

Hidden heroin users

Professor David Clark describes an important research study conducted by Roy Egginton and Professor Howard Parker at the end of the 1990s that illustrated the life experiences of a group of young heroin users, and offered a practice and policy framework for intervening in their drug journeys to social exclusion.

The 1990s saw a large increase in the 'recreational' use of drugs such as cannabis, amphetamine and ecstasy among young people. While the vast majority rejected use of heroin because of its addictive properties and association with 'junkies', the number of young people starting to use the drug increased significantly in the latter part of the 1990s.

A study by Roy Egginton and Howard Parker provided important insights into the life experiences of a group of young heroin users they termed 'hidden heroin users'. The researchers pointed out that local officials often ignored local problems with heroin, due to the stigma associated with the drug. Failing to address heroin use among young people leads to difficulties at a later time when they present for treatment with a more serious problem.

The study involved interviews with 86 young heroin users (aged 15 to 20 years) from four different areas in England.

While the participants' childhoods were far from ideal, only a minority could be described as developmentally damaging. However, from age 13 years, the interviewees were routinely out and about with peers, unsupervised and doing things to which most parents would object. The parents did not know where they were.

They were early smokers and drinkers and entered a phase of 'florid drugs experimentation'. On average, they started to take heroin aged 15 years.

The educational performance of most of the interviewees deteriorated during secondary school. They truanted regularly and many became disruptive at school, and were repeatedly temporarily or permanently excluded.

A few obtained some educational qualifications but most were still under-qualified at the time of the interview. Few had been successfully employed. Most were receiving state benefits.

The first time a person tried heroin was usually with drug using peers and

involved smoking (91 per cent). Over half described the experience as 'good'. Retrying followed rapidly (60 per cent within a week) and most moved to weekly and then daily use.

Experimental injecting was widespread and 46 per cent were injectors. A poly-drug repertoire became common with more regular heroin use, involving cannabis (80 per cent tried in last month), tranquillisers (45 per cent), methadone (45 per cent) and crack cocaine (33 per cent). Although interviewees had been early drinkers, current regular alcohol use



was not high. Over 50 per cent had not drunk in the past week.

Members of the sample gradually became stigmatised as smackheads. They were dislocated from parts of their family, 'straighter' friends and conventional activities. They gravitated into poly-drug using networks and cohabitations which provided support.

Seventy-three per cent of interviewees said that their health had been affected by their drug/heroin use. Most showed clear signs of physical and psychological dependency on heroin and other drugs. This dependency and associated anxiety increased with the

length of use and the switch to injecting.

Average drug bills were over £160 per week. Most interviewees utilised benefits and acquisitive crime (especially shoplifting) to pay for their drugs.

Drug dealing, and to a lesser extent, begging and prostitution were also being used. Most had been convicted, but not imprisoned.

Approximately 50 per cent had delinquent careers prior to heroin use, but their drug habit amplified their offending. For most others, heroin use led to offending.

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The sample were initially very naïve and ill-informed about heroin. They did not understand its subtle potency and addictiveness, and had little idea where a heroin career might take them. They claimed to regret having ever taken heroin.

The drug knowledge of this sample was obtained by their own experiences and those in the local heroin networks, far more than from public health or drugs educational sources. They were basically too insecure and immature to visualise the benefits of 'presenting' to a treatment agency and simultaneously distrusted adult authority.

The researchers emphasised the need for early interventions to be developed, including provision of accurate targeted information: how dependency develops and its consequences; how to avoid and respond to accidents and overdosing; the dangers of injecting a sharing equipment; the additional 'price' of tackling crack cocaine; and the knowledge and skills required to detox/come off heroin.

They emphasised the need to specifically target heroin using networks (where there is trust) with information in order to maximise the potential for reduced harm. Parents who knew about their child's heroin use were viewed as potential sources of influence if relationships were still intact or repairable.

Many of the interviewees had difficulties at school (truanting, exclusion) and may not have therefore benefited from drugs education in this environment.

The researchers pointed out that as young people's drug services develop they must pay full attention to understanding and monitoring their local drugs situation, reaching out to hidden adolescents developing problematic drug use, and providing user-friendly, flexible services.

The professionals (eg police, teachers, youth and community workers) who come into contact with young heroin users, must increase their knowledge about drug issues and experience of how to intervene and advocate help.

Egginton and Parker argued that a deterioration in the 'heavy-end' drugs scene was underway. While problem drug use remained correlated with socio-economic deprivation and difficult family life, there were signs that new waves of young users would also contain young people from more conventional, adequate family backgrounds.

They also pointed out that, 'in the current absence of effective routine monitoring systems, more immediate efforts should be made to better define what is happening in heavy-end drugs scenes across the UK'.

Hidden Heroin Users: Young people's unchallenged journeys to problematic drug use by Roy Egginton and Howard Parker (2000)
<http://les1.man.ac.uk/SPARC/hiddenheroin.htm>