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Group solidarity in a hostile milieu: Immigrant experiences in a street-based drug scene

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Group Solidarity in a Hostile Milieu: Immigrant Experiences in a Street-Based Drug Scene

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Aims: Street-based drug scenes are typically portrayed as lacking in solidarity. Studies frequently cast camaraderie as solely instrumental, highly conditional, and temporary. The aim of this paper is to explore social dynamics and group solidarity in a seemingly hostile drug scene, and demonstrate the importance of this milieu for a group of immigrant men.

Methods: Data was drawn from ethnographic fieldwork in the street-based drug scene in the downtown parts of Oslo, Norway. The fieldwork included participant observation, informal conversations, and 17 interviews with street-based drug users.

Findings: Drug transactions, viewed as interaction rituals, may help create group solidarity among the members of the scene. Group solidarity is displayed in social bonds that drew former members back to the scene and in the inclusion of isolated, immigrant men.

Conclusions: The street-based drug scene in Oslo, with its repeated interaction rituals and bonds of group membership, provides a community for people who experience low degrees of solidarity elsewhere, as demonstrated in the case of immigrants. This paper encourages a continued and improved emphasis on contexts for drug use as socially enabling environments.

Keywords: Drug scenes, drug dealing, rituals, immigration, solidarity

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INTRODUCTION

This paper explores group solidarity in an environment commonly deemed hostile.

Specifically, it is concerned with the question of social cohesion in the street-based drug scene in Oslo, Norway, and how this arena may be socially enabling for immigrants in particular.

Sociological and anthropological studies have offered a variety of clues into what holds street-based drug scenes together. Preble & Casey (1969) regard the social cohesion among heroin users in the early post-war era in New York as a result of inexpensive and potent heroin.

Habits were easily maintained, which essentially led to harmonic social relationships among the drug users. During the 1960s, the inverse was true. Rising heroin costs forced drug users into a state of war of every man against every man: "The competition and struggle necessary

to support a habit has turned each one into an independent operator who looks out only for himself" (Preble & Casey, 1969, pp. 7-8). Several studies highlight similar features that

contribute to the dissolution of relationships within drug milieus. Lalander's (2003) account of a heroin-using culture in Sweden depicts how the increasing use of heroin called "social

bonds created in the culture into question" (Lalander, 2003, p. 58). The limited supply and rising demand of heroin converged to create self-centeredness amongst the drug using group.

In a similar way, Svensson (2000, p. 150) attributes the lack of "inward solidarity" in a group of drug users to the fact that social relationships were entrenched in an economy of "every man for himself". The group solidarities (or the lack thereof) in these studies seem, in other words, highly conditional on the access to drugs.

Bourgois and Schonberg's (2009) ethnography of homeless heroin injectors depicts several close relationships, but also a great deal of personal and ethnic divisions. Shared addiction and withdrawal symptoms transgressed these demarcations. Mutual fear of dope sickness contributed to a "moral economy" (Bourgois & Schonberg, 2009, p. 82) of sharing drugs and favours. Hoffer's (2006) study of a heroin dealing network demonstrates a similar economy. Relationships within the informal, yet tight-knit milieu were based on necessity, rather than trust or affinity. The homeless heroin users developed reciprocal contracts of support in order to maintain their heroin habits.

Albeit a key element in holding the street-based groups together, the moral economy of sharing in order to secure prospective aid for oneself can be characterized as solely instrumental. Social relationships, which are based on mutual survival strategies in the individual drug scene members, make for a form of "forced" togetherness on the street. While the fear of lacking drugs may serve as social glue, it may also act as a social dissolvent. Parkin (2013, p. 123) describes how drug injectors avoided other members in the drug scene in order to keep from losing drugs and/or money "by either volitional, reciprocal, forced or predatory means", illustrating that drug scenes can be fertile grounds for violence, antagonism, exploitation, mistrust, anxiety, and solitude (see also Agar, 1973; Briggs, 2012; Moore, 2004a; Rhodes et al., 2007).

Contrary to notions of community, drug scene members tell stories of unwanted belonging, portraying participation as "the antithesis of community" (Fast et al., 2013, p. 106). In this respect, togetherness on the street is produced by situational exigencies and a lack of alternative support mechanisms (Friedman et al., 1998a). Rhodes et al. (2007) show how drug injection on the street is a result of constraints (e.g. homelessness) and urgent needs (e.g.

withdrawal symptoms). Affiliation with street-based drug scenes and the risks attached are intertwined with social exclusion from spheres in mainstream society, such as family, education, work, and private housing (DeBeck et al., 2012; Lalander, 2008; Rhodes, 2002; Sandberg & Pedersen, 2009; Williams, 1989).

Shared experiences of social and economic marginalization enhance togetherness on the street, but such decisive push factors do not necessarily rule out pull factors (Fast et al., 2009). Street-based drug scenes endure for many reasons, lack of social alternatives in conjunction with addiction being the most acknowledged reason. While many studies stress push factors and characterize social relationships as instrumental and superficial, it is clear that drug scenes provide their members with a wide range of opportunities. Importantly, drugs can be sold and obtained in a fairly straightforward fashion. It is a place for business relations, friendships, and belonging, making the process of initiation and remaining in a drug scene about more than marginalization and drug abuse (Fitzgerald, 2009; Foster & Spencer, 2013). This can for example be conceptualized with subcultural theory. Gelder (2005, p. 6) stresses the investigation of "social-ness" at the outskirts of mainstream society as a defining characteristic of subcultural studies. Seminal studies of street-based populations illustrate how seemingly disorderly and destructive environments are indeed orderly (Whyte, 1981) and social (Liebow, 1967).

INTERACTION RITUALS AND GROUP SOLIDARITY

In order to explore the social dynamics in the street-based drug scene in Oslo, Randall Collins' (2004) analytical apparatus on interaction rituals and variations in group solidarity is employed. The aim is to identify "the micro-production of solidarities" (Collins, 2004, p. 17) through investigation of everyday interaction rituals at the scene. The argument is that the

drug scene is held together by the same basic elements that hold the rest of society together. Collins (2004, p. 48) outlines four main ingredients in an interaction ritual: (i) physical group assembly, (ii) barrier to outsiders, (iii) mutual focus of attention, and (iiii) shared mood. The interplay between these situational ingredients produces variations in group solidarity.

In keeping with the interaction ritual analysis model, the most important social situations in the drug scene – drug transactions – make up the analytical starting point. The first part of the analysis seeks to identify ritual ingredients' in drug transactions, while the succeeding part explores displays of group membership and inclusion of immigrant men in the drug scene.

According to Collins (2004, p. 41), any given country's population "consists of pockets of solidarity of different degrees of intensity". Viewed as such pockets, street-based drug scenes appear to be arenas of highly conditional solidarity. Members share a mutual need for drugs, and in this lies a potential for friendship, care, and support, but even more recognized enmity, selfishness, and betrayal. In response to this, the analysis sets out to explore the social cohesion that exists in a seemingly hostile milieu, highlighting the importance that this may have for a particular group of participants. Immigrants who use illicit drugs may be at risk of experiencing double exclusion from mainstream society. In such cases, any kind of attachment may be of great importance. While this paper discusses topics relevant for all members of the street-based drug scene, stories of immigrant men may testify to the inclusive sides of the Oslo scene in a particular manner.

METHODS

The street-based drug scene in Oslo has for many years been synonymous with the open drug scene known as "Plata", located next to the downtown central station. Due to its reputation as

a place for heroin injecting by worn-down regulars, outsiders consider Plata to be an unattractive, stigmatized social space (Sandberg & Pedersen, 2008). Increased police control has been employed to reduce drug-related public nuisance, only to see the drug scene relocate (Naftstad, 2011; Sandberg & Pedersen, 2008; see also Aitken et al., 2002). At the onset of the study, the scene appeared fragmented with participants located in proximity to different services – shelters, low-threshold health services, and soup kitchens – throughout the city centre. The drug scene was not purely street-based as it consisted of both public environments (e.g. street corners) and closed environments (e.g. shelters) (Parkin, 2013).

Prior to the study I spent three years working part time in a charitable organization in Oslo. This job consisted largely of outreach work at night in the street-based drug scene. Consequently, the study was a continuation of a three-year long period of familiarization with the scene – its places, participants, and situations. This familiarity made the process of gaining access and building rapport with members less challenging. Participants of the scene introduced me to other members, while social workers facilitated access to shelters and low-threshold health services through their capacity as gatekeepers (see Parkin, 2013). Furthermore, my former employer allowed me to take part in nightly outreach excursions. Albeit an advantage, the shift between social work and research raises important ethical questions. Whenever I met people who knew me from my former capacity as a social worker, I would present the research project as "my new job". All participants consented, and no covert observation was undertaken. Most of the participants in the study were, however, unknown to me up to the start of the study. Former colleagues and contacts in the drug scene would accompany me and/or recommend places to seek out, whilst the actual fieldwork and recruitment of interviewees were undertaken by me alone, thereby avoiding lasting role conflicts. The participants were secured anonymity, hence all names are pseudonyms.

The data in the study was collected through ethnographic field work at the street-based drug scene by the downtown central station, at four shelters for drug users, and at two low-threshold health services. Time spent among participants in the scene ranged from one to seven hours per day, stretching over a period of six months in 2011 and 2012. In total, about fifty visits were paid to the milieu. In addition to participant observation and informal field conversations, seventeen participants in the drug scene were interviewed. The interviews were semi-structured, tape-recorded, and they lasted between thirty minutes and two hours. I carried out all interviews and transcribed them verbatim. In some instances initiating an interview made field observations possible, but in most cases, the order was reversed.

PARTICIPANTS

Since the late 1960s, Norway has received increasing number of immigrants from all regions of the world. After introducing a ban on labour migration in 1974, the majority of immigrants from non-western countries have been refugees/asylum seekers and people reuniting with family members already in the country (Østby, 2013). Studies show that immigrants are overrepresented among those who neither participate in the labour market, in the educational system, nor receive health benefits, compared to both natives and descendants of immigrants (Horgen, 2014). Immigrants settle to a great extent in the Norwegian capital Oslo, where they amount to one fourth of the population. It is here we find the largest proportion of immigrants lacking formal attachments to Norwegian society. Studies also show that immigrants, especially from Africa, Asia, and South America, are at increased risk for prolonged poverty, compared to the remaining population (Bhuller & Brandsås, 2013). Descendants of immigrants, regularly referred to as people with immigrant backgrounds or ethnic minorities, participate to a greater extent in education and the labour market than their parents. This

suggests that immigrants experience particular challenges related to the process of entering the country from the outside.

The participants in this study were selected on the basis of two criteria: 1) immigrant status (born outside of Norway) and 2) affiliation with the street-based drug scene through the use of illicit opioids and/or stimulants. During the field work I encountered approximately 25 persons fitting this description. Additionally, former members of the drug scene and situations where the participants interacted with ethnic Norwegians were observed.

The majority of participants in the study originated from four different countries in Africa, with an overrepresentation of men from Somalia. All but one (Asia) referred explicitly to in this paper were men of African origin, ages 30-45. Most of them had fled from war zones or political oppression, and a few had emigrated from their countries of origin in search of new income opportunities. The majority arrived in Norway as youth/adults, and everyone had lived in Norway for more than ten years at the time of the ethnographic encounter.

All participants used heroin, amphetamines, cocaine, or a combination of the three. About half of them were injecting drug users. They were all embedded in the street-based economy, either as sellers or buyers; most of them were both. A majority of participants had used drugs for years, while a few were relatively new to the setting. Half of them had access to private housing, and the other half lived in shelters. A few had undergone treatment and had quit using at the time of the ethnographic encounter. However, most of these participants drifted back and forth from the scene.

FINDINGS

DRUG TRANSACTIONS AS INTERACTION RITUALS

While drug deals can be highly conflictual – situations of deceit and dissolution of relationships – they were also crucial in bringing individuals together in the street-based drug scene. These social situations may be portrayed as simple exchanges of drugs, money, and possessions, but may also be viewed as interaction rituals. The following examples describe such situations, emphasizing the interplay between ritual ingredients (Collins, 2004). The first excerpt describes an encounter with Hussein in his room at one of the largest shelters in Oslo:

Hussein's room was small and packed. There were clothes in piles all over the floor. He sat down on the bed, put on a video game and initiated conversation, but was quickly interrupted by the desire to "adjust". Hussein was clearly jittery and left the room to obtain drugs. I played the video game to pass time. There was a knock and a short man entered, wondering where Hussein was. I told him that I didn't know, but that he probably would return soon. He eventually did, this time together with a tall, talkative man. I understood from the conversation that they had known each other for a long time. The talkative man explained how he would check in on Hussein every day. The conversation was cheerful, centring on shared experiences in the milieu. However, Hussein had not gotten hold of the "adjustment" he needed and was getting irritated and dope sick. There were suddenly several people at the door. Hussein's acute need was about to be taken care of.

What struck me after spending some time with Hussein was how he was constantly surrounded by others. Pivotal to drug deals, Hussein was rarely alone. His constant need for drugs or money entrenched him in business relations. As such, it was difficult for us to engage in private conversations, either in his room or out in public:

After lunch we went over to the park by the shelter for a sit down in the dried up fountain. Hussein was heading down to the city centre, but decided to hang out for a few minutes first. We were approached by a young man who was wondering if Hussein or I had any amphetamines to spare. We both turned him down. A middle aged man approached us shortly after with the same request.

Hussein was sought out by people seeking drugs, mainly amphetamines. He also obtained drugs for his own consumption. He was a drug dealer/user at the centre of the scene, frequently involved in drug transactions. This could be considered stressful, but could also be viewed as a thoroughly sociable lifestyle. Drug scene members came together repeatedly to exchange drugs, money, and goods. Through his drug use, Hussein was intertwined with other people who assembled regularly in rooms at shelters or on the street.

Participants came together as economic actors in the local drug market, however, sociality does not equal group solidarity (Friedman et al., 1998a; Svensson, 2000). While bodily co-presence is seen as a ritual prerequisite, mere interaction does not generate socially successful interaction rituals. When asked about belonging to the drug scene ("Plata") by the central station, Ahmed first described the predominance of brief encounters:

Yeah, I've been there, but I haven't hung around very much. I've hung out there mostly at nights, from twelve onwards I used to be there, but not during the day, not in the afternoon. It was just like: no! But of course, there were a few times where I was desperate and didn't get hold of anything. I went there and bought it, but then it was like: buy, back into the bus, get away from there somehow. I'd rather not be seen. However, if you don't hang around Plata, you're a part of the drug scene anyways. I stayed at a shelter, where it escalated you know, more drug friends, and my room was like a pit stop for obtaining and buying [drugs].

There are obvious judicial boundaries to outsiders in drug transactions. There are, however, intrinsic barriers involved as well. In an open drug market, like the one by the central station, the insider/outsider demarcation is blurred. Technically, anyone could partake in the transactions. Ahmed described efficient transactions stripped of human contact, hardly resembling socially successful interaction. Conversely, Ahmed who was well integrated in the heroin economy through his role at the shelter, described interactions with people he knew. His room had become a centre for transactions among "drug friends", illustrating the fluid delineation between private and public – friendship and business, which was characteristic of the drug users' daily life. Drug transactions held in private spaces, like a room at a shelter, affirmed group boundaries. Interpersonal transactions both reflected and strengthened the boundaries that encapsulated an insider group of "drug friends".

Existing literature explains how interactions in street-based drug scenes are highly conditional on the access to drugs. This often results in power situations, where only the dominant party (the one with the upper hand in drug transactions) benefits from the interaction. Consequently, transactions in street-based drug scenes are characterized by opposing objectives (Fast et al., 2013; Lalander, 2003; Svensson, 2000). However, business partners in the Oslo scene often seemed to be on the same page.

The Oslo scene appeared to be a fairly perspicuous drug market. Sellers and buyers occupied the same social spaces, which probably reduced the social distance between them. The distance was further reduced by the fact that the majority of sellers were also users. The first time I met Rodrigo, he was enjoying a free meal at a cafeteria in connection to a shelter:

During the meal he was approached by a man in need. He asked Rodrigo for amphetamines, while confessing that he had no money. I regarded the question as begging. Rodrigo was sympathetic, but had nothing to offer. After the man had left he told me that he "knows how it feels".

Many of the dealers in the Oslo scene "know how it feels" to be on the other side of transactions. Rodrigo funded his own use by dealing small amounts of drugs and he knew very well how it was to be broke and necessitous. This mutual recognition between seller and buyer is key in understanding the 'partial market culture' (Aspers, 2011) that characterized trade-offs in the street-based drug scene. Whenever the participants were approached by potential buyers, they could identify with them – their cravings and addiction. As such, it was a market that allowed for altruistic values, distinctive of private, close-knit drug markets (Sandberg, 2012). Ikar offered a glimpse into the dealings between "buddies" at the scene:

Ikar: Sometimes, when I don't have money to spend, I go to Norwegians who I've known for maybe six months now, since I started smoking [heroin], those at the scene [Plata] you know. They give me [drugs] right away. And I say: I don't have any money today. Ok, here you go. Just pay whenever you want. They are nice people you know.

Interviewer: Okay, you connect well with the people there?

Ikar: Yeah, I have buddies there, Norwegian buddies. We drink together sometimes, and smoke this heroin shit.

Fronting drugs through the use of credit is an advantageous strategy among drug dealers, as it creates faster turnovers (Hoffer, 2006). In this case, however, Ikar received drugs for his own consumption, making the advantages for the providers less salient. The fact that he specified the length of their relationship, located them at the scene, referred to them as buddies, and mentioned shared use, suggests that the parties had mutual understandings, rather than

conflicting interests. The members focused their attentions on drug use and shared the emotional experience of being in want.

As shown in these examples, Collins' (2004) ritual ingredients are present in drug transactions in the street-based drug scene. The local drug market can be characterized as a physical assembly of drug using/selling insiders with a mutual focus of attention and mood towards drug ingestion. Participants came together on a regular basis, oftentimes in delimited social spaces, while focusing their attentions on common objects and activities. The feeling of group membership, or group solidarity, is closely related to such interaction rituals, involving drugs, (usually) money, and shared sentiments.

GROUP SOLIDARITY: IMMIGRANT EXPERIENCES

It was a common scenario that members were leaving the scene after successful rehabilitation, followed by relocation and abstinence, only to return from time to time, catching up with acquaintances. They left the scene, but not necessarily completely or permanently. Drifting back complicated the process of staying "clean". This process also illustrates the strength of social bonds. Binyam tried to get out, only to realize that he belonged:

I started taking suboxone [substitution medicament]. I did pretty well in my flat, but the problem: environment, environment; friendship. To change, it's not (...) you don't fit, you're not young anymore, you know? You'll return to the people you know.

Earlier in the conversation Binyam had claimed to have no good friends at the scene. Yet he had drifted back to the people he knew. Friendships can surface when they are abandoned, but also in the absence of alternatives. Binyam asserted that he did not fit anywhere outside the scene. Inclusion in the street-based drug scene cannot easily be replaced by belonging

elsewhere. Drugs might pull the rehabilitated back to the scene, but so can "friendship", as illustrated in the following excerpt:

A crowd of people had gathered in and around a bus run by a charitable organization – a portable shelter for drug abusers, homeless, and others in need. A well dressed man was sitting by a deep sleeper, sipping from a cup of coffee. I walked over and introduced myself to him. Alfred had left the scene and was now working as a carpenter outside the city. He enjoyed a day off and decided to pay his old milieu by the central station a visit. The sleeper was a friend from the old days and I got the impression that Alfred was watching over him. We talked for an hour, after which he decided to catch a bus to his girlfriend's. I accompanied him to the bus stop. On the way he stopped by a 7-Eleven, purchased some bread and handed it over to me. He told me to leave it by his sleeping friend. I returned to the crowd and did what I was told. Alfred's friend woke after a while and asked where the bread came from. I explained the situation. The drowsy man picked up the gift, on the verge of tears.

Sleepers are commonly portrayed as prey in the drug scene. They are easy targets for thefts and exploitation. As such, the story above is a stark contrast. Instead of being robbed, the sleeper received food from a former member of the scene. Receiving bread might seem a rather trivial event. The excessive expression of joy displayed by the recipient may have been due to previous negative experiences from falling asleep or low expectations toward fellow drug scene members. Or perhaps it was an expression of relief in the face of distress. Most importantly, the excerpt depicts a significant act of care and the strength of social bonds that draw former members back to the scene.

Collins (2004) explains how the discrepancy between failed and successful interaction rituals structures life. Individuals avoid the former and steer toward the latter. Repeated returns to the street-based drug scene are commonly understood as outcomes of social marginalization and/or physical addiction (push), but may also be viewed as an interaction ritual chain

expressing group membership (pull). While recognizing the push of exclusion and cravings, the participants' need to belong should be acknowledged.

Feelings of membership may be of particular importance to people leading a fleeting life, marked by limited life chances and exclusion. This would apply to most of the participants in the street-based drug scene. However, experiences of group solidarity in Norway may be especially important for individuals originating from outside of the country. According to Kamal, he was excluded from his own immigrant group:

I was excluded from my own people, I was an outcast. I made an outcast of myself 'cause I didn't give a damn about them. And it got me more and more, in my drug milieu, to hang out with Norwegians who are older than me, although we didn't use the same. I did not use syringes or anything like that, I only hung out with them, appreciated them. Those I knew were honest with me. They were like: you shouldn't do that, don't use that, you don't belong here [the drug scene] Kamal.

Kamal was in his early teens when he first joined the street-based drug scene. The group solidarity he described resembles paternal care. Experienced ethnic Norwegian participants included Kamal, while at the same time warning him of the dangers of remaining in the scene. They were not interconnected through identical practices (injections), but occupied the same cultural, social, and spatial zone (Moore, 2004b, p. 201). In some ways, this excerpt offers general insights into the socialization of young members in the scene. Viewed as a "self-excluded" immigrant, Kamal's utterance illuminates the inclusive sides of the Oslo scene in a particular manner. Importantly, he was accepted by the Norwegian "host population".

When I first met Tariq, he struck me as an isolated member of the Oslo scene. The following story describes my first visit to the low-threshold health service he attended, to receive opiate substitution medicaments:

I arrived at 9 AM to find the health service in a drowsy state. People were waiting for their medication and for the day to begin. The service attracts a steady flow of about 20 people, some of which still use heroin alongside prescribed drugs. I'd been told that two immigrants come here, but they hadn't arrived yet. I passed the time by a table in the living room, discussing the latest news with a group of regulars. Tariq, who was one of the two immigrants I'd been told about, arrived at the site around 10 AM. He entered the room, nodded, and withdrew to a computer in a separate room. While the ethnic Norwegians discussed Norwegian news, he sat quietly by the computer watching news from his country of origin.

This scenario was representative of how Tariq characterized his status as an immigrant in Norway. Whenever I visited the centre, he would sit alone by the computer watching news or religious teachings. He seemed to take little interest in whatever was going on at the low-threshold service, in the milieu, or in Norway as a whole. Whenever I talked to him he portrayed himself as an "outsider", referring to himself as "black", despite his Middle-Eastern origin. I came to see this as an expression of exclusion. Tariq experienced blackness in a predominantly white society. His difficulties seemed to emerge from the lack of relationships:

I got to know some girls, they have some friends, but otherwise I haven't got one good friend who is Norwegian; someone I can call, he can come and visit me or (...) no, that's never happened to me. Not even when I was working.

The drug scene was, according to Tariq, different from the rest of society. When speaking about this particular milieu, he modified his statement about not having any Norwegian friends:

Interviewer: Can you describe the [drug] milieu for me?

Tariq: You can speak with Norwegians, you can speak with Africans, you can speak with Afghans (...) we have the same problems, so maybe that's why we can be social. Without that milieu, I've never had a Norwegian friend.

Tariq spoke of the drug scene as the only link between him and Norwegians. It was here, and only here, that he made acquaintances. For a self-proclaimed "black" in a predominantly white society, the street-based drug scene offered him the opportunity to cross social boundaries. He regarded himself as socially marginalized in Norway, but locally integrated in the Oslo scene. Shared problems in a shared marginal social space bridged the gap between a self-proclaimed outsider and others.

Binyam had not been back in his native country since he left more than twenty years ago. Belonging was ambiguous for him, as he tried to define himself as something in between a Norwegian and an immigrant: "I'm a part of the Norwegian (...) I'm Norwegian, I mean (...) not Norwegian, but I'm in a Norwegian society, and I feel like a part of a Norwegian environment you know". The environment he was referring to was the street-based drug scene. He labelled it "Norwegian", even though this characterization has grown dubious over the last few years (Nafstad, 2011). His involvement in the scene implied, in some sense, involvement in Norwegian society.

The participants in the drug scene shared exclusive social spaces, focus of attention, and emotional experiences, indicating that the scene may be a fertile ground for feelings of membership. Accordingly, feelings of group membership were displayed in social bonds that drew former members back to the scene, and more notably, in the inclusion of immigrant men

who considered themselves isolated in Norwegian society. This demonstrates the importance that the street-based drug scene may have for individuals who experience low intensity solidarity elsewhere (Collins, 2004). Furthermore, the stories of immigrant men, who initially inhabited the fringes of mainstream society, testify to the significance of group solidarity in an environment commonly deemed hostile. Despite its reputation as a ground for antagonism, exploitation, and solitude, the street-based drug scene in Oslo may in fact contribute to experiences of belonging.

CONCLUSIONS

The aim of this paper is not to present "a romanticized notion of a drug user community characterized by social solidarity and camaraderie" (Fast et al., 2013, p. 104), but to tell a story about street-based drug scenes that is rarely told. To be clear, social relations in the Oslo scene were marked by the same self-centeredness and deceit depicted by other investigators (Bourgois & Schonberg, 2009; Fast et al., 2013; Moore, 2004a; Svensson, 2000).

Characteristically, participants referred to fellow drug users as "associates" rather than "friends" (Lalander, 2003; Moore, 2004b). They told stories of how access to drugs secured temporary support, whereas the lack of access to drugs left them stranded. I witnessed thefts and stick-ups, involving both sleepers and those awake. The emphasis on successful interaction rituals and group solidarity in this paper may thus seem peculiar. However, a great deal is known about exploitation and social suffering in street-based drug scenes understood as "risk environments" (Moore, 2004a; Parkin & Coomber, 2009; Parkin, 2013; Rhodes, 2002). Despite social suffering and at times, equivocal identifications between fellow drug users, manifestations of group solidarity were both visible in social situations and audible in the participants' stories. These social relationships are deemed superficial by both insiders and outsiders; a label that hardly captures the intimacy, sharing, and care that I observed in this

milieu. Compared to other pockets of solidarity in Norwegian society, the Oslo scene may be viewed as a pocket of solidarity of relatively high intensity (Collins, 2004). Sharing and acts of care may come at a greater cost in environments characterized by scarce resources.

Drug transactions in shared marginal social spaces can contribute to feelings of group membership. Correspondingly, Duck & Rawls (2012) explain how drug dealing organised, rather than disorganised, a poor neighbourhood in the US. Their claim is that drug dealing, within a given context, is a taken for granted practice that contributes to continuity and collective identities. A sense of continuity is perceived as especially important in high risk environments. The street-based drug scene in Oslo, commonly and rightfully portrayed as a high risk environment, offers such an interaction order. Drug transactions are socially significant, ritualized situations, playing a crucial role in holding the drug scene together.

This paper joins several studies in recommending a continued and improved emphasis on contexts for drug use, both as risk environments and enabling environments (Duff, 2007; Hunt et al., 2009; Moore, 2004a; Parkin, 2013; Rhodes et al., 2005). In the original sense, the term "enabling environment" refers to matters of harm reduction (Rhodes, 2002). The context described here may enhance drug-related harm by securing a steady access to drugs and shaping particular, drug ingesting practices (Moore, 2004a). On the other hand, studies of urban drug use contexts illustrate how local "cultures of care" can reduce harm through interaction: "when friends discuss safer injection practices on a street corner" (Duff, 2009, p. 208). Several studies depict such positive, protective factors in social contexts for drug consumption (Carlson, 2000; Page & Llanusa-Cestero, 2006; Van Havere et al., in press).

The emphasis in this paper has, however, been on a different kind of enabling. The Oslo scene enabled individuals – in this case immigrants – to take part in other people's lives in a meaningful way. As shown in the study, participants often returned to the street-based drug scene after rehabilitation and relocation. This illustrates how group membership can be a social barrier to leaving the scene and receiving treatment (Notley et al., 2012; Svensson, 2000). As long as the street-based drug scene is understood as a crowd of mutually marginalized, yet disconnected addicts, meaningful encounters and belonging is overlooked. As such, we run the risk of neglecting the "vacuum" members may experience in the wake of leaving the scene. This void may be particularly vast for immigrants who experience a lack of obtainable, social alternatives. As members of the street-based drug scene they are "actively engaged in meaningful activities and relationships seven days a week" (Preble & Casey, 1969, p. 2), while the alternatives – e.g. residing in a flat while receiving substitution medicaments – may be socially empty.

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DECLARATION OF INTEREST

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