

## ABSTRACT

This project will take a qualitative methodological approach to explore the role of pleasure in participant's experiences of injecting drug use and apply this knowledge to inform more meaningful and engaging ways of reducing drug-related harm.

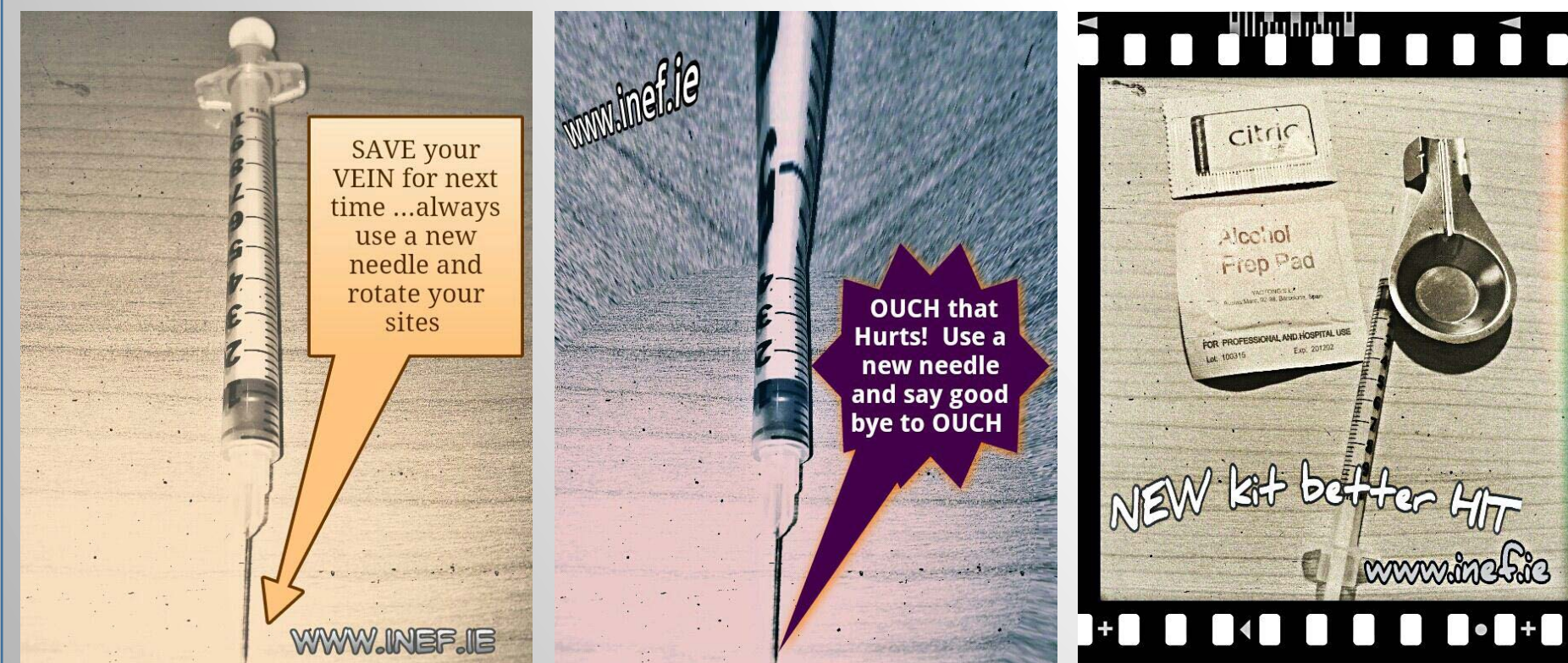
## NEED FOR RESEARCH

There are high rates of blood born viruses (e.g. 49% Hep C) and bacterial infections (1/3 reported in the last year) among people who inject drugs (PWID). Risk and 'feared-based' campaigns to reduce harms have had limited success; they have been shown to alienate and stigmatise PWID (Aggleton et al, 2005) and may inadvertently reinforce negative attitudes and beliefs (Gresbach and Taylor, 2009). Therefore, a new approach is needed!

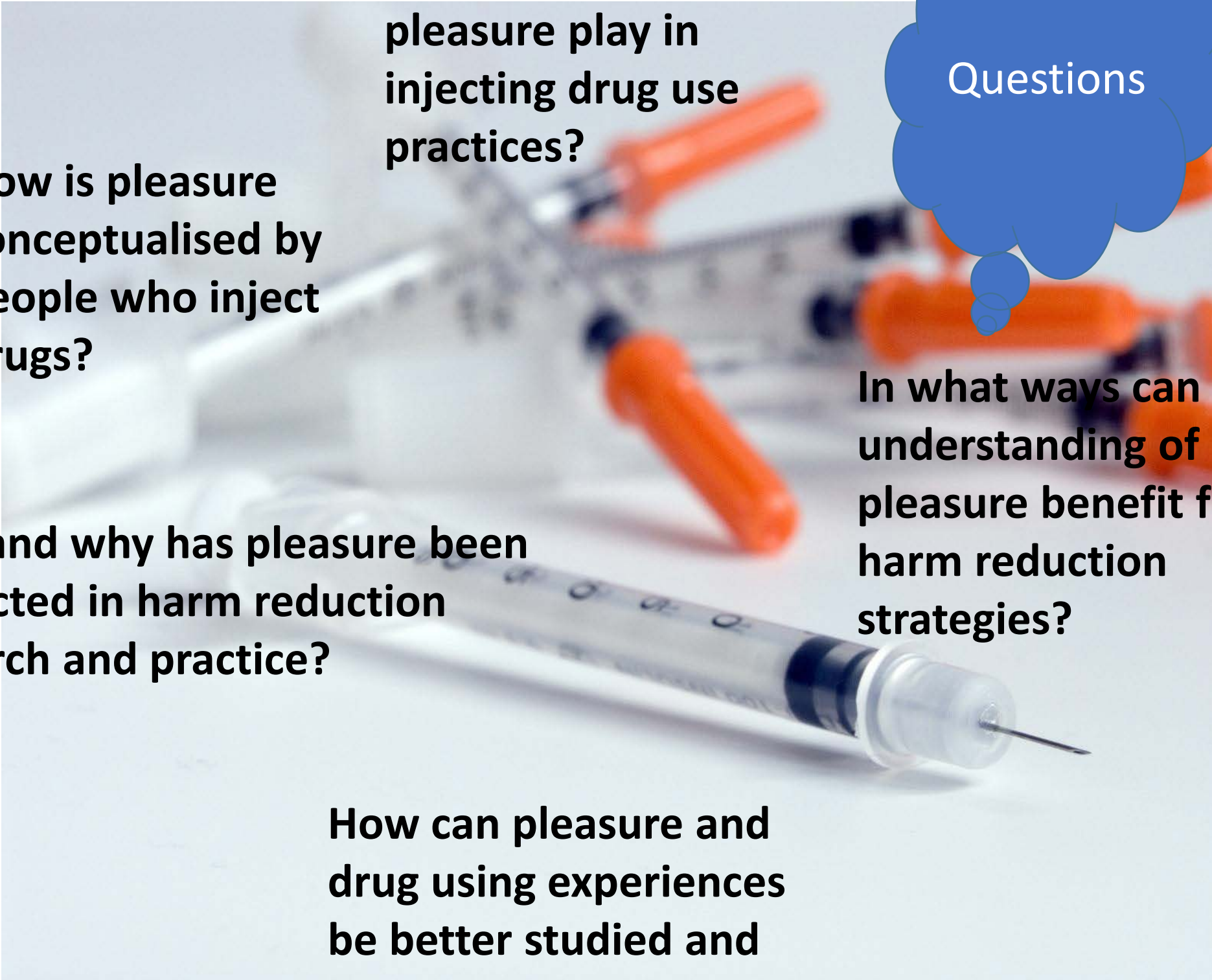
## BACKGROUND

"Harm Reduction refers to policies, programmes and practices that aim primarily to reduce the adverse health, social and economic consequences of the use of legal and illegal psychoactive drugs without necessarily reducing drug consumption." (IHRA, 2010: 1)

Recent research has shown that factors, such as, the pragmatics of injecting drugs are often more important than the need to avoid viral and bacterial infections (Harris and Rhodes, 2012). The proposed project intends to extend this knowledge by exploring the use of pleasure as a possible way of promoting safer practices (see posters below).



Harm reduction posters informed by Harris and Rhodes, 2012



**What role does pleasure play in injecting drug use practices?**

**How is pleasure conceptualised by people who inject drugs?**

**How and why has pleasure been neglected in harm reduction research and practice?**

**How can pleasure and drug using experiences be better studied and understood?**

**In what ways can an understanding of pleasure benefit future harm reduction strategies?**

## OBJECTIVES

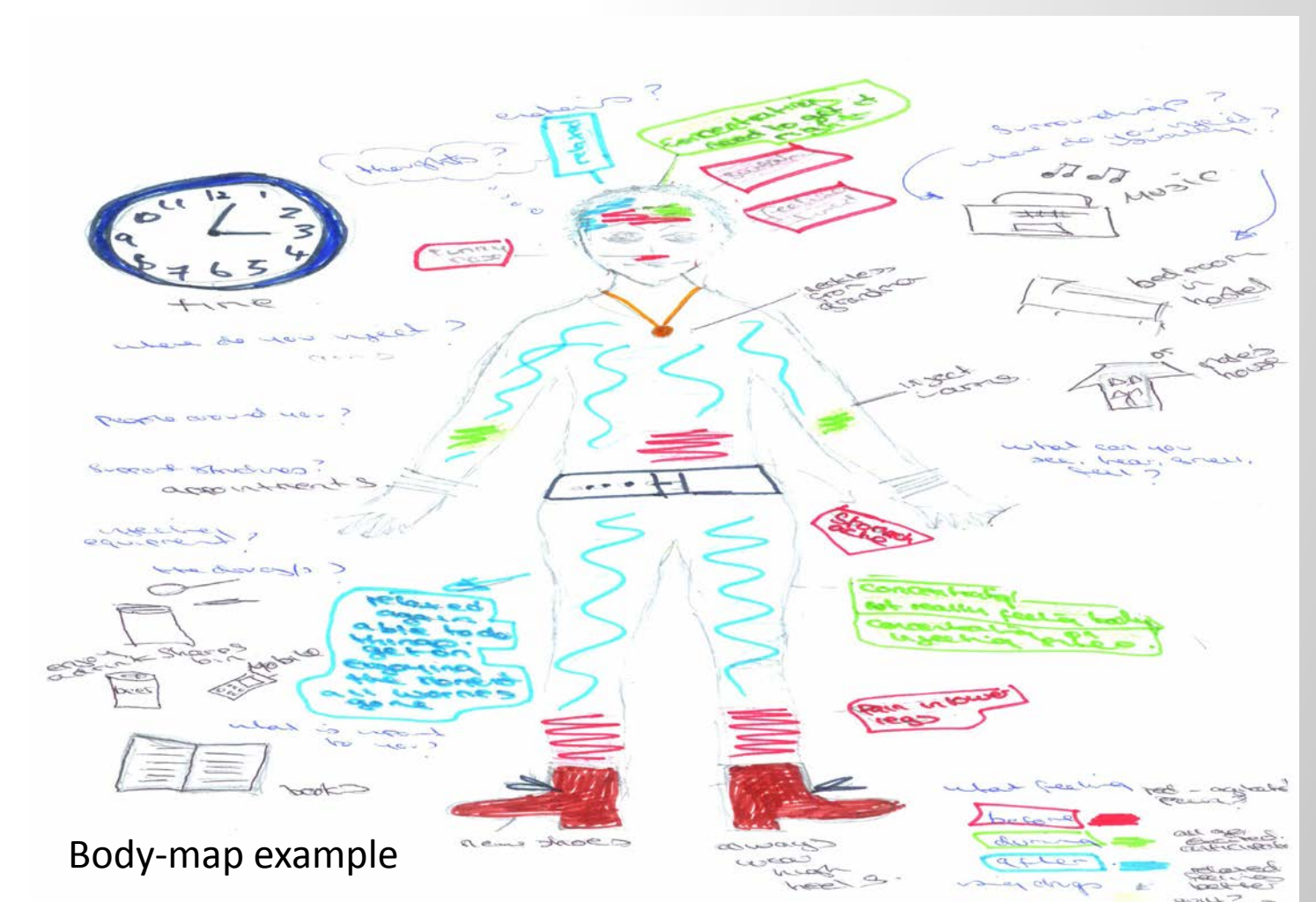
- 1) Extend the existing discourse on drug use and pleasure.** An understanding of the embodied experience of pleasure, through body-mapping and video elicitation, will be used to take seriously an otherwise unrecognised aspect of injecting drug use (IDU).
- 2) Examine the IDU and harm reduction (HR) 'risk environment'.** Body-maps will be used to consider the social, sensory and material context of IDU, which allows a better understanding of the practice and where/how to intervene where there's the potential for harm.
- 3) Understand why and how pleasure is neglected in HR contexts.**
- 4) Inform a new generation of HR.** This project hopes to engage with pleasure as a way of reducing drug-related harm.
- 5) Enable a less pathologising and stigmatising view of IDU.** By exploring pleasure as a 'productive' pursuit, which interacts with care and safety, rather than based on a dominant 'addiction' model of 'deficit', it can reduce stigma and empower people to use services more frequently.
- 6) Explore new methodologies in the pursuit of a more empirical study of pleasure.** Sociologists working within the field of IDU have widely cited the neglect of pleasure, but none, to my knowledge, have suggested ways to rectify this through empirical study.

## METHODS

**In-depth 'creative' interviews with 25-30 people who inject drugs**  
 'Creative interviews' have been developed at the *National Centre for Research Methods* (Mason, 2010) as an expressive research tool for understanding people's lived experiences which are sometimes hard to express through the spoken word alone. I will use body-mapping (see below) and video elicitation to explore the embodied experience of IDU.

**In-depth interviews with 5-10 service providers**  
 These will focus on what motivates drug use, whether pleasure comes into this, how harm reduction is delivered and whether they could see a place for pleasure. This will be compared with the PWID interviews for connections/disconnections.

**Participant observation at a drug service**  
 The object of the participant observation is to observe the daily operation of the drug service, the impact of recent policy changes and the delivery of harm reduction. This method is integral to gaining a naturalistic understanding of how pleasure may be discussed, neglected or negated in drug services and how harm reduction strategies function on the ground in order to see how a notion of pleasure could be incorporated if found to be of importance



## NEXT STEPS

NHS ethical approval → Fieldwork to begin in March → Coding and analysis → Write-up and dissemination