

Research on drug use: a review of problems, needs and future perspectives

Karl-Heinz Reuband

Zentralarchiv für empirische Sozialforschung, Universität zu Köln (F.R.G.)

Introduction

Drug use has been prevailing in most of the western countries for more than 20 years now. However in contrast to common assumption relatively little is known about its prevalence rates, patterns of use and social determinants. The sheer quantity of publications does not parallel the quality of evidence available for a scientific analysis of the phenomenon. Serious deficits exist in many, if not most countries in the fields of epidemiology, etiology and partially as well in treatment and prevention. In the following we shall restrict ourselves to the areas of epidemiology and etiology, leaving aside purely medical or pharmacological questions. Furthermore we shall concentrate on the research situation in Western Europe, with only scant references to the situation in the United States. The following assessment is based on available literature, reviews of research and talks with researchers from various countries. For an early review of German research see Reuband [1]; a bibliography of the German literature since 1800: Hefele [2]; for Britain: Berridge [3]; Denmark: Lund and Nielsen [4]; for the international situation: Fazey [5], Berridge [6]. Given the limitation of space available for the present review, we shall restrict our references to the more basic ones in connection with our discussions only.

Kinds of data

In most of the countries affected by the drug problem data from institutional settings, either

based on interviews or documents, have been the main basis for conclusions about patterns and determinants of drug use for a long time. By using people from treatment institutions, however, a rather selective kind of drug usage and drug user becomes the object of study, i.e., the hard core addict with numerous social and individual problems. This has in turn given rise to a number of false conceptions, especially with regard to addiction-prone personality types and the addictiveness of various drugs with the result that the irregular and nonproblematic use is underestimated and the problematic use overrated. It is only by taking drug users outside treatment institutions into consideration as well that one is able to cover the broad spectrum of use including the less problematic patterns of use. Such endeavours might involve sampling techniques like snowball sampling or a combination of approaches targeted at places where drug addicts are likely to congregate.

Starting in the 70s, school and household surveys either of youth or the general population have been used with increasing tendency in order to measure the prevalence of the drug experience. By containing data not only on lifetime prevalence but patterns of use as well, these surveys have proven to be a good complementary source to data from treatment settings and useful for describing non-addictive patterns of drug use (such as cannabis use). They have also been useful for describing the climate of opinion concerning drugs.

With regard to the use of hard drugs such as

heroin, however, the data have strong in-built limitations (which are often overlooked). People who have tried hard drugs a few times and stopped the habit are overrepresented in surveys. Hard core addicts are either not available or are not willing to take part in an interview. Attempts to estimate addiction prevalence based on surveys, as is sometimes done, therefore constitute a futile attempt. As treatment data give a selective impression about hard drug use so do survey data (although from a different angle). It is only by using a combination of various data that one can get an adequate impression on usage patterns, determinants and trends.

Monitoring of trends

Despite the prominence of arguments in the public concerning new developments in the field of drug use trend studies are rare. Arguments about new emerging patterns have thus more often been based on false assumptions than on systematic data. Apart from routinely gathered statistics by the police there are only few continuous monitoring systems referring either to drug users per se or addicts. Where treatment data are available, they often serve more a bureaucratic than a scientific function; they document activity patterns of the agency (such as on total number of clients and type of substance abuse). Further breakdowns of the tables according to substantive research questions, e.g., with regard to drug careers, are omitted. The data are underutilized for scientific purposes.

With regard to survey data based on representative samples of the population the situation differs from country to country. Some countries, such as Germany, Norway or Sweden, have a rather continuous series of surveys of youth on the local or national level. In other countries, such as Britain or the Netherlands, such kind of data have been lacking for a long time and have been collected in a rather irregular and often uncomparable way with different methodologies and samples. The situation is even worse for surveys among adults. Though

the drug using generation becomes older and some of their members continue drug use, most of the surveys in Europe — in contrast to the U.S. — are still restricted to youth. Seen from this perspective it is sometimes impossible to follow closely the trend of drug use within a given country and it is equally troublesome to compare countries within approximately the same period of time. The impact of drug policies as practised by the various countries is consequently difficult to assess.

Where survey data have been used, prevalence figures and patterns of use have usually been the object of interest from a purely descriptive point of view. Theoretically guided and empirically based attempts to explain patterns of use and trends by recourse to demand and supply data have been scarce. Attitudes towards drugs and their effects have not been assessed in detail (if at all) nor have questions on availability been asked in most of the available studies. Consequently, our understanding of the ups and downs in drug use is still quite limited.

Cross-national comparison

Where attempts of cross-national comparisons are undertaken, problems of comparability of indicators pose a serious problem. Different countries use different criteria and employ different resources to generate official indicators such as on drug-related deaths. A first step towards unification and comparability within Europe has been undertaken in the 'Multi City Study Group' being part of the Pompidou Group to combat drug abuse within the countries of the European Council [7]. Its basic idea is that on the city level most information on drug use can be pulled together and efforts towards using uniform indicators can best be tested and verified on this level. The problem with these efforts is that it will take a long time until uniform criteria are worked out and implemented on the official level, and a valid comparison becomes possible. The other problem lies in the restriction to one city per country: It is an open question to what extent differences

between the cities reflect cross-national differences or intercity variations which have nothing to do with national drug trends and policies.

Survey data that can be used for cross-national purposes are rare. Different questions, wordings, and topics make comparisons difficult. Though there have been attempts by the Multi City Group to develop a uniform catalogue of questions (for other attempts see [9]) it has as yet hardly been applied and if so, limited to local unrepresentative samples at different points in time. The questionnaire furthermore has the drawback that it was modelled very much according to the U.S. ongoing high school surveys [9] with little or no recognition of research already done in Europe with often better indicators. Some of the studies such as in the City of Hamburg (F.R.G.) which started in 1971, i.e., earlier than the U.S. school surveys, have used more precise indicators than the U.S. surveys; instead of grading availability of drugs according to vague easiners, a time reference ('within 24 hours') has been used.

The reason for the neglect of European research traditions might partially derive from the relatively arbitrary composition of the Multi City Study Group: It is basically made up of only one or two permanent correspondents per country, often with an administrative and not a research background. There is no recruitment according to topic under discussion.

Where cross national survey data are available on drug use, attitudes towards drugs or related topics, they are basically of two kinds: They have either evolved out of the replication of questions, which were asked before in other countries and are there part of an ongoing survey series. Usually only two or three countries can be compared in that way, due to the uniqueness of the questions employed in the various countries [10]. In the other case the study has been organized as a cross national study with identical questions from the very beginning. Under these circumstances there are greater possibilities to include more than two countries. At present only two studies exist which were designed in that way and include several countries: one done in 1986 on behalf of a news-

paper [11,12], the other done in 1989 on behalf of the Commission of Health Affairs of the European Community (data not yet published). Both are based on a sample of the national population including adults. Though basically more descriptive rather than theoretical in character, they offer an opportunity, in conjunction with other data, to get an overview over variations in drug use, depending on sociocultural differences and drug policies [13,14].

Visibility and coordination of research

Attempts of cross-national comparisons are made difficult by the low visibility of ongoing and past research. In a few countries, such as Scandinavia, the Netherlands or Britain, a regular register of research in the drug field is published. In other countries it is lacking. What one has to consult instead, if available at all, are general registers on social science or medical research. As a consequence there might be a rather limited ongoing flow of information and communication across the different fields of drug research. The situation aggravates when the cross-national flow of information is taken into consideration. Usually, the publications are in the native language; in many other cases only 'grey' literature is available.

Regular reviews of the national drug situation are rare or limited in scope. Regular exchange of information on drug trends similar to the 'Community epidemiological meetings' of the National Institute on Drug Abuse (U.S.A.) does not exist, neither on the European nor on the national level. Paradoxically, the U.S. meetings turn out to be the only ones for Europeans to get information about trends in neighboring European states. There is a strong need for more international, European collaboration and exchange on the level of researchers.

Organization of research and innovativeness

Drug research is heavily influenced by 'practitioners' such as social workers and psychologists working in treatment settings. Basic research in universities or other institutions is

rare. Seen as positive by many practitioners, this situation is to be viewed in the negative from the sociology of science point of view: Arising from this situation there are little theoretical innovative and systematic developments in drug research, poor methodologies and inadequate analysis. A more active strategy by the funding and government institutions is needed to stimulate basic research, especially so with regard to sociological and social-psychological approaches which focus on the epidemiology and etiology of drug use.

In contrast to widespread assumptions and proposals [15], interdisciplinary research settings including practitioners do not provide a solution to the presently unsatisfying research situation. On the contrary: when too many different disciplines are involved and too few people available from their own one, the link to one's own discipline might become too loose, and specific paradigms might not evolve. In fact, it is basically the discipline-specific research settings which have proven the most fruitful as can be seen in the alcohol field: exemplified by the Alcohol Research Group in Berkeley (U.S.A.) and the Finnish Foundation of Alcohol Studies. Both have a staff large enough to deal with the full spectrum of social science-related questions in this field and to provide a forum for the exchange and elaboration of ideas. It is only by fostering a 'scientific community' with distinct discipline-based perspectives — via research groups or research institutes — and by providing an appropriate infrastructure that the present unsatisfying situation will be altered. This will have to take place on the national as well as the European level. 'European' institutes by themselves will run into too many difficulties if no corresponding institutes exist on the national level for the collection and analysis of data.

References

- 1 K.H. Reuband, Untersuchungen zum Rauschmittelkonsum. Eine bibliographische Übersicht. Deutsche Hauptstelle gegen die Suchtgefahren, Hamm, 1977.
- 2 B. Hefele, Drogenbibliographie. Verzeichnis der deutschsprachigen Literatur über Rauschmittel und Drogen von 1800 bis 1984, K.G. Saur, München-London-New York, 1988.
- 3 V. Berridge (Ed.), Drug Research in Britain, Gower, Aldershot, 1989.
- 4 J. Lund and K. Nielsen, Rusmiddelforskning i Danmark efter 1980 — en forskningsoversigt Alcohol — og Narkotikaradet, Copenhagen, 1986.
- 5 C. Fazy, The aetiology of psychoactive substance abuse. UNESCO, Paris, 1977.
- 6 V. Berridge, the European and international agencies and collaboration: present situations and future possibilities, Institute of Historical Research/London School of Hygiene, London, 1988.
- 7 Council of Europe, Multi-City Study of drug misuse. Final report, Section 1 and 2. Council of Europe, Strasbourg, 1987.
- 8 J. Elinson and D. Nurco (Eds.), Operational definition in socio-behavioral drug use research 1975, National Institute on Drug Abuse, Rockville MD, 1976.
- 9 L.D. Johnston, P.M. O'Malley and J.G. Bachmann, Illicit drug use, smoking and drinking by America's high school students, college students and young adults 1975—1987, National Institute on Drug Abuse, Rockville, MD, 1988.
- 10 K.H. Reuband, Haschisch im Urteil der Bundesbürger. Moralische Bewertung, Gefahrenwahrnehmung und Sanktionsverlangen 1970—1987, Neue Praxis, 18 (1988) 480.
- 11 E. Noelle-Neumann, Die Deutschen wollen die Gefahr nicht sehen, in: DIE WELT, 154 (1986) 6.
- 12 E. Noelle-Neumann, Härtere Strafen bringen nicht viel, in: DIE WELT, 154 (1986) 7.
- 13 K.H. Reuband, Illegale Drogen — Ein Sozialindikatorenreport, in: Deutsche Hauptstelle gegen die Suchtgefahren, Jahrbuch 1990 zur Frage der Suchtgefahren. Neuland Verlag, Hamburg, 1989.
- 14 K.H. Reuband, Drogenpolitik zwischen Konsens und Krise: Einstellungen der Bevölkerung zur Drogenpolitik im internationalen Vergleich. Zentralarchiv für empirische Sozialforschung, Univ. of Cologne, 1989.
- 15 Deutsche Hauptstelle gegen die Suchtgefahren: Thesen zur Suchtprävention und Suchtkrankenhilfe, Suchtgefahren 35 (1989) 416.