Research paper

“It Just Kind of Cascades”: A critical ethnography of methamphetamine-related pleasure among people in recovery

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A B S T R A C T

Background: Despite its well documented risks and harms, methamphetamine use can also be experienced as a pleasurable, purposeful, and productive activity. Drug use discourse has historically de-emphasised the pleasures of drug use, as they can contradict the expectations of neoliberalism that individuals be moderate, rational consumers. The purpose of this study was to explore the experiences of people trying to reduce or control their methamphetamine use, utilising a critical interactionist approach to excavate the subjurgated knowledge of methamphetamine-related pleasure, and construct an understanding of methamphetamine use that incorporated these positive experiences.

Methods: Qualitative interviews and ethnographic observation were conducted over an eight-month period with a group of twelve people using methamphetamine and accessing recovery services. Transcripts and fieldnotes were analysed thematically with a critical interactionist lens.

Results: The pleasures of methamphetamine use were differentiated into pursuing the rush, exploring sociality, self-medication, and desiring productivity. The interwoven nature of these themes presents a multidimensional understanding of methamphetamine use resulting from a cascade of interacting causes and effects, rather than a linear product of individual choice or structural forces. These findings also highlight the complex symbiotic relationship between pleasure, productivity, and risk for people using methamphetamine which can be traced to the broader cultural and economic context in which use occurs.

Conclusion: Interventions and policies responding to harmful methamphetamine use must address the content and nature of the methamphetamine use cascade, acknowledging the diverse needs methamphetamine can meet for contemporary neoliberal citizens, and the sometimes complex and sophisticated purposes for which people may utilise its effects.

People use methamphetamine for a variety of complex reasons, including the pleasurable, purposeful, and productive experiences it can facilitate (Newton, De la Garza, Kalechstein, Tziortzis, & Jacobsen, 2009). These aspects of methamphetamine use are often reduced to descriptions of individualised hedonic experience, such acting as to ‘produce euphoria, increase confidence, sociability, energy, and wakefulness, and reduce hunger’ (Farrell et al., 2019, p. 1652). People who use methamphetamine (PWUM) articulate these drug effects, however, in terms of more complex sensations such as purpose, (Lamonica & Boeri, 2012), agency (Lorvick et al., 2012), freedom (Nettleton, 2010), and connection (Bosshard, Boeri, & Harby, 2011). Descriptions of elevated mood, energy, and alertness (Rawson, Gonzales, & Brethen, 2002) may therefore be accurate, but also superficial. Classifying pleasure in these terms leaves out processes of social and cultural construction which can shape what forms of pleasure are accessible through drug use. This narrow view was originally challenged by Becker (1953), whose exploration of marijuana use identified how its associated pleasures were developed in part through social processes of learning the necessary concepts and behaviours that facilitated enjoyment. More contemporary challenges to these findings that explore different experiences of marijuana use do not undermine Becker’s fundamental claim, but show instead how the process of drug use initiation and eliciting pleasure has changed in response to changing social and cultural contexts in which that drug use occurs (Hallstone, 2002).

In this article we ethnographically explore methamphetamine use and recovery to provide a rich and contextualised description of these trajectories and the role of pleasure in the lives of people experiencing methamphetamine-related harms. For this exploration we under-

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stand pleasure as an experience shaped by personal, social, and structural factors that can be remade and reimagined in different times. Foucault (2011) distinguished the more generic concept of pleasure from that of ‘desire’, which he saw as more weighed down by the interpretations of modern medicine and psychoanalysis. He contended that pleasure should be considered an “event that happens ... outside the subject, or at the limit of the subject, or between two subjects, in this something that is neither of the body nor of the soul, neither outside nor inside” (Foucault, 2011, p. 389), rather than an inherent property of substances, individuals, or environments. The event of drug related pleasure, and its susceptibility to being shaped by the institutions, clinical discourse, and cultural logics it occurs within has been identified by critical scholars as a significant site for intervention in both treatment and harm reduction (Duncan, Duff, Sebar, & Lee, 2017). Exploration of these pleasures, however, must navigate a complex conceptual and cultural background that informs contemporary understandings of pleasure, risk, and virtue.

**Pleasure within addiction**

The longstanding exclusion of pleasure within clinical and epidemiological discourse has been well documented (Coveney & Bunton, 2003; Holt & Treloar, 2008; O’Malley & Valverde, 2004). Moore (2008, p. 354) argues this trend has emerged from modern strategies of neoliberal governance which construct drug related pleasure as a ‘subjugated knowledge’ that can threaten the consensual morality necessary for neoliberal policy to remain legitimate and coherent (Race, 2009). In both philosophy and psychology there has been a long-standing distinction made between the pursuit of pleasure and the pursuit of virtue as ultimately incompatible paths towards wellbeing (Coveney & Bunton, 2003; Huta & Ryan, 2009). Drug related pleasures have historically been considered to contradict Enlightenment values of rationality and freedom, making them an invalid form of pleasure (O’Malley & Valverde, 2004). From this binary perspective, drug use portends a loss of agency and identity via compulsive behaviour, thereby endangering the neoliberal ideal of individualised autonomy (Keane, 2002). Combined with a religious concern over the morality of pleasure for pleasure’s sake, these ideas have supported the interpretation of addiction as a moral failing as well as a health concern (Harding, 1986).

Critical drug researchers have increasingly drawn attention to the tensions around pleasure in the drug use discourse, identifying the paradox that has been created wherein ‘pleasure can be addictive, but addiction cannot be pleasurable’ (Dennis, 2017, p. 153). In statements by people who injected drugs interviewed by Dennis (2017) she identifies an implicit binary distinction which kept pleasure and its associated rational subjectivity separated from addiction and the objectification that accompanies compulsive behaviour. Dennis (2017) argues for an erosion of this binary, to accommodate the mixed reality of drug user’s experiences which can include both the pleasures and privations of drug dependence.

This binary understanding also constructs pleasure as a stable and singular phenomenon arising from the individual’s desire for hedonic experience, rather than a multiple and dynamic process. Extended research on hedonic consumption in general has identified many synergetic forms of pleasure (Alba & Williams, 2013), which are applicable to the interpersonal, economic, and subjective processes of drug use. As has been repeatedly discovered by in depth explorations of drug use experiences, episodes of use do not arise solely from rational decision making by a neoliberal agent, but from processes incorporating people’s social, structural, and material contexts (Cheney, Newkirk, Nekhavhambe, Rotondi, & Hamilton, 2017; Duff, 2008; Pennay, 2015). In their study of recreational drug use, Pennay (2015) found a complex relationship between drug related pleasure and harm, with multiple forms of pleasure interactively contributing to episodes of use. Lorvick et al. (2012) similarly found nuanced and multifaceted forms of pleasure related to methamphetamine and sexual behaviour, which complicate the binary construct of pleasure versus risk. These various findings call for an exploration of these multiple pleasures and how they can produce a cascade of interacting factors contributing to drug use.

Race (2018) has also argued for a more nuanced and complex way to understand the diversity and social dynamics at play in drug related pleasure, particularly in the context of sexualised drug use and sexual health. By appreciating drug use and pleasure as internally coherent sociocultural assemblages, rather than only aberrant public health epidemics, we can develop new ways of providing care and designing policy that is responsive to and respectful of this complexity (Drysdale et al., 2020; Race, 2018). Research can benefit from emphasising the capacities of drug use to be a creative, constructive, or culturally rich endeavour, even whilst being associated with risks and harm (Bohling, 2017; Dennis & Farrugia, 2017).

**Pleasures of production**

The functional use of stimulants to improve task performance and relieve work related boredom, stress, or fatigue is another significant feature of methamphetamine use (Dixon et al., 2015; Lende, Leonard, Sterk, & Ellison, 2009; Pedersen, Sandberg, & Copes, 2014; Roche, Pidd, Bywood, & Freeman, 2008). Multiple authors have linked the increased functional use of methamphetamine with advancing capitalist economies, growing inequality, and job insecurity (Lyttleton, 2004; Pine, 2007). In these contexts, stimulant drugs have been increasingly utilised to achieve expected standards of productivity, income, and social acceptability (Garriott, 2011; Nettleton, 2010; Pine, 2007). In Nettleton’s (2010) ethnography of women using methamphetamine, participants initiated drug use due to increased demands when starting their own small business while managing childcare. High achieving students might use methamphetamine to aid their performance (Garriott, 2011). Methamphetamine can also be used for weight loss, a factor which interacts with experiences of gender for many women using drugs (Brecht, O’Brien, von Mayrhauser, & Anglin, 2004; Nettleton, 2010). Dixon et al. (2015) found female entertainment and sex workers in Cambodia reported primarily functional reasons for amphetamine-type stimulant use, which enabled them to meet the demands of sex work through increased energy and decreased appetite. One member of this population referred to this stimulant as a ‘power drug’, which facilitated sensations of empowerment and agency, and increased their ability to obtain clients and work for longer hours (Maher et al., 2011, p. 204).

Therefore, alongside the use of methamphetamine and other stimulants for recreational pleasure in the forms of sex, partying, or socialising, its energising and motivating effects also interact with discourses around productivity and responsibility (Crampton, Jitendra, & Zerfas, 2008; Pedersen et al., 2014). Methamphetamine can be utilised as a tool to enable individuals to meet the requirements of neoliberal citizenship, rather than to negate or subvert them. This cultural context incentivises the use of methamphetamine to control mental health symptoms and enable income generation, childcare, and domestic work (Diaz, Heckert, & Sanchez, 2005; Lende et al., 2009; Nettleton, 2010). In these instances, the pleasure of use is partly the pharmacological sensation, but also the potential pleasure of meeting, or perceiving oneself to have met these obligations as constructed by a wider moral discourse.

**Avoiding ready-made problems**

To explore these diverse aspects of methamphetamine-related pleasure we draw on a range of analytical perspectives due to the complexity of harmful drug use. In their study of alcohol and other drug (AOD) policy makers and practitioners, Moore and Fraser (2013) argued that addiction both produces and is produced by treatment policy and practice. The AOD treatment apparatus can condense the complex lived reality
of drug use to that of being labelled an addict and quantified through epidemiological and bureaucratic tools. They refer to feminist science studies theorist Paola Marrati (2006) who encourages researchers to question ‘ready-made social problems’, and to excavate instead the process whereby ‘problems’ are constituted, enacted, and made politically effective (Moore & Fraser, 2013, p. 918). By focusing on the pleasurable, purposeful, and productive experiences of methamphetamine use, rather than its well documented risks and harms, we hope to perform this kind of excavation. A fully articulated account of these aspects of methamphetamine use provides the necessary context and framing to understand the ‘problems’ it can cause.

Developing this account must incorporate multiple levels of analysis, looking at how methamphetamine use is constructed at a symbolic, interpersonal level, while acknowledging the structural features of the particular environment in which it takes place. Drawing on the work of nursing researchers Martins and Burbank (2011, p. 315), we take a critical interactionist approach to understanding methamphetamine use, which they describe as an ‘upstream-downstream’ form of analysis. This method combines the historically divergent theoretical frameworks of symbolic interactionism and critical social theory. By combining analysis of interactional symbolic meaning-making, and critical dissection of broader discourses, complex health phenomena such as methamphetamine use can be explored in a more nuanced way, rather than research being reduced to simply producing adequate solutions to ‘ready-made social problems’ (Moore & Fraser, 2013, p. 918). We therefore aimed with this study to excavate the subjudgeted knowledge of methamphetamine-related pleasure and construct an understanding of the ‘problem’ of methamphetamine use that incorporates its pleasurable, purposeful, and productive aspects.

Method

Ethnographic context

Participant observation took place in inner-city Brisbane and the surrounding greater metropolitan area. Brisbane is the capital of the state of Queensland, and the third most populous city in Australia, a country with one of the highest rates of amphetamine dependence in the world (Farrell et al., 2019). Within the last decade, health services have reported significant increases in methamphetamine related harms and the number of PWUM accessing treatment services (Australian Institute of Health and Welfare, 2014; Queensland Health, 2017). The Queensland health department observed a 17-fold increase in methamphetamine-related ambulance presentations between 2009 and 2014 (Queensland Health, 2017). A 2015 study of police detainees in Brisbane found 43% of those that provided a urine sample tested positive for methamphetamine, 68% reported having injected methamphetamine in the previous 12 months, and most reported methamphetamine to be easily accessible and affordable. In a nation-wide study from 2017 only 17% of detainees in Australia tested positive for opiates, with 43% being positive for methamphetamine (Patterson, Sullivan, & Bricknell, 2017).

Most services available to PWUD in Queensland are abstinence focused, with some harm reduction services offered in metropolitan areas. Multiple non-government support organisations also provide services for PWUD in the form of counselling, education, and social work. Participants were also supported through federally provided social security payments. The contexts and social processes through which people using methamphetamine become visible and measurable for health services and police require critique and exploration, to avoid implicit participation in the construction of Australia’s ‘ice epidemic’ narrative (Lancaster, Ritter, & Colebatch, 2014). This epidemiological data does at least establish, however, the widespread use of methamphetamine among PWUD in Brisbane, and the likely significance of this drug’s influence on people’s lives, trajectories, and the social contexts it is enacted within.

Data collection

We conducted an ethnographic study of people attempting to reduce or control their methamphetamine use, using ethnographic participant observation and qualitative interviewing. A total of 12 participants were recruited by AOD nurses at two recovery services in Brisbane, Australia. All participants had the intention to reduce or control their methamphetamine use, due to its impact on their mental and physical health. Each participant was enrolled for six months and conducted three qualitative interviews during this time with the first author Samuel Brookfield (S.B.). After the first round of interviews and initial ethnographic observation period one participant withdrew from the study and two others were lost to follow up. S.B. therefore conducted a total of 30 interviews, 27 of which were with nine of the participants. Interviews were 50-80 minutes long and conducted primarily in the participants’ homes, or nearby cafes. Participants were reimbursed with a $50 supermarket voucher immediately after each interview. Interviews were audio recorded, and professionally transcribed.

During the six months S.B. also conducted ethnographic observation in participants’ homes and accompanied them to see recovery services, doctors, counsellors, parole officers, family members, drug dealers, and for court proceedings. Observations were recorded in field notes with some audio recordings. The findings in this article focus on interview excerpts, however the process of data collection across both interviews and ethnographic observation was symbiotic and interactive, with the long-term ethnographic relationships developed through periods of observation facilitating the rich content of the participant conversations and interviews.

Data collection adhered to a critical interactionist methodology. A critical interactionist approach interrogates and reflectively chooses between conceptual alternatives within a particular field of study (Thomas, 1993). Critical ethnography is guided by the idea that ‘all social life is constructed in contexts of power’ (Noblit, Flores, & Murillo, 2004, p. 4), meaning social phenomena should always be interpreted as something produced by shifting disparities in influence between groups, individuals, and discourses. This was integrated with the principles of symbolic interactionism, which foregrounds how the meaning of events and experiences are dynamically constructed through people’s interpretations and interactions. During data collection this meant attending to the exercise of power or hegemony, either explicitly or implicitly, through participants’ statements and interactions with family, and observing how these processes interacted with interpersonal processes of dynamic meaning-making. Interview questions, ethnographic conversations, and fieldnotes sought to draw out not only descriptions of methamphetamine recovery, but the discursive context in which these experiences were being expressed and interpreted, and how that context is constructed and maintained.

Data analysis

Coding files were analysed using thematic analysis, as an appropriate method for examining the local context of participant experiences and also how these were produced by wider structures and discourses (Braun & Clarke, 2006). Themes were constructed based on multiple criteria, including prevalence across the data set, and their apparent significance to participants. Coding memos were utilised throughout data analysis to explore potential avenues for preliminary analysis. Themes were a combination of latent and semantic content. The findings reflect fieldnotes and interviews, with trends and patterns observed longitudinally via ethnographic observation, and interview excerpts used to exemplify important themes. This process enabled transparent deductive and inductive analysis while providing clear audit trails between findings and raw data (Neale, 2016). The study received ethical approval from the University of Queensland and Queensland Health Metro North human research ethics committees.
Results

Participants’ drug use trajectories throughout data collection were highly variable. Some participants maintained abstinence for a few months at a time, with brief episodes of drug use, while others limited their use to once every one or two weeks. Others continued frequent methamphetamine use throughout the study period. Methamphetamine-related pleasure was differentiated into four domains: pursuing the rush, exploring sociality, self-medication, and desiring productivity. These different aspects of methamphetamine use were intricately woven together, meaning episodes of use could not be reduced to single or linear processes. How participants experienced and distinguished between these interwoven aspects of methamphetamine related pleasure are explored below.

Pursuing the rush

For several participants pleasure was focused around the initial rush, which could rapidly deteriorate into unwanted aftereffects such as paranoia and anxiety. The context of the rush was difficult for participants to articulate and comprised multiple pleasures that could be experienced within a single episode of use. Participants were often motivated by the intensity of the rush, describing methamphetamine use like an athletic or challenging adventure. Claire, an unemployed single mother of three in her forties, frequently described the sensation during the study, often comparing the rush to her experiences of childbirth.

To have a baby, how you feel is, you go through all this pain and to just go, it’s like, “Ah, it’s done.” That’s what it’s like; the baby is now on your chest. It’s like, “Ahh,” and it’s just like, love, that one moment, just...yeah. Like the grand finale of life. – Claire, Interview 2.

Claire describes a powerful and complex formulation of pleasure, which may incorporate emotional, cognitive, and bodily components. She ascribes meaning to her drug related pleasure through the complex filters of personal experiences and beliefs. These heights of pleasure, however, were increasingly weighed against the discomfort of recovering from episodes of use. This comparison was also described by Jane. For her and her partner Ian, both unemployed in their thirties and caring for up to six children from previous partners, methamphetamine was interwoven with their relationship, especially their sex life. As they had met while using, they struggled to figure out a life together without drug use, despite how the pleasure of the initial rush was increasingly overshadowed by the immediacy of the aftereffects, such as psychosis symptoms for Ian.

And he’s getting worse. It’s getting worse every time he uses. Like, and he admits that. And we only use to have decent sex; it’s not any other reason but to have that initial rush and to have good sex. Because we don’t really have a sex life now. So, that’s the only real [positive]... you know? – Jane, Interview 3.

Jane constructs her drug use as linearly connected to sex and pleasure, however as described in Claire’s quotation above, the phenomenological content of that initial rush, and the emotional and psychological factors at play in sex make these episodes of use resistant to reductionist explanations such as ‘pleasure seeking.’ While walking to the café to conduct her last interview, Jane described more about her relationship to sex and drug use, stating that ‘I just want to be loved, and always have, like the stories you see in movies’. Jane described how the process of drug use enabled her to reconfigure her experiences of love and intimacy through the intense relationships and interactions she encountered while using.

Jane: It gives you a false sense of what love is and the feeling of it.

S.B.: Of being loved by others?

Jane: Yeah. … And because you become a more sexual person on it as well too, so you get that validation from that as well. So that’s another sense you know.

S.B.: Validation from being able to have sex in that way? Or be able to –

Jane: In that way and how good it is or how good you are. That sort of stuff. So yeah, you get that whole sense of- and then you get to get a bit of self-esteem from that as well too.

S.B.: Do you think that’s been a feature of it for you when you started using?

Jane: Oh yeah.

– Jane, Interview 2.

Sex facilitated by drug use provided validation, through being desired and also being able to please other people. Methamphetamine use was therefore associated with hedonic pleasure but complicated by more cognitive and emotional experiences such as validation, connection, and security. Claire described a similar experience when engaging in use with her partner, the presence of whom she described as her ‘main trigger’. The pleasures of sex while using methamphetamine were therefore dependent on the social contexts and the nature of relationships, as well as the effects of the drug.

The pleasure of the rush was also interwoven with relief from feelings of boredom or tedium. Bridget cited boredom as a motivating factor in multiple interviews, commenting that ‘it does a lot of things, you know?’ Whilst caring for her three children and large dog in suburban Brisbane, Bridget, 41, was using methamphetamine a few times a week throughout the six months of observation, with several breaks of up to seven days, after which she cited boredom as a catalysing factor in her relapse and rejected the idea that she used methamphetamine to manage her anxiety.

And I might not even be anxious, it doesn’t necessarily mean that at all. Oh, I’m not anxious all the time or anything like that, just sometimes. No, it’s just like, “All right, let’s go, I want to get on. Um, let’s do that.” And, you know, like, if you’re feeling like shit, then you’re not feeling like shit anymore. If you’re feeling tired, you’re not feeling tired anymore. If you’re getting bored, you’re not bored anymore. – Bridget, Interview 2.

In her final interview Bridget reiterated her desire to use methamphetamine to explore and expand her capacities, but also contrasted it against more general, foundational reasons for her drug use.

I completely can’t handle reality. That’s the truth. But I think that I could now, ‘cause I am a lot happier. I – but then I get bored. I do, after a few days I just want it, you know like – boredom.’ – Bridget Interview 3.

Boredom was a concept employed frequently by participants as an alternative motivation to being unable to ‘handle reality’ as Bridget described. Participants described a recursive cycle, where dejection or listlessness encountered when abstinent would become an incentive to use, while using also prevented them from engaging in other interests or relationships which would manage or counteract those feelings. In this way, methamphetamine could be simultaneously viewed as the cause and solution to issues they were managing.

For some participants this cycle could produce complex and ambivalent attitudes towards methamphetamine. While the rush of methamphetamine use provided multiple intense and complex forms of pleasure, over time this rush became increasingly brief, followed by sometimes severe negative effects. Participants could have difficulty disentangling the many factors at play in episodes of drug use or trying to differentiate between actively seeking pleasures in a way that everyone does to recreate and using methamphetamine to ‘escape’ some other condition. For Ian, 34, who had been using for four years, his methamphetamine use had originated more as an active recreation than to manage emotions.
He was drawn to the excitement it introduced into his life, relating how he used while engaging in illegal activities.

Ian: To start with, it’s the whole-just the rush. It just made you feel 10-foot tall and bulletproof … endorphins. It makes you feel really good. Like you can do anything.

S.B.: So, do you think that makes you more likely to be involved with [crime]?

Ian: Yeah, definitely. Oh, shit yeah. It gives you more confidence. Also, you know you’re doing wrong, you know it’s illegal, but it gives you that adrenaline rush of stuff on there. You’ll be walking around [XXXX city] with stuff [methamphetamine] on you, and I’d start talking to police, knowing that full well I was, you know…

S.B.: It makes that exciting?

... 

Ian: Yeah, it does. It gave me a rush. It really did.

S.B.: It sounds like from what you’re describing you didn’t have the sense of lacking something.

Ian: No, I had more confidence. Because, being a bodybuilder and that I was quite big, you know … And funny enough, I used to do a lot of modelling as well. And also, I was [dancing on a party boat] that goes up and down the river. So, the confidence was there, and I was full of it. It heightened it even more.

– Ian, Interview 1.

Ian describes his initiation to drug use in terms of seeking to maximise and optimise his capacity, rather than using drugs to manage his life or emotions. Participants often foregrounded pleasure associated with methamphetamine use and its social manifestations such as confidence. These social aspects will be examined further below.

Exploring sociality

Facilitating social interaction was a significant component of how participants described methamphetamine use. Drug use could manage symptoms of anxiety and depression, while also making participants much more prosocial during periods of intoxication. In contrast to the romantic and sexual connections Jane experienced associated with methamphetamine use, Bridget described the effects of methamphetamine on her behaviour in broader social situations with friends.

Bridget: You’ll probably find everyone has very similar reasons on how it makes you feel. Not for why you use, everyone’s got their own reasons for that, but yeah, powerful is a good way of describing it. Confident, you do, because it brings you out of your shell.

S.B.: So then, I guess the thing is, there’s this deep meaning and purpose, do you have- would you experience a lack of that feeling when you haven’t used, that using relieves? Or?

Bridget: Yeah, yeah definitely. My personality just changes completely. Sometimes, you know, a bit too much. But, yeah. All of a sudden, I’m happy and got something to talk about and plenty of energy. I feel powerful, feel confident. Happy, I guess? That’s just the thing, like, chasing happiness. I’ve never truly been really particularly happy for long periods of time, and that’s I suppose a depression that comes into it.

– Bridget, Interview 2.

Bridget identifies both potential causes and effects of her methamphetamine use. The strong positive experiences of feeling powerful and confident and interacting with others are described alongside a more fundamental experience of ‘happiness’ and relieved depression. Methamphetamine may therefore be providing for Bridget the sensations of satisfaction and engagement with life which are usually considered aspects of good mental health. Methamphetamine acts in some ways as the ideal drug, not only temporarily resolving psychological pain but facilitating friendships, partnerships, and sex lives. Later that same evening as Bridget was smoking cannabis with her friends, she made an ambivalent comment about her drug use.

I like my marijuana more than I like my speed. Speed is just recreational thing to me- Ah it’s a sex thing to [partner], if you want to be realistic. It’s all about sex, that’s why, and to blot your life out a little bit.

– Bridget, Fieldnote.

Bridget’s description of different motivators for drug use resists the reduction of methamphetamine use to a single process or function, even within a single individual or episode of use. The effect of the drug and the meaning of this effect is produced in part by the user’s pre-existing sensations of lacking control over their circumstances, confidence, happiness, and social connections, and also by those external factors which prevent them from accessing these resources in other ways. Despite her significant caregiving responsibilities, and history of mental health hospitalisation and harmful drug use, Bridget received minimal support, and her only community consisted of a small group of other PWUD and dealers she had known for many years. This social context presented Bridget with a difficult choice between associating with other people using methamphetamine or experiencing further social atomisation and isolation.

This attenuation of social contacts to other PWUD was also acknowledged by Carl, a single hospitality worker who had been using methamphetamine since he was a teenager and now in his thirties had attempting abstinence for several years. Carl explicitly attempted to reduce the pleasure of social interaction while using to reduce his incentives to use.

Over that whole time, I never let myself have any fun with it; it was always a lonely thing, because I didn’t let myself fall back into the circles. It would have been funner [sic] to use the drugs with other people, but I never let myself do it, not once. … And so, it turned out to have been a very lonely time, when I was lapsing, but I do feel like now there was a reason for that, and it was always so that I wouldn’t fall back into those circles.

– Carl, Interview 2.

Sociality for Carl comprised part of the pleasure of methamphetamine use, as well as facilitating access to drugs and reinforcing drug related behaviours. Participants could control this aspect of their drug use to different degrees depending on how embedded they were in social contexts, and to what degree they valued these connections with friends and peers.

Self-medication

While some participants focused on the positive pleasures of use, others invoked the purpose of managing mental health, or as Bridget put it frequently, to ‘blot out life’. Many referred to both these ideas in discussions of their drug use, describing positive or creative experiences of the rush alongside the pleasure of relief from anxiety or depression. Simon, a single white-collar worker in his fifties, had prolonged periods of abstinence during the project, but also lost his job, had unstable accommodation, and suffered severely with social isolation. S.B. met with Simon at all stages of his cycle of using, helped him move house, and accompanied him to outpatient withdrawal services. Simon framed his drug use as a tool to manage loneliness, but now that he was more engaged in recovery, he felt the social and sexual contacts he made while using brought difficulties which outweighed the ‘relief’ from negative emotions.

When I use, the people you meet when you use are not going to be your friends. I finally got that through my head. And most of the time, especially when you use on your own, you don’t even actually then have a good experience. So, you get a few hours of relief and then there’s going to be some drama because someone is a problem or whatever.

– Simon, Interview 1.
For Simon, Christmas was the ‘worst time of year because it makes me feel so alone’. Simon experienced fewer structural barriers to recovery that some other participants, having no criminal record and the ability to access significant income. However, his drug use continued due to the means he ascribed to his social context. The absence of close friends or a partner exacerbated his feelings of low self-worth, which he could only attempt to mediate through interacting with others via drug use.

And this is probably the core of my problem, my personal problem, is that I don’t have many activities. And if I sit at home by myself, I start to feel lonely. And then eventually I get depressed about that because I don’t want to end up alone. And then that tends to be my trigger in using. So, my trigger is not money, it’s not – it’s to get away from that feeling.

— Simon, Interview 1.

While methamphetamine use could still be constructed as pleasurable, Simon found the pleasure was predominantly a relief from depression, low self-esteem, and isolation. Once again, in addition to relieving these feelings, methamphetamine enabled him to contact other people through social networking apps, and actively seek social interaction, despite his continued recognition of how he could be harmed by this process.

Claire also reported using methamphetamine to ‘draw what happens in everyday life’, however she articulated a more detailed process or ‘cascade’ of use. This cascade was bound up for Claire with her roles as mother and partner, and how she felt simultaneously inspired and burdened by these identities. One day she met up with S.B. at a shopping centre, full of plans for her recovery. She described the wall hanging she planned to make with all of her recovery strategies pinned onto it that she could refer to. When discussing her partner of the past year, Claire spoke about how she used methamphetamine to manage her emotions.

Claire: I’m a nightmare for [partner]. I’m his trigger. I don’t mean to be, but it’s the way it is. He’s my trigger too, a bit. But he’s not really my main trigger, my main trigger is my emotions. I can’t handle my emotions, that’s why I use. I don’t know how to deal with emotions.

S.B.: What are the emotions you can’t handle at those times?

Claire: Love. Love’s the worst. I just can’t. Don’t know. I don’t like that good feeling, I sabotage it.

S.B.: A feeling of love for someone else…?

Claire: Everyone, yeah, and myself.

S.B.: Is it like there’s something overwhelming about it?

Claire: I just can’t handle it. It stresses me out, gives me anxiety. But it’s not just love, it’s frustration about using, gives me feelings of frustration, and it just kind of cascades. But then, you know it just keeps going, circular. But yeah definitely, mine’s definitely emotional. I’ve had a lot of hurt, you know, from the trauma. I feel like I’ve failed with my marriage. I feel like I’m trapped in my life I have now, no one asked me is that what you want? My situation, you know, with children and all that, like [ex-husband] has just gone and done his thing, and he knew pretty well that I wasn’t the stay at home mum kind of person and now I’ve just spiralled down and become anti-social, I’m not really who I was.

— Claire, Fieldnote.

This ‘cascade’ where multiple factors interact to generate the momentum toward a particular lapse or relapse was a common feature of how participants described episodes of drug use. These factors changed across the individual’s drug use trajectory. For example, in his first interview, Ian described his initiation into drug use as positive and energising. Later in the interview, however, he discussed some of his actions related to drug use which were now distressing to remember. Ian increasingly used or had thoughts of using methamphetamine to manage shame related to behaviours that occurred in the context of drug use.

Ian: Being straight and clean, it disgusts me [remembering past behaviour]. I am remorseful for what I’ve done. Definitely, some of the things I have done pretty much disgusts me. I try not to think about it too much because thinking about that kind of stuff is what leads me to using it again to make me feel— try and feel confident and better about why you’ve done it. But it’s definitely something that I’ll have to address when I feel the time is right, when I’m strong enough and want to address those things.

S.B.: Do you feel like you need to process it? Do you need to build up to that?

Ian: Yeah, I need to be strong enough. I need to be strong enough not to have to use things to be... pretty much, I’ll use it to forget it. I use drugs to forget, and that would be just an excuse to use again. So right about now, I’m not in a position to think about those things to process those things because I feel it could draw me back to wanting to use to forget.

— Ian, Interview 1.

Ian felt ‘disgusted’ by some of his own behaviour, a form of self-judgement exhibited by some other participants in the study. This judgement occurred in a wider context of individualised responsibility, and social expectations. Ian and Claire, each of whom had received minimal mental health support, expressed significant internalised stigma regarding their past behaviours related to drug use. This stigma could be contrasted with the participants more engaged with recovery services such as Jane who accessed counselling and had undergone long term rehabilitation in the past. Despite multiple lapses she remained focused on minimising her use, trying to be ‘not so hard on myself every time we do it’. Having access to the discourse of harm reduction through AOD services may have helped Jane articulate a more adaptive response to negative emotions and avoid reverting to drug use.

Desiring productivity

The stimulant effects of methamphetamine also facilitated functionality in participants’ personal lives and in meeting their obligations to family or services such as Child Safety. This could be a side effect of ostensibly recreational use, or an intentional attempt to maintain or improve productivity. Ian performed more actively in his roles as a dancer and assisting with dealing methamphetamine. Bridget also narrated her initiation into speed use as facilitating her work at the time as a stripper. Kira, 33, argued in her first interview that her current methamphetamine use was minimal, and that it was ‘like my cup of coffee. And it just gets me moving’. While participants referred concurrently to both pleasure and functional reasons for using, there was not always a clear distinction between these categories, given the pleasures of productivity the drug use could entail, and their exposure to multiple simultaneous incentives. Bridget once again referred to these different factors in one of her answers.

S.B.: You mentioned before you do it for ‘personal reasons’ as well. Do you know what any of those are?

Bridget: Sexual reasons. Cleaning the house reasons. It helps me get up, get up and do it. I find it very hard to clean this house. My personality, I suppose. I have- for fun, a little wild. Social reasons. Very social. We’ll come together, like you saw when you came around here the other day.

— Bridget, Interview 2.

Bridget also expressed that methamphetamine use could increase her functionality as a parent, once again both through relieving negative emotion, and enabling her to engage more actively with her children. In her second interview, however, she expressed reservations about this, acknowledging some of the other purposes of methamphetamine in her life, and anticipating judgement for her actions as a parent.

Bridget: I’ve used drugs as a coping mechanism since I was very young, like fourteen, sixteen. And when you’re doing something that young to cope with anxiety like that, that’s just something that carries over to when
you’re older, I suppose. Sometimes I get anxiety, can’t forget that, get anxious and not depressed so much, but very anxious just about life, just about my responsibilities and I’m responsible for two kids, and I suppose that just sounds terrible. I’m going against what I’m saying and what I’m doing.

... 

S.B.: What do you think is terrible about it?

Bridget: Well, definitely if I’m sleeping too much. In fact, in other ways it’s not as well. Like, I get more done. I get more done when I’m on it than when I’m not on it. The house gets cleaned, dinner will be cooked. We’ll have fun. We laugh together a lot. It’s not as bad I think as what in my head it might be, or other people might think it might be. A lot of it happens when they’re asleep, you know, at night-time, so no, yeah, no, it’s not that bad for them. They still have what they need, and I spend a lot of time with them.

— Bridget, Interview 2.

Bridget expresses conflicted emotions about her drug use. She describes benefits and risks related to methamphetamine which were produced partly through her interactions with friends and family. For most participants, methamphetamine use did not just provide hedonistic pleasure; it infused life with a sensation of immediacy and meaning which they could not derive from their everyday experience. Some participants with caring responsibilities such as Claire found these responsibilities could not provide her with purpose because she did not feel capable of meeting their requirements. These roles did provide meaning for Bridget, however, because her drug use enabled her to fulfill them.

Some participants reported increased ambition and increased functionality in terms of skills and interests. The experience of methamphetamine was described in these terms by Kim, who was in her early thirties, single, unemployed, and with one young daughter. She addressed the experience of productivity related to methamphetamine in her first interview, conducted in the AOD ward of a tertiary hospital.

Kim: The high that you get on it is really quite unique ... it opens up your mind to learning new things as well ... It opens up your mind to a new – not dimension, but a new realm. You focus more on what you’re interested in learning and your mind just opens up to learning new things.

S.B.: What’s that other realm like?

Kim: It’s where you can acknowledge and understand these things that you’re interested in ... it opened up my mind to exploring different avenues of trying to make money legit – like, the proper way, legit way. Like, going to [the second-hand store] or something, and buying things at a low-cost price and selling it.

— Kim, Interview 1.

Regardless of the actual effect of methamphetamine upon their functioning, participants like Kim incorporated productivity, and the value of productivity as a key feature of their narratives of use. This was another aspect of methamphetamine’s multiple effects: it could manage emotions, facilitate energetic activity, and also construct productive or functional behaviours as inherently pleasurable. The state of methamphetamine intoxication interacted with the wider moral societal context, which valued productivity, progress, and efficient management of sometimes large households, despite individual circumstances of social isolation and lack of support. Rather than only providing an escape, the value of methamphetamine to PWUD in this study was partly its capacity to improve their ability to meet the demands of their environment or allowing them to perceive this as improved. The perception that methamphetamine use can be in some ways adaptive was expressed ambivalently by several participants, who believed in its uses and acknowledged its risks.

The uncertainty regarding the effects of methamphetamine was described by Jack, a man in his fortieths who had become estranged from his family and was sleeping rough throughout data collection. A few weeks after the first interview S.B. drove him to a tertiary facility to be admitted to the AOD ward. He self-discharged against medical advice a few days later, and after managing to find him a couple more times, S.B. lost contact with him. In that first interview, sitting by a picturesque lake next to a community support centre, Jack narrated how methamphetamine gave him brief glimpses of change, of how his life could be different, in ways he could not find access to any other way.

Jack: I know what I’m doing. I know I shouldn’t do this [methamphetamine use] but I’m going to. And then I just do it. And then I think everything is good again.

S.B.: You think what?

Jack: Then you think everything is good again. I’ll do this. I’ll do that. And it just never happens. ‘I’ll get a job’. Then it’s gone again and then you’re just on the downer again.

— Jack, Interview 1.

This quote is a final example of the complex forms of pleasure that drug use could facilitate. Methamphetamine may at times provide a kind of volcanic pleasure detached from analogous forms of experience in the form of ‘the rush’. Other significant aspects include, however, the pleasures of feeling like a functioning member of society, of being able to imagine and plan for a better future and to realise that plan, of being able to care for one’s family and clean the house. These features of many people’s every day experience are not only experiences, but resources, which some participants otherwise lacked. Sometimes methamphetamine could provide this resource, however ineffectively.

Discussion

These findings represent one of the first ethnographic studies focused on methamphetamine recovery in an Australian context, and also the first application of critical interactionism to this subject. While drug use can be associated with profound harm, participants also used methamphetamine in ways that they experienced as pleasurable, purposeful, and productive. Two key aspects of these findings are discussed below which both draw from sociological and psychological domains of analysis. First is the understanding of episodes of methamphetamine use as emergent ‘cascades’ comprising multiple forms of pleasure, rather than linear products of individual or structural factors. The second aspect is the intersection between methamphetamine, pleasure, and productivity, and how exploring this relationship can elicit the multifaceted and contingent role that methamphetamine plays in the lives of PWUD.

The nature and significance of methamphetamine related pleasure has been previously studied (Drysdale et al., 2020; Lorvick et al., 2012), however our analysis explores both how different pleasures combine in non-linear processes that produce drug use without reference to individual failures of willpower, or the overarching force of structural factors, and also how these different pleasures are constructed through cultural values of productivity, individuality, and personal agency. This analysis works to question the distinction between recreational and functional methamphetamine use, highlighting how the pleasure of fulfilling functional requirements in alignment with personal and social values interacts with other hedonic pleasures, and also how drug use treatment and policy can shape people’s experience of drug use through the application of particular models and interpretations that foreground risk, harm, and neoliberal expectations of personal agency. By exploring not only the significance and complexity of methamphetamine-related pleasure but the discursive processes by which these forms of pleasure are assembled and maintained, our analysis aims to contextualise methamphetamine-related pleasure and harms both as the product of relational social and material deficits, and also as a dynamic process of social construction, rather than a stable linear result of methamphetamine use.
Methamphetamine use cascade

Participants described a multiplicity of cascading, interacting factors that extended outside the linear categories of positive or negative reinforcement favoured by psychology (i.e. Newton et al. (2009)). A critical interactionist approach addresses upstream and downstream factors in analysis, aiming to explain social processes like methamphetamine use by integrating local and interpersonal factors with broader structural and cultural forces (Martins & Burbank, 2011). Participants in this study experienced methamphetamine use as an emergent effect of complex interactions between these levels, described by Claire as a ‘cascade’. In the context of Claire’s life and relationships, this cascade incorporated multiple aspects of methamphetamine-related pleasure, including pursuing the rush through methamphetamine use with her partner. This relationship also represented her primary social contact, making these episodes of drug use a significant avenue for her to explore sociality. Her negative emotions and frustrating around her relationship and drug use also contributed to her using, as a form of self-medication to manage these feelings. Finally, she also spoke about her perceived failure to live up to the ideals of productivity and motherhood, which using drugs also temporarily relieved.

From this perspective harmful methamphetamine use does not arise from a failure of individual will in the presence of hedonic pleasure, or from the inexorable flow of environmental influences, but a dynamic interplay between personal, social, and structural factors. This complexity is mirrored in the language of enactivist psychiatrist Thomas Fuchs (2009, p. 230) in his discussion of mental illness, arguing that ‘the final disorder is the product of a cascade of subjective, neuronal, social and environmental influences continuously interacting with each other’. Whilst there may be various identifiable forms of cascading, they each only exist in the context of the others. The process of cascading, or engaging in harmful methamphetamine use, emerges as the sum of these parts, each of which are only temporarily analytically identifiable in the context of the others.

While our analysis has differentiated the rush, sociality, self-medication, and productivity as key domains of methamphetamine related pleasure, it is also significant how these domains were all woven together in participants’ experiences. In addition to bodily pleasures, participants experienced cognitive-emotional pleasures of conforming to social standards, of engaging in relationships, of being able to imagine and plan better futures, and of being enabled to perform important tasks like manage finances, prepare food for their family, clean the house, or generate income. This mirrors findings by Duncan et al. (2017, p. 92) in their exploration of drug consumptions rooms, and how pleasure ‘arose … through distinctive social and affective transformations enabled through events of consumption’, rather than as a linear result of drug use. These cascading processes could also be viewed as an updated and more nuanced understanding of the social learning processes originally identified by Becker (1953) among marijuana initiates.

When asked about their motivations for using, many participants could not provide a single answer, describing instead how their motivations changed across different times and places, from pleasure seeking to self-medication, or social interaction to sexual gratification. In single episodes of use, participants were utilising methamphetamine as part of multiple social and psychological processes. Some were struggling with practical concerns, participating fully in relationships, or meeting social expectations of motherhood or professional performance, combined with unmanageable emotions such as anxiety, negative self-worth, or boredom. The effects of methamphetamine could address this wide range of concerns, as well as providing an avenue for those who wished to optimise or maximise their experience and relieve the mundane or unrewarding nature of their activities. Participants therefore undermined the binary opposition of virtue and pleasure by utilising the pleasures of methamphetamine use to enable participation in multiple virtues expected of the modern neoliberal citizen such as productivity and independent self-management.

Pleasure, productivity, and risk

These findings highlight the importance of attending to the complex and nuanced experiences of pleasure in understanding methamphetamine use, particularly its intersection with productivity and risk. Whilst participants in this study did not use methamphetamine in the context of employment, their descriptions of use were frequently framed by a value system that implicitly valorised neoliberal forms of independence and productivity in contexts of health, finances, and childcare. Methamphetamine was cited as a resource for engaging in these behaviours partly by helping participants construct them as pleasurable and rewarding. Participants partly justified their methamphetamine use, therefore, by highlighting how it enabled their participation in a culture of independent or isolated self-management by relieving the pain of depression, anomie, and loneliness.

No participants denied the risks or harms related to their methamphetamine use, however these were weighed against the privations of their material realities, as unsupported single parents or being unemployed without meaningful social connections. Methamphetamine enabled them to derive potent sensations of meaning and purpose from undertaking otherwise burdensome tasks, thereby entangling functional and maladaptive behaviours within a single coherent value system. Pine (2010, p. 176) applies the term ‘edge-work’ to describe risk-taking practices that elicit excitement, exhilaration, or fear, in his ethnography of methamphetamine use as ‘embodied capitalism’. He explores how for PWUM “the compulsion to work under precarious conditions gets transformed into a physiological and affective desire for self-realization and an elusive achievement called ‘freedom’” (Pine, 2010, p. 165). In these ways the pharmacoologically induced pleasure of methamphetamine was shaped and expressed in terms of the cultural and economic settings in which participants utilised its effects. These findings support Dennis’ (2017) call for a more nuanced understanding of pleasure in addiction, that acknowledges the constant and perhaps necessary symbiotic relationship between pleasure and risk.

Recognising the psychological significance of these pleasures, derived from foundational human needs for meaning, purpose, and connection can enable drug use discourse to renegotiate the relationship between PWUD, drugs policy, and treatment. In her recent critical account of injecting drug use, Vitellone (2017) highlights the persistent framework of risk, danger, and harm that excludes large swathes of the social and psychological experience of drug effects. Critical researchers have increasingly called for a paradigm shift towards greater acknowledgement of how PWUD make complex and situated drug-related decisions that manage risk and harm, but also engage in exploration, resistance, and forms of care, which could revitalise current approaches to managing drug related harm (Race, 2008; Vitellone, 2017). This new paradigm would allow accounts of methamphetamine use to incorporate its role as an active, exploratory, agentic activity as described by Race (2018), by rejecting the binary simplicity of methamphetamine use as pathological or recreational and opening analysis up to more multidimensional descriptions of drug use and recovery.

Whilst the increased functionality or intimacy sometimes derived from methamphetamine is a necessary part of understanding drug use, participants also highlighted its limitations, for example Jane commenting that the negative effects are ‘getting worse’, or that methamphetamine gave her ‘a false sense of what love is’. Similarly Ian referred to being ‘disgusted’ by his behaviour whilst using. This may partly be due to the nature of the participant cohort, all of whom were long term methamphetamine users currently accessing services due to its negative impact on their lives.

The continued significance for these participants of various psychologically complex and socially constructed methamphetamine related pleasures suggests necessary developments for harm reduction policy in the Australian context. Harm reduction currently represents a small proportion of Australian policy regarding harmful drug use. A review by Ritter, McLeod, and Shanahan (2013) observed that for the period
of 2009-10, two thirds of the Australian government’s budget for illicit drug use response was spent on law enforcement strategies, with 21% on treatment, 9% on prevention, and 2% on harm reduction, a period which correlated with record levels of drug seizures and arrests (Coyle et al., 2015). This approach works to shape the ‘problem’ of addiction by quantifying it in order to label people as addicts and therefore justify the allocation of resources for support and policing (Moore & Fraser, 2013).

Our findings support research by Vitellone (2017) that highlight harm reduction as a method for finding different ways of encountering the lifeworlds of people injecting drugs. Moving beyond the benefits of harm reduction’s pragmatic approach to drug policy, discussions must now include the critique of harm reduction as a new way to construct drug use as an emergency dominated by risk and suffering (Duff, 2018).

The complex intermingling of different pleasures and risks, experienced and constructed by the participants in a wider context of neoliberal ideals presents a more informed picture of methamphetamine use around which harm reduction policy could be structured. Supporting less harmful functional use, through a contextual understanding of methamphetamine related pleasure, can avoid reflexive problematisation of individualised drug use and the reinforcing of neoliberal ideals of wider policy landscapes in which interventions take place (Duff, 2018). These findings indicate that the nature of functional methamphetamine use, produced through occupations, social contexts, and economic realities that incentivise its use, is an area requiring further investigation (Lende et al., 2009), informed by an understanding of how pharmacologically derived pleasure is shaped by culturally derived desires for productivity, independence, and agency.

Conclusion

The escalating and significant harms associated with methamphetamine use must be understood in the context of the particular pleasures and purposes which it supports, and the wider cultural narrative which positions drug related pleasure in opposition to neoliberal virtue. As the experiences of participants in this study revealed, the pleasure of methamphetamine use was often structured around broader social expectations and relationships, facilitating sociality, sexual intimacy, and purposeful, productive activity, partly through the temporal management of chronic mental health concerns. These pleasures were therefore not solely derived from pharmacological properties of the substance but were also translated and expressed through the social and cultural environment in which it was used. Interventions to reduce methamphetamine-related harm will therefore have limited impact if they cannot speak to the real-world experiences of PWUM, including the pleasurable, purposeful, and productive aspects of socially embedded drug use experiences, and challenge the frameworks that currently construct drug related risk, harm, and pleasure as simple, binary, and stable phenomena.

Ethics

Ethical approval was obtained for this study from the Queensland Health Metro North and University of Queensland Human Research Ethics Committees.

Declaration of Competing Interest

None of the authors have any competing interests to declare.

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