

Drug Social Clubs – the next social club generation?

Vendula Belackova, Marta Rychert, Chris Wilkins, Tom Decorte

Background

- CSCs can offer an alternative to the commercial cannabis supply or strict prohibition
- Emerging debate about whether and how other (illegal) psychoactive substances other than cannabis should be regulated and made available to people who choose to use them (e.g., psychedelics, MDMA)
- Some form of ‘all drug’ decriminalization or depenalization, for personal possession of small amounts (sometimes restricted to private spaces) has taken place in Argentina, Armenia, Chile, Colombia, Costa Rica, Croatia, Czech Republic, Ecuador, Estonia, Germany, Mexico, the Netherlands, Paraguay, Peru, Poland, and Spain (Eastwood et al., 2016)
- Cultivation of a small number of psychoactive plants has been decriminalized in the Czech Republic since 2010 include psilocybin mushrooms, coca plants, and plants containing DMT or mescaline (i.e., ayahuasca plants or peyote cacti)(Belackova & Stefunkova, 2018)
- Ballot initiatives to decriminalize psilocybin mushrooms have been introduced in some U.S. states; in parallel, several trials for the use of psychedelics in psychotherapy are being pursued (Aday et al., 2019; Webster, 2019), *including in NZ!*
- Central question is whether grassroots initiatives could emerge for the consumption and acquisition of psychoactive substances other than cannabis

My thoughts...

- The power of social clubs to regulate high risk sporting and leisure activities (e.g., rock climbing, scuba diving, sky diving, yachting), even for children!
- Overestimate the role and power of government to provide safety and education in many social activities
- Clubs draw on the accumulated knowledge of experienced practitioners who develop club rules and provide training, equipment and monitoring to ensure safe, responsible good practice
- Clubs provide management structures (i.e., president, vice president, treasurer and set of accounts)
- Pathways to empowerment, knowledge and responsible behavior

Method

- We (Vendula!) conducted an exploratory narrative review of scientific and grey literature centered around themes outlined in the introduction
- Research known to the authors, as well as specific Google Scholar searches with relevant key words in English and Spanish (e.g., “(drug) decriminalization” AND “possession” / “supply”/ “production”; “consumer” / “user” / “people who use drugs” / “peer” AND “self-organization” / “advocacy” / “self-regulation”; “harm reduction” / “safe consumption” AND “environment”, “venue”, “selforganization”; “opium” / “coca” / “cannabis” / “ayahuasca” AND “home production”, “self-supply”, “social supply”)

Results

- In the Netherlands, psilocybin mushrooms were not subjected to any control until 1998 and were freely sold in smart shops (Van den Plas, 2011)
- Psilocybin mushrooms were legal to produce in the UK and ayahuasca was legal to possess and consume in France until their governments decided to explicitly prohibit these by the law in 2005 (Van den Plas, 2011)
- Street or dependent PWUD have advocated for and collaborated with the authorities in the design and conduct of drug treatment across the United Kingdom, Australia, Canada, the Netherlands, and the United States (Ti et al., 2012)
- PWUD have also self-organized and collaborated with agencies in the development of harm-reduction programs (Friedman et al., 2007; Madden & Wodak, 2014; Trautmann, 1995), to educate, and provide peer support at the party scene (Goossens, 2008; Móró & Rácz, 2013), to advocate for the reform of drug policy (O’Gorman et al., 2014), and to improve public perception of PWUD (Chatwin, 2010)

Results

- PWUD have operated drug consumption environments (e.g., use of substances part cultural tradition, recreational drugs at a dance parties, and even for injected drugs)
- Kava in New Zealand, Australia, and the United States (e.g., not-for-profit kava social club built around a group of friends and their social networks has been operating in Auckland (New Zealand) since 2011)
- Established in 2013, the Association for the Study of the Effects of Ayahuasca has nearly 700 members and six staff members.
- New members are recruited via word of mouth; as a private, not-for-profit association, it complies with the regulations by not publicizing their activities.
- Each new member is interviewed about their motives to join the club and is screened by the staff of the club for physical and mental health issues. After paying the membership fee, the participants are included in a mailing list where they can get information about upcoming ayahuasca sessions. These span a couple of days and include safe space for the ritual, accommodation, meals, accompanying through the ritual, and integration sessions.

Results

- In order to avoid illegal drug markets with their uncertain quality and safety profiles, PWUD have supplied themselves (e.g., psychoactive plants have been cultivated in home settings or harvested in the wild)
- Proposals from consumer representatives to source safer forms of (powder) drugs than those available on the illegal market (e.g., ‘heroin compassion clubs’ in Canada which have been suggested as consumer cooperatives)
- People who use drugs have demonstrated their willingness to subject the drugs they are using to chemical analyses to determine safety and legitimacy (Barratt et al., 2018; Kennedy et al., 2018; Krieger et al., 2018; Sherman et al., 2019)

Conclusions

- Number of examples of self-organization, self-regulation, and self-supply among street-based PWUD, recreational drug users, and party-scene attendants
- Aims include advocacy, representation in relevant programs, or simply reduction of use-related harms
- Level of agency found across different drug consumer groups and the scope of their activities, as well as the existing record of self-supply behavior, suggest that it could be possible for PWUD to form organizations similar to CSCs.
- Primary concern in ‘handing’ over the responsibility over psychoactive substance use to the consumers might be around controlling safety, spread of drug use and dependency, and related health and social problems
- Main risks related to binge use and polydrug use and any peer-run consumption venues would need to manage these situations, ranging from peer-enacted norms about responsible use to emergency protocols for acute intoxication

Conclusions

- Protocols around neighborhood nuisance are of essence (e.g., management of intoxicated individuals, related noise, or rubbish disposal)
- Dispensing staff at drug social club would have an important role in educating about the drug content and safer modes of administration.
- When it comes to the broader group of psychedelics, there are risks pertaining to mental health, both in acute and chronic manner (e.g., specific advice to the consumers before taking particular substances)
- Focusing on plant drugs which undergo a controlled growing process at a fixed location is one way to monitor supply, distribution and use
- Interlinking the club with support services and perhaps even assisting in organizational duties might be necessary (e.g., health, financial, agricultural services)