

Situating the Syringe

Social Science of the Syringe (Vitellone, 2017) has been an outcome of a series of innovations and developments in the field of addiction theory and research and the social sciences more broadly. It is based on an experiment of connecting the syringe and sociology. More specifically, the book attempts to historicise the policy of harm reduction by situating the syringe as an object of knowledge production. Taking as its starting point the controversies surrounding the program of needle exchange the chapters, developed from a series of methodological and theoretical interventions, set out to examine what we know about injecting drug users and evaluate the competing epistemological and scientific claims about how to research and analyse injecting drug use. These interventions were informed by three troubling questions:

‘What’s wrong with addiction?’ (Keane, 2002)

What are the consequences of drug policies? (Stengers, 1997)

‘What is the empirical?’ (Adkins and Lury, 2009)

In comparing and contrasting different theoretical and empirical approaches my primary aim was not to settle longstanding disputes on how to best conduct harm reduction research and address the public health problem of needle sharing but illustrate the ways the syringe confronts the political, methodological and epistemological issues at play in social science and public policy.

Taking research on needle exchange as a starting point *Social Science of the Syringe* examined competing knowledge claims on injecting drug use and proposed a different kind of approach. Disentangling the syringe from specific epistemological questions and methodological approaches became the basis for creating an alternative method of inquiry that was open to question of the syringe. This intervention was necessary since existing research paradigms were unable to grasp the problems and practices invented by the object. Drawing from a range of social scientific studies including field notes taken from ethnographies of injecting drug use, empirical data from qualitative

studies and my own research findings on the biographies of the syringe, I attempted to situate the syringe in the world of injecting drug users. My engagement with the syringe was made possible through a relationship with drug users as collaborators and colleagues. Turning to drug users as experts I set out to evaluate competing knowledge claims produced by established methods and tools of scientific inquiry. Focusing on the problem of needle and syringe sharing and the difficulties of evidencing this practice my aim was to produce social scientific knowledge with drug users in order to address the causes and consequences of injecting drugs.

Social science with the syringe

Addressing the policy, practice and evaluation of harm reduction as involving a paradigm shift in situating the syringe in the world of the drug user, and social scientists as the experts in examining this relationship, I envisaged research on drug injecting differently. Examining why scientific studies on needle exchange had not sufficiently engaged the risk practice of sharing, and the difficulties associated with both qualitative and quantitative methods in producing knowledge of syringe sharing, I pointed out that the problem was not the absence of objective data but that social scientists had not sufficiently expanded their empirical perspectives to include the object of the syringe in their research and analyses of injecting. This was the case since their methods of inquiry had rejected the syringe as data. My goal was to challenge this refusal by engaging with data on the syringe in its own terms. In becoming attentive to scientific research on drug injecting and needle sharing, my aim was to produce knowledge of the object of the syringe as it is experienced by the drug user. Paying attention to drug users experience of the syringe was necessary because of the ontological tension in research on harm reduction regarding the individualism of the injecting drug user, the recognition of an other in the technical problem of sharing, the object that is shared, and the role of the scientist in interpreting and evaluating this interface.

Taking up Isabelle Stengers' (1997) pragmatic approach to social and scientific questions about drug addiction my objective was to review,

renew and revitalise evidenced based evaluations of needle exchange. Methodologically this involved detaching the technical problem of needle and syringe sharing from the expertise of the epidemiologist, anthropologist and sociologist and handing over control of the description of injecting to the drug user. Epistemologically this involved avoiding repeating the ways academic experts have posed and determined the problem of sharing and try 'to actually pose the problem clearly' (Stengers, 1997, p. 216). By recognising injecting drug users as experts in the field of harm reduction, rather than judging them as 'irrational, illegitimate, immoral...potential offenders', Stengers (1997, p. 218) argues we refuse to designate drug addicts as "others" (1997, p. 215) and address them as legitimate spokespersons and citizens in the discussion of the problem (1997, p. 216). Producing expertise through the injecting drug users participation in the research process, rather than their submission to the research tools and techniques of experts Stengers (1997, p. 217) points out is an important political and ethical choice. The democratic ethic lies not with the production of evidenced based research which evaluates the provision of harm reduction programs as a technical or moral solution to drug use in society, but the way the positioning of the problems of injecting drugs such as needle sharing and the proposed solutions such as needle exchange 'situate and involve those to whom they are addressed' (Stengers, 1997, p. 221), that is, 'anticipates-suggests what they are and what they are capable of' (Stengers, 1997, p. 222). Methods that define drug users as stupid or infantile individuals, argues Stengers (1997, p. 222), should be excluded.

Building rapports with injecting drug users

In order for researchers to produce situated knowledge, that anticipates, situates and involves those who are addressed, Stengers calls for the production of 'rapports' (2011, p. 62). Concurring with Donna Haraway, Stengers describes the creation of a rapport as always 'a local, precarious event' (2011, p. 62). Without the creation of a rapport, Stengers argues, there is no knowledge (2011, p. 62). What interests Stengers are the questions raised by the rapport. These questions, she insists, 'are not epistemological, but rather political,

pragmatic, and never innocent ones' (2011, p. 62). A dissatisfaction with scientific research on injecting drug use that did not facilitate an engagement with drug users situated experience, became key to building a rapport with drug users who used needle exchange. Experimenting with questions on the biographies of the syringe (Vitellone, 2017, p. 82), my hope was to create a rapport with drug users that humanised injecting drug use and opened up the objects and spaces of injecting as empirical areas of interest. Asking the users of needle exchange to describe the social life of the syringe through practices of collection, exchange and disposal transformed the ways the recipients of drug policy and subjects and objects of drugs research were addressed (Vitellone, 2017, see chapters 5 and 6). Paying attention to the material practices of injecting designated the syringe not as a fixed object of epidemiological, ethnographic or evidenced based research but a mutual object of interest. Declaring my interest in drug users engagements with the syringe overcame the problem of how to situate myself amongst drug users and engage them in ways that were relevant to their everyday practices.

Learning with Stengers pragmatic methodological approach, Rosengarten, Savransky and Wilkie (2017) propose that the social scientist place themselves in the role of a diplomat, a figure described by Stengers as engaged in "a politics of ontology: a world where many worlds fit" (2017, p. 68). What's crucial for the researcher they argue is that with exposure to other worlds, the social scientist 'avoids judgements by one world of another' (2017, p. 68). The advantage of this role they suggest is it 'involves the possibility of giving presence to those otherwise subject to an authoritative neglect' (2017, p. 69) and 'is an invitation to the expression of a problem and partake in its experience' (2017, p. 67). By situating drug users knowledge of the syringe rather than positioning them as objects of knowledge production, I was able to resist epistemological questions and methodological techniques that frame the risk practice of sharing as a problem originating from the action of irrational, immoral, individual subjects. In situating the syringe and giving presence to injecting drug users experience, the empirical problem of describing the practice of sharing was re-imagined. Addressing the political and policy question

do needle exchange programs work from the standpoint of the syringe created connections to learn from drug users about the problem of sharing and partake in its experience. Paying attention to the situation and practices of injecting drug use, scientific knowledge of harm reduction was produced in the world of the drug user. Engaging in a politics of ontology, the drug user was in control of knowledge production and the evaluation of needle exchange.

Reclaiming harm reduction research

The challenge of learning from others, using Stengers politics of ontology, is to create an encountering where the researcher and drug users 'regard each other as equals' and encountered others are 'empowered to evaluate the relevance of your interest, to agree or refuse to answer, and even to spit in your human, too human face' (2011, p. 63). The power of the encounter argues Stengers lies in its capacity not to foster a politics of tolerance towards the other but 'giving to the world the power to change us, to "force" our thinking' (2008, p. 57) and give the situation power to think. For Stengers, situating knowledge requires reclaiming scientific research and giving 'the situations we confront the power to have us thinking, feeling, imagining and not theorizing about them' (2008, p. 57). Knowledge produced through this process of reclaiming she argues 'always begins with an empirical starting point, with a situation we have to claim' (2008, p. 57). The political and ethical challenge for social scientists is to learn from others in the production of rapports, 'not "as they are" but as they become able to produce relevant ways of resisting what defines them' (2011, p. 62). Producing knowledge through this method of comparativism for Stengers (2011, p. 62) requires a demanding rapport with equals who are able to evaluate your interest and agree, as well as disagree and object.

In contrast to the methods of the survey and participant observation which privilege the research tools and gaze of the scientist, exclude the syringe from the action of injecting, and ascribe the risk practice of sharing to individual human subjects, *Social Science of the Syringe* developed a comparative methodological approach whereby the injecting drug user was engaged in the evaluation of the policies,

practices and science of harm reduction. Reclaiming empirical research on the syringe and data on the practice of sharing which had been ignored and dismissed by social scientists as unreliable, ambiguous and unscientific, de-privileged ways of seeing and thinking from the researchers standpoint. Re-embedding data on the syringe into situations of injecting engaged drug users in a comparative evaluation of needle exchange.

Responding to the claims that the governance of harm reduction policy fails to situate drug users in control of knowledge production (Campbell and Shaw, 2008), I attempted to demonstrate, via a series of pragmatic experimentations, how it was possible to produce social scientific knowledge of injecting drug use. Paying attention to the encountering between drug users, social scientists *and* the syringe in injecting ethnographies (Bourgois, 1998; Bourgois and Schonberg, 2009; Campbell and Shaw 2008; Garcia, 2010; Maher, 2002; Zignoni, 2007) I showed that an engagement with drug users and the objects of injecting drug use produce connections that force us, social scientists to re-think and transform the way we research the politics (Chapter 1), methods (Chapter 2), theory (Chapter 3), policy (Chapter 4), context (Chapter 5) and practices (Chapter 6) of harm reduction.

In chapter 4, returning to the well rehearsed question in scientific research on injecting drug use ‘have you shared needles and syringes?’ I reclaimed the empirical data produced by social scientists and epidemiologists considered not fit for purpose. Recognising drug users as experts, I pointed out that whilst the line of questioning ‘do you share?’ engaged both the drug user and the syringe in the technical problem of sharing, epistemological and methodological concerns with individual human behaviour and human social practice blocked scientific engagements with participants responses in the experiment and shut down questions about the experience of sharing in ways that matter to drug users. Reimagining scientific data from Campbell and Shaw’s (2008) research ‘I never shared with nobody’ (Campbell and Shaw, 2008, p. 706 cited in Vitellone, 2017, p. 69) as situated knowledge, I conferred power on the situation to matter in its own particular way. Situating knowledge of sharing so as to learn from drug users involved re-embedding the syringe in their world and

appreciating its force to make us think, feel and imagine the situation ‘ain’t going to pass nothing on to nobody’ in their terms (Campbell and Shaw, 2008, p. 701, cited in Vitellone, 2017, p. 75). Being forced to think by this world produced situated knowledge of the causes of sharing as concerning the syringe itself (Vitellone, 2017, p. 69).

In chapter 5, reclaiming fieldnotes from Philippe Bourgois’ ethnographic description of an exchange with his research informant Doc; ‘I started shooting heroin at 14, now I’m 64’, as an empowering encounter that challenges and questions the knowledge claims of social scientists (Vitellone, 2017, p. 78), I showed why it was necessary to prevent epistemological accounts of drug use from taking hold of the syringe. Replacing theoretical questions with drug users experience produced an alternative research practice, which directed our focus away from the reflections and interpretations of the participant observer and critical social theorist, to drug users description of shooting up and the spaces of injecting as data for learning, feeling and thinking with (Vitellone, 2017, p. 92). Reclaiming social scientific research in order to learn from drug users highlights the uses of Stengers (2018) method of slow science for reworking and transforming research on harm reduction.

In chapter 6, situating the syringe in intimate practices of sharing brought up new perspectives from experience including relations with others. This involved drug users describing practices of marking, scratching and counting syringes as a method of measuring and enacting safety and care for themselves and others (Vitellone, 2017, p.111). Producing scientific data on sharing as evidence not of the absence of harm reduction but a situated mode of sociality, transformed ways of knowing and understanding the unspeakable problem of sharing from a defective human practice or technical biomedical term to a relational moment of exchange connected to the making of persons and relationships (Vitellone, 2017, p.113). Engaging a politics of ontology, to learn from injecting drug users, and think with the syringe, the sociological problem of needle sharing was re-imagined. The problem of sharing was not caused by, but animated the social.

The syringe as a tool for thinking

Focusing on drug users knowledge, we were confronted with the relevance of the object of the syringe for social scientific research. Experimenting with the syringe as a tool for thinking with made it possible to re-assess how drug policy, drugs research and drug users have been constructed, analysed and evaluated by academic experts. Learning from the situation of injecting, I showed how drug users objected to, undermined and challenged the assumptions, biases, blind spots and beliefs of competing methodological and epistemological approaches. Turning research participants into experts produced encounters where drug users characterised the policy of harm reduction, practice of injecting and problem of sharing not in the terms of the social scientist but in their own terms. By reclaiming what was unspeakable and could not be seen, heard or known in relation to social research and social theories of injecting, the syringe became a device against knowing drug use through observation, interpretation and critique. Avoiding knowing injecting drug use and the practice of sharing epistemologically required risking what we social scientists already know, resisting casting drug users in terms of deviants, risk takers or sufferers, avoiding speaking about, feeling and interpreting their world as spokespersons entitled by theory and engaging in connections which characterise the drug users situation in their own terms (Stengers, 2008, p. 53).

By taking the syringe seriously I showed that it was possible for social scientists, through the creation of rapports, to transform the practice of knowledge production from one of representing and interpreting the world of drug users, to learning from the objects of drug use, particularly as they resist theoretical definitions of what defines them. This intervention lied not with allowing the ‘other’ to speak and giving a voice to the drug user, but listening to what they say and don’t say about the policy and practice of harm reduction. What was at stake in inserting the syringe into the researchers tool kit was not a politics of tolerance towards the subjects and objects of injecting but a ‘politics of knowledge’ that does not presume the ‘theorist knows better’ and can ‘pick and chose’. An encounter which ‘puts her in a position to learn, and not to recognize’ (Stengers, 2008,

p. 54). Resisting framing research questions from the standpoint of the researcher as expert transformed knowledge production from a theoretical perspective to a politics of ontology. The injecting drug user was not separated from knowledge of harm reduction but central to it.

Another science of drugs research

If social scientists, drugs researchers, policy makers and analysts are to take seriously the provocations and propositions of *Social Science of the Syringe* how might we continue to engage in a politics of public research on drug use? The recent focus on researching, analysing and critiquing the multiple ways drug policy and drugs research construct, constitute, define and represent drug problems and the problem of drugs marks a significant shift towards addressing the controversies surrounding illicit drug use and the illicit drug user (Bacchi, 2009, 2017; Bacchi and Goodwin, 2016; Fraser 2017; Fraser and Moore, 2011; Lancaster and Ritter, 2014; Lancaster, Duke, Ritter, 2014; Lancaster, Ritter, Colbatch, 2014). Whilst academics play an important role in the process of examining problem making and the ways drug problems are constituted, Ritter (2015) reminds us that problem construction ‘is not limited to researchers’ (2015, p. 188) and includes the voices and opinions of ordinary citizens who consume drugs. What we need to ask ourselves Ritter argues is ‘how we value knowledge other than traditional “scientific” knowledge, and how the voices of ordinary citizens can be meaningfully incorporated into policy process’ (2015, p. 185).

What I hope *Social Science of the Syringe* has highlighted are the empirical challenges, methodological strategies and epistemological stakes of engaging injecting drug users directly affected by drug policies as significant stakeholders in the expression of problems. By reclaiming and reimagining social scientific research on injecting drug use my goal has been to incorporate the drug user and the syringe into debates on harm reduction as an alternative source of knowledge and show how situating the problem of syringe sharing transforms knowledge production and evidenced based evaluations of needle exchange. Engaging the politics of ontology as a social science

of building a better comprehension of what we don't know about drug users practices highlights the opportunities for change when objects become a tool for thinking.

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