

The drug experience: Heroin (Part 4)

In their seminal book "Beating the Dragon", Professors James McIntosh and Neil McKeganey describe heroin addiction as an extremely hard taskmaster. Clients from the Peterborough Nene Drug Interventions Programme who recounted their stories to us also repeatedly referred to the comprehensive way that their heroin addiction took over their lives.

"My whole life, my whole being was centred on drugs and any means to get them you know. My whole life revolved around drugs, drugs, drugs." (Beating the Dragon)

At the peak of their addiction, users are often using large amounts of heroin. At this time, the process of funding, finding, and using the drug becomes a daily routine. Heroin becomes the most important thing to the user, and very little else matters to them at this time.

Heroin users progressively spend less time with their family and loved ones, and more time with other drug users. They became affiliated into drug-using networks, although these new drug-using acquaintances are not generally considered to be friends. The nature of these relationships is not genuine or real, and tends to be very fickle.

As people become immersed in the drug-using lifestyle, their life before drugs gradually becomes a distant memory. They become stuck in a vicious circle, whereby the drug is affecting their lives yet they need it to function normally and even to 'survive'.

Some people use heroin to 'numb' their emotions and remove themselves from the reality of their situation, i.e. the problems the drug has caused.

The lives of heroin users often become characterised by secrets and lies. This is commonly due to shame and embarrassment, as they have become something that they had looked down on previously and were living a life of which other people disapproved.

For many heroin users, it becomes impossible to sustain their drug use legitimately. As tolerance levels rise, increasing amounts of drugs are required, and therefore more money is needed to fund the habit.

In many cases criminal activity becomes the most common way of funding heroin use. Shoplifting is especially popular, particularly amongst female users, whilst burglary, street theft (bag snatches) and car/bike crime are common sources of revenue for male users. Some people support their habit by dealing in drugs, whilst some may resort to prostitution.

Many report that they would steal anything from anyone in order to support their habit. Their own families are frequent and ready targets for theft.

Some heroin users report that crime simply becomes a routine part of their day. Involvement in criminal activity frequently leads to involvement with the criminal justice system, and sometimes imprisonment. Some addicts consider this philosophically as being an occupational hazard.

Some of the interviewees in our research became locked into a vicious cycle of crime to fund habit → prison sentence (and a period clean) → release from prison → re-introduction to drugs → return to crime → prison. They frequently felt stuck in this cycle and did not know how to get out of it.

Many users report how their behaviour and personality changed during their drug-using days. They often felt that they acted very out of character.

They describe how, in the world of drug-using, everyone thinks primarily about themselves, and more specifically, about feeding their addiction. Many are lacking in morals and conscience and have no consideration for anyone else. They live a life full of deceit and manipulation.

"You've got no boundaries, which is wrong. And you lose all of your emotions, you know. You don't feel guilty, it's just, 'Me, me, me, I want that, I need that', and you don't think of others, what it does to others."

One major occupational hazard of regular heroin use is deteriorating health. For injecting drug users, serious vein damage is common and there is an ever-present risk of contracting blood-borne viruses such as hepatitis C and HIV. There is also a risk of overdosing.

Alongside physical health damage, many heroin users experience mood and mental health problems. Periods of low self-esteem, depression, anxiety and mood swings are frequently reported. Users will regularly have negative opinions of themselves and what they have become. This can sometimes lead to contemplating, or attempting, suicide.

Many heroin addicts also use other drugs, such as benzodiazepines and alcohol, and this can result in further complications (e.g. increased risk of overdose) and further contributes to deteriorations in health.

Users can neglect to pay attention to their appearance and personal hygiene. They lose respect for themselves and for their well-being.

It is common for users to experience a breakdown in their family relationships due to their drug use and the resultant changes in their behaviour. They may be kicked out of home, or their partner may leave them. Many users, in particular men, lose contact with their children.

In general, the lifestyles of heroin users are very unsettled. Many may experience homelessness through relationship breakdown or through losing their homes due to going to prison or inability to maintain rental payments.

Although heroin use can have devastating effects on both the user and those close to them, it is possible to overcome addiction and resume a healthy and positive lifestyle. In Part 5, we will consider how people start and move along the path to recovery.

Recommended Reading:

"Beating the Dragon: The Recovery from Dependent Drug Use" by James McIntosh and Neil McKeganey, Prentice Hall, 2002.

"The Heroin Users" by Tam Stewart, Rivers Oram Press, 1996.