

When I wake up in the morning, I just enjoy being with the whole of my family. You know, they fix me breakfast, lunch and dinner. They take care of me. If like I don't have no money, they give me the things I want. If one day I gotta come out on the street, that's when things gonna change. That's when I get into other things. Like I can stay in the house for weeks without getting high, then I hit the streets and I get like crazy. Everybody is saying "hey, hey, hey, hey" because they know I know how to make money. So they be forcing it on me and like its hard to turn down. (Michael, age 28, Washington, D.C.)

Statements like this are often used to promote an image of the heroin addict as weak-willed and helpless against the forces of a destructive environment (Chein 1966; Stephens and McBride 1976). In this case, the man appears to lose control and start using heroin when he is confronted with peer pressure. Most of the HLS men spoke of moments when they were unable to resist the temptation to use heroin. For them, heroin offers many desirable effects: a sense of well-being, a return to feeling normal, a rush of strength and power.

However, the HLS interviews suggest it would be misleading to assume that these men have relinquished control of their lives to heroin. It would be equally wrong to assume, as others have (Glover 1956), that they are filled with self-hatred because they use heroin. The fact is that while many of the HLS men have regrets about their dependency, and most admit a desire to stop or curtail their heroin use, they also maintain a sense of self-respect. Many have great expectations for themselves. Although they feel frustrated at their lack of success in meeting these expectations, they still feel they have control over their lives. Some achieve a sense of mastery over their lives, as expressed by Tap, 27, from Philadelphia:

I have more drive now than I used to have [before I used heroin], because I didn't have to hustle. Now, I have to. Now I do realize one thing: anybody can make any amount of money they want to. All they gotta do is want to.

This chapter describes how these men, who hustle for and use heroin regularly and who interact daily with other heroin users and nonusers as well, maintain a sense of self-respect and control over their lives. After a brief discussion of questions used in this analysis, the chapter introduces the concept that the HLS men constantly struggle to live a narrow path between the street and the straight worlds. The contradictions which emerge out of this marginal lifestyle as evidenced in the men's comments about themselves are identified and discussed. The analysis is continued in the next section which examines the issue of "marginal status," and the ways in which the HLS men relate to both the street and the straight worlds. The chapter ends with comments on the type of heroin user studied and possible implications for the treatment of this

type of user.

Self-image and control are qualitative phenomena and difficult to measure. Most people, whether heroin users or nonusers, are unlikely to respond with elaborate detail when asked how they feel about themselves and their lives. Therefore the HLS interview schedule contained a number of open-ended questions designed to elicit how the HLS men felt about themselves, their lives, and the straight world around them. For example, HLS interviewees were asked such questions as: "What degree of control do you think you have over the events in your life?" "What changes, if any, in your feelings about yourself have occurred since you began using heroin?" "How would you say straight society in general views heroin addicts?" "Think about straight people you actually know—even your own family. How do they regard you and your use of heroin?"

The answers to these and other questions were used in combination with the overall content of each interview to provide insight into the way the HLS men feel about themselves and their lives.'

The Street and Straight Worlds: Contradictions and Self-Image

I get tripped up between love and dislike [for myself]. That really gets tripped up. I'm not doing this to kill myself. I'm doing this to hide from things that's hurting me. I'm not on no death trip. (John, 28, Washington, D.C.)

Issues of self-image and personal control among Black male heroin users raise a number of contradictions. These men profess a sense of power over their lives, yet they also confess a sincere confusion about how or when to exercise that power. Most of them refuse to blame society for their dependency, but readily describe the extraordinarily difficult circumstances of their lives. As a result, many claim to rely on heroin as a means of relaxing or seeking refuge from a hostile world. Many seem to have developed particular methods to avoid becoming what they view as crazed dope fiends. The HLS men generally acknowledge the concern and support of loved ones, yet they carry a burden of guilt for having exploited those who have been closest and most generous to them. These men speak about their suffering and hardship, but in their reasoning, it seems that no single person, event, or agent is the sole cause of their suffering.

Icepick, 35, from Washington, D.C., sums it up:

I have 100 percent control [over my life], if I want to use it.

Given the public image of heroin use it may appear a contradiction that these men see themselves as struggling for self-improvement while at the same time continuing to use heroin. On the surface, it is a contradiction that they see themselves as victims of social injustices, and also as perpetrators of crimes against others. It is perhaps also confusing to the outsider viewing the heroin lifestyle that users may regard themselves as heroin addicts but refuse to label themselves as "junkies" or as "dope fiends."

To understand the contradictions in these men's lives, it is necessary to examine the meanings HLS men attach to events in their everyday lives. This reveals an overriding commonality in HLS comments: that these men are moving within and between two worlds, the street world, and straight society. Both worlds provide them with social models, values and perceptions which determine their behavior, and standards by which they judge themselves and others. Both worlds provide them with stresses and threats, but also with challenges and unique sets of skills with which to meet those challenges.

The contradictory nature of their perceptions is more evident in the context of self-image as the product of a person's adaptation to the environment. Heroin is readily available in the neighborhoods where these men live. In these poor urban spaces, social supports exist for heroin's initial and continued use (Feldman 1968). Heroin use is equated with economic survival in their minds and is viewed as giving them "more drive" in accomplishing the chores of daily living, those chores which are essential to maintaining a satisfactory self-image. In their social networks with other users, opportunities exist for intimacy and adventure, and for acquiring a sense of competence and self-confidence. Even among nonusers in these neighborhoods, there appears to be a tolerance for heroin use.

But tolerance of heroin by nonusers is not perceived by users as complete social acceptance, and being a user is not the only game in town. At least as strong as the values which support a heroin lifestyle are other values which support achievement, familial life, ambition, and determination. Supporting and amplifying these themes are the constant media advertisements which convince listeners that a middle-class lifestyle, with its focus on material wealth, is attainable by all who strive for it. Therefore, the social context within which the heroin lifestyle is played out is characterized by two social models which foster distinct but somewhat overlapping

sets of values, expectations, and behaviors: those of the street and those of the straight world.

The street world is composed of neighborhood friends, running and using buddies, and other associates who can be seen regularly hanging out in popular gathering places. The straight world is recognized by users as people who do not use drugs and who do not hang around on the street, including family members. Also, straights are looked at as people who do not understand heroin use and who hold only disdain and/or pity for heroin users. All heroin users have some contact with the straight world, even if only for instrumental purposes, such as to buy groceries or resolve legal issues. They generally have some degree of social affiliation with straight people, relying on them for emotional or financial support. How HLS men negotiate their interaction with the straight world will influence their patterns of heroin use. More importantly, however, the nature of this interaction and the HLS men's perception of society is the key to how they feel about themselves and how they control their lives.

Living between the street and straight world leads to apparent contradictions in their statements about themselves. Their comments can be summarized as follows:

the claim of aversion for drugs and the lifestyle of the street which is counterbalanced by the thrill of being on the street where one is drawn into a group of peers and valued simply for participating in the activities of the group (most importantly, drug use).

the sense of being trapped in a predicament and wanting to permanently abandon the situation, but knowing that, in the group of fellow users, one can demonstrate particular skills which win approval and function effectively—even if illicitly—to accomplish certain goals (for example, hustling money).

a personal feeling of weakness and doubt that one has the necessary fortitude to avoid drug use, which is challenged by the empowering effects of heroin intoxication and of regularly being accepted by a social group.

These simultaneous, contradictory feelings of aversion and attraction for heroin, of enslavement and mastery over the street life, and of weakness and power which accompany heroin use make sense only if we look at the everyday experiences of HLS men. We must look at their lifestyle from their perspective and compare the rewards for using heroin with the rewards for

being straight.

Getting High, Getting Normal, and Getting Free: Gratification from Heroin

The statements of HLS men demonstrate that they seek something more than intoxication when they take heroin. George, a 23-year-old, from Washington, D.C. claims to take heroin because it makes him feel as if he is "communicating better with people." Ace, age 34, in Philadelphia, takes heroin because "it is the norm for me. I don't get drunk. I don't get ossified. I just get normal." Gut, 18, from Chicago, says he takes heroin to feel secure: "You don't feel like nobody is messin' with ya." For others, like Larry, age 32, from Washington, D.C., heroin is a medicine: "Like some people would take aspirin for a headache," he says, "I take heroin when I feel bugged." These statements suggest HLS men take heroin for reasons similar to those for drinking alcohol—to keep functioning, to continue participating in their everyday routines. In that sense they would say they take heroin for constructive or normative reasons.

Regular heroin users have rarely been depicted as reflecting on their situation and, after weighing alternatives, choosing to use heroin (research by Agar 1973, and Sackman 1976 being important exceptions). It is easy to oversimplify the experiences of heroin users and to assume that their patterns of drug use originate in and are sustained by a sense of helplessness fostered by deprivation in a poor urban development (Merton 1957; Hughes 1971). Heroin users have been portrayed as being easily influenced, as submitting readily to peer pressure, and as inevitably opting for that behavior which provides them with a sense of group membership (Paschke 1970). They are furthermore assumed to be driven to heroin use by the need to escape the pain and alienation of repeated family crises (Stanton 1977), of lost jobs, and of mental or physical illness. In this respect, the image of heroin addicts commonly presented in the media (Mills 1965; Coombs 1974; Morgan 1980) and, even in some scholarly journals, depicts them as helpless individuals who are not totally capable of controlling their lives. While this perspective is sometimes more implicit than explicit, it is stated most boldly by Pittel (1971):

Drug dependence is most likely to occur among individuals who lack the psychological resources needed to deal adequately with inner conflicts and/or environmental frustrations.

Such a view does not accurately describe the HLS men as they presented themselves in the interviews. Most of these men speak of having a significant degree of control over their lives. Whether describing their first heroin experience or explaining their continued use, HLS men seem to be saying that their use of heroin is a matter of choice. For instance, Irv, age 26, from Philadelphia said:

I asked for some [the first time I used heroin]. It wasn't any peer pressure to use heroin.

Another user, Dave, 35, from Philadelphia, said:

Well, when we first started, believe it or not, all of us tried it. We all tried it for long periods. People who didn't want to be a part of that lifestyle started drifting away from it. People who wanted to, stayed right with it.

Many share the belief that is expressed by Guy, a 30-year-old from Philadelphia:

The stuff is so bad out here now you know that you don't hardly worry about it any more. You either do it when you feel like it or you don't.

Few HLS men said that the proddings of friends, family members, or helping professionals would have any impact on their decisions to use or abstain from heroin in the future. Curiosity seems to have been the strongest factor in directing these men towards their first experimentation with heroin. As Paul, age 21, from Washington, D.C., said:

I was very tempted to try [heroin], you know for the experience . . . just this [one] time.

Curiosity, combined with the conviction that heroin use is not powerfully addicting in quite the way it is popularly portrayed to be, that is, that the user will not be violently transformed into a crazed dope fiend, allows these individuals to continue using heroin while maintaining a sense of control over their lives. Umber, age 26, from Philadelphia also stressed the curiosity aspect:

So curiosity . . . we wanted to know what kind of feeling it was, when we watch them high. And they looked like they felt so good.

Accordingly, curiosity and the desirable or relieving effects of heroin, not peer pressure by itself, draws these men to repeated use. Whether or not this is true, it means that in their own eyes they have some control over their heroin use. It is an oversimplification, therefore, to assume that the continued use of heroin is only a symptom of helplessness and dependency.

Whether they attain a powerful rush or simply relax, many of these men attain real gratification from heroin. At times, this gratification is a total escape from a world that these men view as hostile and unpredictable. It is an attempt to cope with trauma:

'Cause I still have some feelings that I had when I was twelve years old [the time when I first tried heroin]. I remember the first time I used drugs, and like I said, I did it on my own, my mother had called me an ungrateful . . . an ungrateful son of a bitch, that's the first time I snorted, too, cause I had that feeling that that's how she felt about me and I went in my pocket and I used it. (Red, 36, New York City)

A recurrent and convincing theme that accompanies the claim that heroin is used as a means of escape revolves around the many problems that these men face in their daily lives, as portrayed in the following interview.

Interviewer: Did I ask you what type of work you did before you got involved?

Respondent: No. I was assistant to the chef. Assistant chef.

I: Oh, you were cooking. Where?

R: United States House of Representatives.

I: Where?

R: United States Capitol, House of Representatives.

I: Holy smokes, and you blew it?

R: No. I didn't blow it, when Reagan came in he blew it. That's when my problem started with my life. Cutbacks.

I: Oh, so cutbacks got you rified?

R: Yeah. Even with the drugs . . . because when I was working I wasn't using heroin that much, see what I'm saying? And I guess that's why my wife was putting up with [me] better. And when I lost my job, that's when things began to fall apart. (Icepick)

Heroin, as it was experienced by these men, is more than an escape from disappointment and crisis. It is depicted just as accurately as a journey into intimacy with other people. The HLS men regularly commented on the supportiveness and gentleness with which their peers treated them while getting high together, particularly the first time they used:

[The first time I used heroin] my body got real warm, a hot flash, but I wasn't afraid of it. It wasn't no fear because I knew the people I was around with were ready to do anything and I felt I had enough confidence. I felt as though they wouldn't let anything happen to me. So that's why I didn't have no fear of doing it. (Bull, 27, Chicago)

In addition, heroin use for many of the HLS men occurs in a social or party atmosphere where the drug serves to intensify the social experience, allowing users to interact more freely. For instance, many anecdotes offered by HLS men stress how heroin use is tied with romantic intimacy. Over 26 percent said that their best experience with heroin occurred when they were with a woman. Heroin is regarded as a source of the confidence and eloquence necessary to win a woman's affections:

I got high one day and I pulled a fox, I pulled a lady, because I know if I was other than myself, I wouldn't have been able to pull her. And I was clean and I was high and I said some words to her that I know I wouldn't [have] said to her if I was sober. And like, I pulled her and it made me nuts, ya know what I mean? That was the best experience of my life. See, getting high is like saying, when I get high I can pull more girls than when I'm sober. (Tap)

In summary, heroin is often attributed to a heroin user's ability to have certain experiences which might be considered very basic to self-esteem, such as companionship, self-strength, and relief from personal distress. As long as they feel that their attainment of these experiences is contingent on heroin, they will be supported in its use. From heroin use they gain certain rewards: (1) the thrill of being in the street where, by pursuing heroin, they also chase adventure and excitement; (2) a sense of approval from their peers and, if their hustling is successful, a feeling of mastery over particular skills; and (3) a feeling of relief, escape, or empowerment which accompanies the effects of heroin, while simultaneously experiencing the distress and complications of heroin use.

The Prick of the Needle: Distress and Complications

The picture of contradictions becomes clear as the HLS men describe heroin as introducing distress and complications into their lives:

. . . Oh, man, but I don't know how I went on to ever use any more drugs after that; I was so sick that night. (Joe from Chicago, 33, with a 19 year history of heroin use.)

Concerns about health, personal relations, arrest and incarceration, and monetary matters are typical in the lives of these men:

Respondent: . . . I worry about infection, but I just try to keep things clean as possible. That's all. Try not to use a needle but once.

Interviewer: Do you talk about things you would like to do, such as . . . ?

R: Yeah. Such as, you know maybe owning something, you know. Trying to get your life in order where you can own something and not have to work so hard all your life.

I: What about hooking up, planning and rehearsing some crimes? R: No, I'm not off on no crimes.

I: What about the police?

R: You gotta watch for them because you be dirty all the time. Got tracks on your arms.

I: What are the circumstances that make you concerned about overdosing?

R: Well, I got a family, man, and I don't want to die and leave them with no father, nobody to take care of them. I try to think about my family. If it happens, you know . . . (Umber)

The many complications which occur in the life of heroin users foster a need for regular interaction with others. These complications are both practical and personal. The heroin user must cope with the practical aspects of supplying himself with heroin: copping, hustling, selling, and maintaining or searching for a job. Those individuals who support their heroin use through illicit means must also learn to avoid arrest. On the surface it may seem that the only health concerns unique to heroin users are those of overdosing and getting an infection. While central in the minds of regular users, there are other health-related concerns which originate in the heroin users' lifestyle, many centering around nutrition. Heroin users would not be able to manage the many complications which their habits impose without support and information from other users. Only users have certain information about obtaining heroin, avoiding arrest, and coping with familial or health problems. This means heroin is also a social activity—successful heroin use depends on social contacts and social networks. Heroin users come together to acquire the social contacts and information which will allow them to manage their use, as well as their lives, most effectively. In order to use heroin and survive they must maintain some involvement with the street social network.

Affiliation with a network of committed users directs heroin users towards certain contacts with straight society, while routing them away from others. There is a tendency among HLS men, for example, to rely on noninstitutional sources of medical information obtained through trusted contacts. The following typical comments come from one HLS respondent when he was asked what he does when he feels ill:

Respondent: I usually . . . my woman is into medicine. I usually lay down and ask her. Before I suffered with aspirins and used street doctors.

Interviewer: What's street doctors?

R: People that use drugs. Like they know everything. Somebody in the place, especially if you go to a shooting gallery, everybody is a doctor, lawyer, or indian chief. (James, 19, Chicago)

Like many social networks, the street network is rich with information about how to manage health problems. Much of this information focuses on drug use. Some of the prescriptions are rather involved; one example is a concoction of vinegar and spinach greens combined with baking soda which is reputed to ward off the symptoms of withdrawal.

Even though they may have some contact with straight friends or family to acquire much of the care they need, the HLS men are still marginal to major institutional segments of straight society. They make every attempt to avoid sources of medical treatment and information where those who provide such aid will try to change their pattern of drug use.

Consequently, the lore of the street encourages them to postpone contact with institutions whenever possible. Contact with doctors is believed by some to entail a risk of having one's involvement with heroin detected, perhaps leading to arrest. However, this fear is not as pervasive as an apparently greater threat, the possibility of mistreatment at public hospitals. Many believe that if they are recognized as heroin users at these facilities, they will not receive proper treatment.

One day I took my friend to a hospital and we couldn't get nobody to him. We had to take him to a doctor and just because he was a drug addict they sat him down in the corner and he died. I'm serious. They didn't care enough to bring him out, and he died, and the man who was in the corner he died. Squashed me, and it hurt me to my heart. I didn't like the guy, hardly knew him, but he died. His death made me love him. (Jake, 29, Philadelphia)

The HLS men generally describe themselves as being in good physical health. However, the danger of mistreatment at public hospitals causes heroin users to avoid contact with hospitals except when emergencies demand it, and rely on relatives, friends, and home remedies, or on trusted private physicians when they do not get successful results from self-treatment.

Heroin use is actually a form of self-medication for some of these men. For others, to manage one's health meant simply to control the symptoms of withdrawal from heroin:

I don't have symptoms [of withdrawal] no more because I control it now. Like I said, I don't mess around. When I might mess around two days in the week, and the rest of the week I might just drink, you know, smoke a little joint right there. You know, it all depends, you know, like sometimes, if my money's funny and lot of times, even now, I have a strong control that if I have money I don't spend it on heroin just because I have it. I might just drink all that day. Or drink some wine or liquor or beer, you know. I do all these things. (Kyle, 30, Philadelphia)

Still, these men are not without minor health problems. Most frequently, they reported weight loss since they began using heroin. They also fairly consistently reported having bowel problems and a low sex drive. It was not uncommon for them to say that their complexion had darkened or that they had lost a few teeth since their initiation to heroin use. Others experienced fatigue and limited endurance, which they often referred to as laziness. Their posture had changed to slouching in some cases and most men experienced occasional, but manageable, irritability. Also, consistent throughout the interviews is a reluctance by HLS men to attribute their symptoms solely to heroin use.

Balancing the thrill and empowerment that accompany heroin use and involvement in street life are many aversions and complications. These go well beyond the health problems discussed. The thrill of heroin is countered by fear, nausea, danger of overdose, pain of imminent withdrawal symptoms, and the constant hassle of having to worry about and plan for obtaining money and heroin for the next shot. And buried in these complications, at least occasionally, are feelings of being trapped in the heroin lifestyle and a sense of personal weakness.

The Relationship of the HLS Men to Straight Society

The Black male heroin user has been depicted by straights as a desperate loner (Snyder 1970). Rejected by his family and friends, he is alleged to associate exclusively with other addicts. However, as we have seen throughout this book, the HLS men present a different image. For instance, in terms of family and friends, the HLS men appear to have established relationships which potentially can provide them emotional support and advice. In fact, intimacy and a feeling of connectedness with other men and women is a guiding force in their lives. Dave willingly discussed his strong feelings and need for others:

Well, most of the time it's this older dude [that I talk with]. He was a drug addict too. My old lady, I talk to her. I tell her all that stuff. We sit around and figure things out now, when before it was this old cat. We used to sit around and rap. He'd make me feel better about myself.

And Joe, age 24, from Washington, D.C., says that he has "a lot of friends" and that he sincerely believes his wife "is concerned" about him:

Okay, I had a lot of friends that I was talking to where I could have said a lot of anger and animosity towards my wife, you know, 'cause like we didn't stay together. But truly down deep inside me I believe my wife is concerned about me, and that she did what she did because she did not want to see I believe what she says, she did not want to see me going the way I was going. She would rather not be there to see.

Many HLS men had considerable contact with nonusers of heroin. Further, the HLS men regularly talk about themselves in relation to straight society. Their comments comparing themselves to straights demonstrate some degree of ambivalence. Some describe the life of straights in an idealized fashion, as if the life of straights were secure and virtuous. Others claim that straights fail to involve themselves in the visceral and pleasurable aspects of life, that their life is unidimensional and somewhat empty:

The major difference [between heroin users and nonusers] is that they are straight. They're not as happy as you know somebody—there's something missing. They feel more better about blocking out things that they don't have and may never get . . . When things start to fall apart for them, then they need to [but don't] fall back on the drugs. (Jake)

Most HLS men have precise ideas as to how straight society views heroin addicts and they struggle to make a distinction between themselves and "heroin abusers." The following is typical:

Interviewer: How would you say straight society in general views heroin addiction?

Respondent: Something low, dirty. Evil dog. Something to be watched. Scum of the earth.

I: How do you feel about those views?

R: I think they lie. Because, see, all heroin addicts are not heroin abusers, okay? And you get the abuser, he's a dog, right? He's the one who sits in the drug house and shoots all day long. That's an abuser. I'm a visitor, you never catch me in the drug house. Not me, no. (Slim, age 38, New York City)

HLS men seek to become "visitors" in social networks of other users, to establish a degree of contact and membership while remaining somewhat detached from that network. Their attempts to remain partially marginal to both street and straight society are a central part of their strategies for controlling their use and their own lives.

According to the belief system of HLS men, there exists a wide gray area between addiction and total abstinence. They may flirt with the thrill of heroin and engage in the adventure of street life, while maintaining the option to depart from this lifestyle when they choose. Even those who use large doses of heroin for an extended period of time think they can do so without ruining their lives as long as they do not adopt the behavior of the drug-crazed dope fiend. As long as they refuse to see themselves as lowly addicts and maintain a respectable posture in relation to straight society, they are keeping their lives under control.

For these men, controlling their lives is synonymous with regulating their use of heroin. They have a large repertoire of strategies for wielding control over their use which they employ with varying degrees of success. They regularly try to discipline themselves, setting goals and rewarding themselves with heroin when the chosen goals are accomplished. Many of these

men will postpone the use of heroin, even if it is readily available, until they have earned the money to pay for it. Some heroin users depend on others to help them limit their use. The peer groups of these men commonly include a nonuser who takes responsibility for holding the dope until the group agrees to use it. Many of these users also subject themselves to periodic episodes of abstinence. Some have the ability to simply avoid drug use altogether for extended periods. Others seem to value periods when abstinence is necessitated by external circumstances. For example, when traveling to an unfamiliar city or even when incarcerated.

In addition to individual strategies for controlling their use, these men have many resources within the street culture to stave off the symptoms of withdrawal. Some of them are regularly drawn towards using low quality heroin which postpones withdrawal, is relatively inexpensive, and does not detract from accomplishing daily tasks. Most of them practice polydrug use as a way to avoid withdrawal. Through combinations of methadone, methamphetamine, barbiturates, and valium, even those with a pattern of substantial daily use appear to be able to endure periods when dope or the money to buy it is scarce. These strategies represent only a few of those which are provided to users through their contacts in the street. If not actually serving to prevent addiction, these strategies serve to raise the level of functioning of the men and allow them to control much of their lives and avoid seeing themselves as "abusers," but rather as disciplined "visitors" to the heroin lifestyle.

Implicit in many of the statements is the belief that an ideal pattern of heroin use means using the drug and successfully supporting a habit, without sacrificing personal relationships or self-advancement through education or employment. In fact, most of the users have experienced at least brief periods of security and productivity in their lives at work and home. It is this ideal pattern of use that HLS men seek to establish for themselves. To control their lives, these users must be aware of the many complications that heroin imposes on their daily existence. Controlling their lives means that they must develop strategies for managing these complications. Heroin use is regarded as an intense experience which, as noted earlier, is just as likely to be self-empowering as self-defeating. From this perspective, heroin users are able to inject heroin regularly, while maintaining the ability to make important choices in their lives. They perceive themselves as weighing the decision to use heroin against several alternatives. They see themselves as taking responsibility for their actions, believing that if they consistently control their use and lifestyle, they will not suffer the destructive consequences of addiction.

Despite his deep involvement with heroin, Michael typifies this view:

I feel positive about the future. I just feel I'm caught up in something of my own making. And it's up to me to get out of it. And I feel as though I can.

Not the Cause, Nor the Cure: Self-Image and Control Among Inner-City Black Male Heroin Users

Written by Richard Morris

Umbert has a similar view. When asked if his self-confidence and self-esteem and his "feelings about himself" had changed since he began using heroin, he replied that ". . . nothing had changed." Further, when he was asked if, as a heroin user, he thought of himself as "being sick" he said, "No, because I control it. It doesn't control me."

These efforts to control one's use of heroin are always engaged in with the larger society's values and expectations in mind. Some HLS men appear to measure the proper use of heroin by mainstream expectations such as attending school and being married:

Because the moment I started using heroin . . . If I had used it positively, you know, I would have more things. If I had continued school. I'm quite sure, you know, that my wife wouldn't have left me. I'd be getting a lot of chances. In other words, I've allowed heroin to ruin me. (Icepick)

There is evidence that, for the HLS men, controlling their lives is intricately involved with their hopes for the future. Their expectations for the future involve modest achievements and possessions, with their most recurrent wish being to have security and freedom from a sense of threat:

. . . I'm talking about I'm trying to get out there and get something for me. Like a nice little piece of property where I could have me a nice little home that I could come to, you understand? My lady here and a couple of kids. I don't have to have a brand new car, you understand . . . I don't want a whole lot, I just want . . . something, you know . . . But to put your hand on the door of your house and come in and there's nobody living here but you and your family; and you open the door and know this is yours, it's a hell of a feeling. You don't get a chance to get that, man. So, you get disgusted and discouraged and it's like there's nowhere to turn . . . I'm not talking about drug programs, I'm talking about CETA programs where you can try to get out there and get yourself something the legal way. You start messing around and get out there and getting it the illegal way. Why? For the simple reason that the money they give you can't support what you're trying to get. For myself, I don't want to be as rich as a hawk. Let me live the middle way . . . I can meet that bill and still have food for my woman and kids to eat and sleep. (Dave)

The majority of responses to our questions about hopes for the future expressed goals and desires similar to Dave's and generally acceptable to straight society. Kevin, 20, from New York, was not unusual with his comment,

"Yeah, I'd like to be employed and married and not messing with heroin." Later in the interview he expressed, as did many others, a deep desire to have children. Those who had children or expressed a desire to become parents demonstrated a deep concern for their welfare. When asked about the future, many of these heroin users stated that they would discourage their children from using heroin. Zulu, 33, from Chicago, said he would handle heroin with his children like this:

I would tell them from my own experience. I would show them the tracks on my arm. I would try to show them, not only tell them, but I would take them around certain people that maybe at one time was on the top of their game and say "Look at them now." I would take them around to areas of the city and show them this is what it will lead to if you let it get out of hand. This is what you want? Hey, it's not worth it.

Thus, the HLS men appear to have a simultaneous longing for and aversion to the life of straight society. Involving themselves more deeply in street society and heroin use holds advantages as well as disadvantages. The same is true for total abstinence from heroin and the pursuit of a straight life. Hence, from their point of view, it is best to stay in between, not seeing themselves as deprived addicts or as straights.

However, the HLS men have various and important behavioral, as well as ideological, contacts with straight society. In this sense, most can be described as marginal not only to straight society, but also to the heroin lifestyle itself. They describe themselves as being in control of their use. They "keep clean," dressing neatly whenever possible and hoping to present themselves as different from the down-and-out dope fiends on the street and to avoid the suspicions of local police. By more objective standards, these men do not fit the stereotype of a dedicated hardcore dope addict, one whose entire life centers around the acquisition and administration of heroin. These men do not always pride themselves on their illegitimate hustles, and the majority do not rely exclusively on illicit activities to supply themselves with heroin. While many do hustle, many also have a legitimate source of income which is essential to their continued use of heroin. While not without cravings for heroin, most of these men do not appear to be inescapably trapped in the cycle of frenzied drug seeking, as other heroin users have been described. Perhaps these men are distinguishable from the universe of all heroin addicts by their insistence (not necessarily reflected in their behavior) on doing something with their lives to maintain control. Ironically, they share an image of the heroin addict with members of straight society, and they strive not to become like those individuals who were described by one heroin user as:

•• . downright nasty people. Most of them are [that way] because of the way they look and their appearance and their hygiene and, you know. And you know, it's really disgusting . . . (Zulu)

In summary, the HLS men's involvement with heroin is not a simple choice of whether or not to use a drug. It is a choice between lifestyles, that of the street or that of the straight world. Both worlds seem to offer attractive rewards, as well as threats and complications. The statements of the HLS men indicate that the rewards and complications are about equal in both worlds. Hence, these men seem partially committed to and partially repelled by their involvement in each of the two worlds. They have developed a set of beliefs among themselves which say that, if they carefully control their use, their daily habits and their involvement with people in the street, they can walk a narrow line between the two worlds, enjoying some of the best of both.

These men provide each other with the ideas about the meaning of controlling one's life. These ideas invariably involve two goals:

being able to flirt with the dangers and experience the thrill and adventure of heroin use and/or life in the street;

being able to keep things tight and manageable, so that one has a sense of progress towards normative goals, such as home, family, education, and employment.

Heroin users struggle constantly (to varying degrees) to achieve these two goals. The interviews suggest that, at least for brief yet discernible periods in their lives, these men have been able to achieve both goals. However, they are aware that heroin use makes the struggle to hold one's life together difficult and that not all users will win that struggle. Heroin is also seen as a means of enjoying oneself. "If one can hold his life together," they might say, "he has earned a little pleasure." As a result, these men seek a social position which is marginal to the lifestyle of the righteous dope fiend or the down-and-out abuser, as well as to the nonuser straight world. This means they cannot lose control of their use. They would say to members of straight society that as long as they do not behave like the lowly dope fiend, heroin is neither the cause nor the cure of their suffering.

Implications for Treatment

This qualitative analysis of a sample of untreated Black inner city heroin users raises important questions about the prevalence of the types of heroin users the HLS men typify and about how users might best be treated or helped in avoiding the destructive effects of heroin. As they portray themselves, they are able to take control of their lives to the extent that they do not fall helplessly into an endless cycle of getting high and doing nothing but satisfying their drug cravings. These are the hazards which are said to accompany the careers of many heroin users. The HLS men are keeping clean, holding their worlds together. Perhaps they are able to do so because of the social position they have created for themselves at the margins of the street and the straight world.

To the extent that these men do keep their lives under control and avoid treatment, their characters and/or environments may differ from those of other inner-city Black male heroin users. They may simply have more acquired skills in resisting abuse of heroin and in regulating its use. A significant number have social involvements outside the network of street heroin addicts. A majority have some form of social contact among straights, whether it be a family member, a close friend, or the acquaintances and drug-free activities at their jobs. The heroin on the street is regularly diluted, so that daily needs must be kept within modest limits. Other drugs are available which help to stave off withdrawal. Street doctors and the lore of the street provide advice to the user so that he may avoid such hazards as overdose and malnutrition. Perhaps this research project has uncovered a subset of Black heroin users who, with their discipline and strong self-image, their balance of attitudinal involvement and social support from both the straight and the street worlds, and with the array and quality of drugs available, are able to keep their use under control and avoid treatment.

Whatever the case, it is clear that most HLS men possess the belief that they can indulge in heroin use without losing control over their lives. This belief has important implications for treatment of such men, the vast majority of whom chose to avoid institutional treatment. They, and perhaps a great many others like them, feel strongly that they can function well in straight society and are only frustrated that they do not have the opportunity to prove themselves in conventional jobs with opportunities for self-advancement. Heroin is a reward for achievement to many of these men, whether those accomplishments are realized in the street or in the straight world.

Hence, any approach at treating these men must be based on a recognition of the pride they hold in themselves and their real, albeit inconsistent and unconventional, ability to take control of their lives. If the goal of treatment is to get the user off heroin and out of the street altogether, this treatment strategy must include ways of transferring that sense of control from the street and the heroin lifestyle to the straight world by providing realistic and legitimate incentives for

achievement and greater opportunities for social support outside of the heroin lifestyle.

Any policy, research, or treatment concerning the type of Black male heroin users identified in this study, then, must recognize the full range of incentives for participation in the heroin lifestyle. It offers more than drug intoxication. It also offers the thrill of street life and a real, if inconsistent, sense of self control. Participation in the heroin lifestyle does not necessarily mean dropping out of the straight world for a life of frenzied drug seeking on the street. According to the testimonies of HLS men, they can "use and then cruise."

If they are disciplined and intelligent, they can enter the heroin lifestyle to enjoy themselves and then depart to take care of the equally important business of dealing with family and/or employment problems, or as Zulu put it, "pursuing the American Dream."

The HLS men tell us however, that not all are successful at walking the line between the street and straight worlds. Yet, it is the fact that they try to walk this line that is significant. They, like those who study them, aspire to a better life. They, like those who treat them, are diligent in their effort to avoid self-destruction. They, like those who design policy which affects them, are seeking to survive and achieve in an environment of drastically inadequate resources. So these Black male heroin users, as do straights, seek control, like Michael from Washington, D.C., who said:

When I lose control, my little world is gone, you know what I mean? So I'm gonna keep it tight on this end.

Note

1. Initially, all 124 interviews were read and briefly summarized. Forty of these interviews were then selected for analysis. This group represented the diversity of the HLS sample in age, geographical location, history and frequency of heroin use, and degree of contact with other heroin users. Content analysis of this group permitted identification of common themes and patterns which emerged from the views expressed by different types of Black heroin users.

References

- Agar, Michael. 1973. *Ripping and Running: A Formal Ethnography of Urban Heroin Addicts*. New York: Seminar Press.
- Chein, I. 1966. Psychological, social, and epidemiological factors in drug addiction. In *Rehabilitating the Narcotic Addict*, 53-72. Fort Worth: Institute on New Developments in the Rehabilitation of the Narcotic Addict.
- Coombs, Orcle. 1974. Fear and trembling in black streets, *New York Times Magazine*, March 20.
- Feldman, H. 1968. Ideological supports to becoming and remaining a heroin addict. *Journal of Health and Social Behavior* 9(2):131-139.
- Glover, E. 1956. On the Early Development of Mind: Selected Papers on Psychoanalysis, Vol. I, 130-160. New York: International Universities Press.
- Hughes, Patrick, and Jaffe, J. 1971. The heroin copping area. *Archives of General Psychiatry* 24:394-400.
- Merton, R.K. *Social Theory and Social Structure*. New York: The Free Press, 1957.
- Mills, J. 1965. Drug addiction. *Life*. February 26, 66-92.
- Morgan, Thomas. 1980. Struggling to quit heroin. *Washington Post*. February 27.
- Paschke, W.R. 1970. The addiction cycle: A learning theory—peer group model, *Corrective Psychiatry and Journal of Social Therapy* 16:74-81.
- Pittel, Stephen M. 1971. Psychological aspects of heroin and other drug dependence. *Journal of Psychedelic Drugs* 4:40-45.
- Sackman, Bertram S. 1976. *Angela's band: An ethnography of disciplined heroin users*. Unpublished manuscript.
- Snyder, A.J. 1970. Junkie personality. *Science Digest* 68:62.
- Stanton, Duncan. 1977. The addict as savior: Heroin, death, and the family. *Family Process* 16:191-197.
- Stephens, Richard L., and McBride, Duane L. 1976. Becoming a street addict. *Human Organization* 35(1):85-93.