Sudhir didn’t keep the information confidential and as a result, broke their trust.

Hallucinogens

- **Shaman:** mediator between supernatural and the community. So, they’ll go into a trance, make contact with the spirit and ask the spirits “Why is this person sick?” and through the spirits, will attempt to make the person better.
- **Andrew Weil on Hallucinogens and Social Controls**, similarly takes Zinberg’s theory to the use of hallucinogens by Amazonian natives and emphasizes that they do not appear to have any problems with hallucinogens.
 - Natural desire to experiment with different ways of seeing the world, so if you have a society that embraces this and doesn’t demonise it – then you’re going to have a society that has positive experiences with drugs.
 - There’s a few critiques of Weil.

- **From Hoffman to Hubbard to Huxley [SUPER important people involved in the spread of use of LSD, they acted as advocates of the drug]**
 - LSD gains more popularity amongst the educated/authors due to these people.
 - In 1943, Hofmann accidentally ingested some LSD and experienced vivid hallucinations. Started testing LSD on himself and volunteers
 - First published on the mental effects of LSD in 1947.
 - Sandoz Laboratories started supplying samples to psychiatrists.
 - Psychotherapist Dr Ronald Sandison gave LSD to Alfred M Hubbard, a former US intelligence officer and millionaire.
 - Hubbard gave Aldous Huxley his first LSD experience in 1955. (Huxley's experiences with mescaline chronicled in 1954 book *The Doors of Perception*.) Hubbard became a sort of LSD missionary
 - CIA gets involved. Want to find a “speech-inducing drugs”, i.e. what will make the Soviets talk?
 - LSD is chosen as most promising. It's not as simple as it'll just make you blurt out all of your secrets, but they found it as a useful drug in interrogation because it was anxiety producing. Makes people extremely nervous and it was used to make people anxious. (Army testing of LSD on soldiers)
- **Moral Entrepreneur: Huxley**
 - Famous writer Aldous Huxley first experimented with mescaline under supervision of psychiatrist Osmond. Described experience in *The Doors of Perception*.
 - Huxley's theory that the function of the brain was *eliminative* – i.e. it acts as a screening mechanism “to protect us from being overwhelmed and confused by the mass of largely useless and irrelevant knowledge.” Hallucinogens bypass the screen.
 - Huxley and Osmond argued that terms “hallucinogen” and “psychotomimetic” were inappropriate b/c implied negative states (hallucination, psychosis). Osmond coined the term “psychedelic” → “mind-manifesting”
 - Osmond and other psychiatrists imagined LSD as a potential aid to psychotherapy
- **Moral Entrepreneurs: Leary and Ginsberg [Important people!]**
 - Leary and Alpert accused of conducting research outside the medical model, dismissed from Harvard in 1963. But at this point, Leary and LSD were already popularized.
 - LSD banned, black market for LSD develops and interest increases.
- **Moral Entrepreneur: Kesey**
 - Another “moral entrepreneurs” responsible for popularising LSD: Ken Kesey