AN EXPERIENTIAL CASE STUDY

OF DRUG-TAKING

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Unless specifically indicated to the contrary, this thesis is the result of my own work.

Karen Renee Bailey
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Five semi-structured interviews were held with key informants of various organisations both on and off campus in order to gain an understanding of the context of drug-taking by university students in Pietermaritzburg. Thereafter, an holistic, single case study was undertaken to describe and explain significant predisposing, precipitating and maintaining factors present in an experiential analysis of a university student’s drug-taking. Two semi-structured, open-ended interviews were conducted in collaboration with Rory, and a diary was written by him for the duration of one month. He also submitted a poem which he previously wrote, as well as a letter addressed to himself, both which reflected on his experiences of drug-taking. The data was subsequently intertwined with a brief review of the literature as well as with the theories of Urie Bronfenbrenner, Albert Bandura and Erik Erikson, in order to interpret and understand the data meaningfully. Authoritarian parenting style, poor family functioning, parental values regarding drinking, and lack of positive father-son interaction appear to have predisposed Rory to start drinking and taking drugs. Rory’s sense of identity confusion, peer models of drinking and taking drugs, and lack of parental monitoring seem to have precipitated Rory’s drug-taking. His continued association with drug-using peer groups, his search for a sense of belonging following his parents’ divorce, permissive parenting style, as well as the availability and pleasurable effects of drugs have maintained his drug-taking. Experiential case studies can play a positive role in generating future conceptual frameworks to understand drug-taking, to prevent drug use, and to effectively treat drug-taking individuals.
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1. RATIONALE FOR THE STUDY

A survey was conducted on the University of Natal (Pietermaritzburg) campus, (hereafter referred to as “the campus”), which highlights the fact that substance use amongst students is an issue of concern (C. Birkett, personal communication, February, 2000, from an incomplete Master’s dissertation conducted in 1999). In this survey, a random sample of 2000 university students from the campus was selected from university records. There was a response rate of 35%. Nearly 4% of students said that they had used marijuana between three to six times over the past month; 10% said that they had used at least one of the following over the past month: psychedelics, barbiturates, amphetamines, a combination, amyl nitrites, ecstasy, cocaine, mandrax and heroin. Fifteen percent responded that they knew that one or some of their friends used the drugs mentioned above regularly, and a third responded that they knew that one or some of their friends used such drugs sometimes. Four percent said that they had had at least six alcoholic drinks on more than 10 occasions over the past month, and close to 20% said that they had had at least six alcoholic drinks between two to five times over the past month. These figures show that substantial proportions of university students drink alcohol excessively and either occasionally or regularly take illegal non-prescription drugs.
Substance use and abuse is an escalating problem in South Africa and abroad. A recent study shows that in Gauteng during the period January to June 1999, the proportion of persons whose primary substance of use/abuse is heroin has more than tripled since the same period in 1998 (0.7% to 2.7%). In Durban during the period January to June 1999, the proportion of persons whose primary substance of use/abuse is marijuana nearly doubled since the same period in 1998 (16% to 30%), and more than tripled since January to June 1997 (9% to 30%) (Parry, Lowrie, Bhana, Bayley, Potgieter & Pluddemann, 1999).

Substance use is frequently associated with crime (Rocha-Silva & Stahmer, 1997). According to a study conducted in the United States by the Partnership for a Drug-Free America, drugs are implicated in nearly half of all homicides and violent crimes committed in the United States, and heavy drug use in the home contributes to at least half of all family violence (Searll, 1995). According to Searll (1995), it is also a real threat to the success of our country’s reconstruction and development programme, and in this respect, James Burke, head of the Partnership for a Drug-Free America, states that:

> Illegal drug abuse threatens to destroy the social fabric of the nation...nothing impacts the well-being of the country quite the way drug abuse does, because it is embedded in every other social problem we face (Searll, 1995, p.20).

McWhirter, McWhirter, McWhirter & McWhirter (1993) address certain social and personal correlates of adolescent substance use, such as positive reinforcement and behaviour modelling, non-traditionalism and a desire for independence and autonomy. Erik Erikson’s psychosocial theory (1968) is of relevance at this point, as the adolescent’s search for identity corresponds with
a desire for independence and self-discovery, which may also be a necessary adjunct to a sense of belonging to a particular peer group. One of the best predictors of adolescents experimenting with certain types of substances and/or continuing to use substances, is whether or not people in their immediate social circle, such as parents, siblings or peers, are themselves substance users (Harris, 1998; Kandel, 1985; McWhirter et al., 1993). As a result, adolescents are positively reinforced for such behaviour by approval and acceptance by their peers, and by the pleasant effects that the particular substance has on them. This is in keeping with the social learning theory of Bandura (Bandura, 1986; Rhodes & Jason, 1988). Peer cluster theory also asserts that substance use is nearly always linked to peer relationships, as it is in the peer group that such substances are made available, various attitudes towards these substances are formed, and peer pressure is dominant (Oetting & Beauvais, 1987). Dysfunctional and/or unstable family relationships and dynamics, for example, divorce and parenting style, may also contribute towards the incidence of substance use and delinquent behaviour (Demo, 2000; Kimmel & Weiner, 1995; Lamborn, Mounts, Steinberg & Dornbusch, 1991; Nielsen, 1999; Simons, Whitbeck, Conger & Conger, 1991).

The aetiology of substance use is, therefore, multifaceted in nature (Kimmel & Weiner, 1995; Lerner & Galambos, 1998; Lettieri, 1985; Robson, 1994; Santrock, 1992). Bronfenbrenner’s ecological theory provides a conceptual framework for understanding complex phenomena, as he holds that the ecology of human development is:

The scientific study of the progressive, mutual accommodation between an active, growing human being and the changing properties of the immediate settings in which the developing person lives, as this process is affected by relations between those settings, and
by the larger contexts in which the setting are embedded (Bronfenbrenner, 1980, p. 21).

This may imply that the effective treatment of substance abuse should also be dealt with in a similar manner (Epanchin & Paul, 1987; McWhirter et al., 1993). To this end, the facilities and resources available to the university students on and off campus at present may prove to be inadequate, and may highlight the need for intervention to take place at various levels in order to effectively address the issue of substance use/abuse, particularly if viewed from the perspective of a substance user.

Kimmel & Weiner (1995) state that

Statements about youthful drug taking that fail to distinguish between use and abuse, but instead refer broadly to some “percentage of adolescents” who “use drugs”, lack precision and rarely merit consideration (p. 472).

In response to this statement, the terms substance/drug “use” and “abuse” have not been conflated in this report for various reasons, the preferred term being drug “use” or drug “taking”. Firstly, it was not my intention to classify, and consequently label, my research subject, or any other person who uses certain drugs, as a drug “abuser”, according to the criteria set out in the Diagnostic and Statistical Manual for Mental Disorders of 1994. Secondly, there is a dearth of experiential, phenomenological studies on adolescent drug use, and the terms “experiential” and “phenomenological” imply that a non-judgmental, open-minded attitude should pervade a report of this nature. It should also be noted that the terms “substances” and “drugs” are used interchangeably in this report.
Therefore, it is hoped that an experiential, phenomenological, descriptive and explanatory case study of a university student who uses various substances, would add to the body of knowledge that exists in the area. The study may also enable us to make sense of his life-world, both past and present, and to further understand the various predisposing, precipitating and maintaining factors in his drug-taking experiences. This knowledge and understanding may enable us to illustrate or analytically generalize to particular theories, for example, the ecological theory of Bronfenbrenner (1984, 1986), the social learning theory of Albert Bandura (1986), and/or the psychosocial theory of Erik Erikson (1968, 1980) (Yin, 1994). This may assist researchers in the future in suggesting possible guidelines for effective programmes to be implemented in order to reduce the prevalence and incidence of drug use on campus.

2. **THE ECOLOGICAL THEORY OF URIE BRONFENBRENNER**

...the concern with the progressive accommodation between a growing human organism and its immediate environment, and the way in which this relation is mediated by forces emanating from more remote regions in the larger physical and social milieu. The ecology of human development lies at a point of convergence among the disciplines of the biological, psychological, and social sciences as they bear on the evolution of the individual in society (Bronfenbrenner, 1980, p.13).

A person does not live in isolation, but in relation to others across many settings, which in turn influences such settings in a reciprocal and interconnected manner. Behaviour is determined by the specific activity that a person is engaged in at the time, the role he adopts in relation to such
activity, as well as the *interpersonal relationships* he is involved in pursuant to such activity, role and setting (Bronfenbrenner, 1980). Therefore, the nature of behaviour at any one time is multifaceted and not easily understood and/or explained. It was shown that the ecological theory of Bronfenbrenner (1980, 1986) can be applied to this case study in an endeavour to address all three of the research questions set out in 2.2 above.

Bronfenbrenner (1980) postulates that what is significant is not the objective reality operative within a particular setting, but the person’s *perception or interpretation* of that reality. Therefore, what was important in this case study was the specific manner in which the research subject, hereafter referred to as “Rory”, perceived or interpreted, *inter alia*, his activities, roles, interpersonal relationships, both past and present, which in turn allowed for a more accurate explanation and description of his life experiences.

Also crucial in Bronfenbrenner’s theory, is his conception of five different levels of interaction, namely, the micro-, meso-, exo-, macro- and chronosystems, and for ease of clarity these are briefly discussed (1980, 1986). The microsystem is the setting in which a person lives or interacts, for example, family, school or peers. The mesosystem refers to the interrelations among particular settings in which the person participates, for example, interrelations among home, school and peers. The exosystem refers to a particular context in which the person does not actively participate, but which still influences and is influenced by the setting in which the person participates, for example, a parent’s place of employment influencing what happens at home in his interaction with a child. The macrosystem is the particular culture and belief system that a person adheres to. Finally, the chronosystem refers to particular transitions across the life-span which may affect and be affected by a person’s behaviour, for example, divorce and its effect on
a child/family over the years (Bronfenbrenner, 1980, 1986) (cf. figure 1).

The reciprocity of interrelatedness across all five levels of systems determines and is, in turn, determined by the specific activities, roles and interpersonal relations of a person at any one time (Bronfenbrenner, 1980). As a hypothetical response to the first research question, that is, what predisposed Rory to start taking drugs, and to demonstrate the appropriateness of Bronfenbrenner's theory to Rory's case study, it could be theorised that poor family functioning during Rory's childhood years, which is a microsystemic phenomena, may have predisposed Rory to take drugs. Referring to the exosystem, perhaps his father's busy schedule at his workplace may have reduced instances of positive father-son interaction, and this may have influenced Rory's decision to interact with peers, a mesosystemic phenomena, which, in turn, may have predisposed Rory to start taking drugs. Elements within the macrosystemic level could be postulated as being influential in Rory's drug-taking, for example, his perception of the particular values his parents upheld in relation to parenting style or drinking alcohol. Finally, referring to the chronosystem, it may be hypothesised that certain activities, or lack thereof, which occurred during the course of Rory's early development have had a long-lasting and particular influence over his decision to take drugs: the paucity of positive father-son interaction may not only have predisposed him to take drugs, but may also have had an adverse impact on his drug-taking decisions throughout adolescence and beyond.
A further significant element in Bronfenbrenner's theory is his proposal that ecological transitions serve as significant events which can bring forth meaningful interpretation and explanation in order to make better sense of the person's perception of the events (Bronfenbrenner, 1980).
Every ecological transition constitutes, in effect, a ready-made experiment of nature with a built-in, before-after design in which each subject can serve as his own control...(and) sets the stage both for the occurrence and the systematic study of developmental phenomena (Bronfenbrenner, 1980, p.27).

Therefore, from the perspective of the current case study, it was argued that the particular ecological transitions operative over the course of Rory’s development have indeed been significant and warrant careful consideration in order to bring forth meaning to particular perceptions peculiar to his drug-taking habits.

The above elements of Bronfenbrenner’s theory represent the relevant features which were utilised in an attempt to explain Rory’s perceptions of his drug-taking experiences. There were clearly a myriad of other equally important concepts which are, for the purposes of this study, not deemed significant for utilization. In this regard, it would be prudent to heed the words of Bronfenbrenner himself:

It is important to emphasize...that it is neither necessary nor possible to meet all the criteria for ecological research within a single investigation (1980, p.14).

3. **THE SOCIAL LEARNING THEORY OF ALBERT BANDURA**

In keeping with the recommendation that additional theories be tested in terms of their capacity to explain the same outcome, which in this case refers to Rory’s drug-taking experiences, apart
from Bronfenbrenner's ecological theory, the social learning theory of Albert Bandura, which is viewed as a complementary theory, was also drawn upon for this purpose (Bandura, 1986; Yin, 1994). However, it should be noted that the latter theory was utilised in an attempt to address the second and third research questions, that is the factors that precipitated and maintained Rory's drug-taking.

Bandura (1986) theorises that it is possible for a person to learn new behaviour by observing someone else engage in such behaviour. Therefore, by observing a model, the person vicariously learns to reproduce such behaviour. However, certain factors, *inter alia*, the characteristics of the model and the person observing, affect the motivation to learn such behaviour, and appropriate reinforcements of the behaviour determine whether or not such behaviour is, in fact, reproduced and/or repeated at a later stage (Bandura, 1986).

For the purposes of the case study in question, it was deemed relevant to pursue the above postulates of Bandura's theory. Therefore, it was shown that Rory's drug-taking experiences in adolescence and in early adulthood, have been shaped, *inter alia*, by his observing peers engaging in similar behaviour, and by being socially and personally reinforced for such behaviour.

Thomas (1992) conjectures that one of the limitations of Bandura's social learning theory is that "it describes *how* children learn rather than *what they are like* at different stages of their lives (p. 246). Therefore, in response to this possible limitation, postulated by Thomas (1992), the psychosocial theory of Erik H. Erikson (1968, 1980) was drawn on in an attempt to understand what Rory "may have been like," particularly during his adolescent years.
4. THE PSYCHOSOCIAL THEORY OF ERIK H. ERIKSON

As a further manner in which to satisfy the criteria of employing additional, complementary theories in an endeavour to explain the same outcome or phenomena, and in response to Thomas' suggestion of one limitation of social learning theory, Erikson's psychosocial theory was utilised (Erikson, 1968; 1980).

However, for the purposes of this case study, it was deemed relevant and indeed necessary to suggest that the period of adolescence is one of crucial significance, and the stage which was studied in relation to Erikson's theory. Therefore, the adolescent stage of identity versus role confusion was highlighted in an attempt to explain the precipitating factors in Rory's drug-taking experiences during his adolescent years.

Adolescence is, according to Erikson, a time of change, not only physically but also socially and emotionally as well (Erikson, 1968). These changes herald adjustments and changes in the adolescent's social roles and views of himself, together with certain expectations that he and others have of his behaviour in response to such new roles and views. Erikson refers to this potential confusion as the identity crisis (Erikson, 1968). Parents at this stage play a significant role by allowing the adolescent to understand and to master his reality, in order for him to achieve a sense of ego identity. However, if the adolescent lacks such understanding, and if the adolescent is experiencing an identity crisis, in effect he does not know who he is to himself or to others. The potential difficulty is that, in not being sure of his own identity, he may over-identify with cliques, which in turn may cause him to lose his individuality and to come into conflict with parents and other authority figures (Erikson, 1968; 1980).
Therefore, if viewed in the context of this study, Erikson's psychosocial theory can be applied meaningfully in an attempt to explain certain precipitating factors in Rory's drug-taking experiences, especially in relation to his family and peers during adolescence. It was also demonstrated that Rory's possible lack of identity, or identity confusion, may have in part caused him to over-identify with drug-taking peers in an attempt to address such confusion. Perhaps his confusion, in this respect, is emulated by Alice:

"Who are you?" said the caterpillar.

Alice replied rather shyly, "I - I hardly know, sir, just at present - at least I know who I was when I got up this morning, but I must have changed several times since then."


5. AN UNDERSTANDING OF THE CONTEXT

During April and May, 2000, five different organisations were telephonically contacted with a view to conducting semi-structured interviews with key informants connected to the respective organisations. This was done to gain an understanding of the context of drug-taking both on and off campus, relevant to university students. The organisations contacted were:

- The Student Counselling Centre on campus.
- The Campus Health Centre.
- The South African National Council for Alcoholism (SANCA).
- The South African Narcotics Bureau (SANAB).
At the outset of each interview, a letter was handed to the relevant informants which explained the authenticity of the research in terms of degree requirements for the Masters' programme at the University of Natal (Pietermaritzburg) (cf. Appendix 1). Subsequent to this, the purposes of the interview, together with relevant details of the research, were explained. Each key informant at the respective organisations was asked the following broad questions in order to facilitate discussion. In keeping with the nature of semi-structured interviews, the structure and the format of the questioning varied in response to the particular focus of the interview at any one time (Patton, 1990):

- What kinds of problems are presented by students which are related to drug-taking?
- Do you have any programmes in operation at present which focuses on preventing drug-taking on the university campus? If not, why not? If yes, what is the nature/content of such programme/s?
- Do you have any programmes in operation at present which focuses on the treatment or reduction of drug-taking on the university campus? If not, why not? If so, what is the nature/content of such programme/s?

The interviews were not tape-recorded, and brief notes were taken during the interviews. Immediately subsequent to each interview, more detailed notes were written in order to capture the essence of the information imparted (cf. Appendix 2).

In order to contextualise drug-taking from the perspectives of the above organisations, and for
ease of reference, a synopsis of each interview is presented below. *It should be noted that the information provided conveys the perspective of the respective key informants, and not of the researcher.*

5.1 *The Student Counselling Centre*

According to the key informant at the Student Counselling Centre, it is very rare that students present with drug-taking as the reason for seeking help, as they will generally not admit they have a problem with drugs. They present with problems such as declining marks, lack of concentration, depression and/or date rape. Sometimes the students are self-referred, or friends, parents, lecturers or the Protection Services on the campus either refer the students or accompany them to the Centre.

Drugs are perceived to be a problem on campus, as it is seen to be an indirect cause of sexual harassment and abuse. The drinking clubs on campus, especially at male residences, are a major problem which is escalating. They form part of a drinking ethos which helps students, especially new students, to socialise. In addition, students report that there is not enough for them to do on campus in the way of the pursuit of hobbies.

The types of drugs that are most commonly used are marijuana, ecstasy, and alcohol, as well as the spiking of drinks with drugs. The use of ecstasy has increased, mainly due to the rave culture. Students report that it increases their self-confidence, and that unless they take ecstasy at rave clubs they feel left out. Being part of a close group gives them meaning and they feel the need to
Mentors are elected to oversee and assist first year students, and they serve as role models to them. Workshops on drug use and abuse are also offered to small groups. The peer counselling campaign of the Student Counselling Centre also targets problems such as drug use and abuse, but an evaluation study needs to be undertaken in order to assess its effectiveness in this regard.

5.2 The Campus Health Centre

According to the key informant, students present with problems such as insomnia, headaches, stress, study problems, depression, tiredness and requests for vitamin B injections. They do not present with actual drug-taking as the primary cause. They sometimes arrive at the Centre barefoot, flushed faced, with red eyes, and shaky, jumpy and irritable. HIV testing, and/or the morning-after contraceptive pill is sometimes requested due to drinks having been spiked. After relevant enquiry from the health personnel, the students may admit to taking drugs only because of the fact that the personnel at the Health Centre are nurses and not counsellors. The students are either self-referred, or their partners arrive at the Centre requesting guidelines on how to cope with the person who is taking drugs, and how to get help for the person. These individuals are perceived to need family support in order to abstain or control their drug-taking.

Drug-taking students are sometimes from affluent homes, as they have money for drugs. Some first year students are perceived to feel the need to drink alcohol due to the stress of their matric year. Students do not take heed of the dangers of drug-taking and relevant statistics presented to
them. Students report that there is a lot of drug-taking on campus, with marijuana being quite common. It apparently stimulates them, makes them feel good and makes them cope better. The health personnel do not condone their actions, but state that if they feel the need to increase the quantity in order to maintain those feelings, they need to seek help. The Centre encourages students to make their own choices, for example, to seek help at SANCA. Staff at the Centre report that they believe that students have low self-esteem, and that they need assistance with assertiveness, problem-solving skills and particular direction, especially from the Student Counselling Centre. There is a culture of drinking on campus of which the students are proud. Students report that they are bored, and therefore take drugs and/or alcohol. One positive development is that the bus which transports students from campus to various clubs in town promotes safe drinking and responsibility.

The Centre takes pro-active steps in attempting to prevent problems with drug-taking, by making students aware of the various organisations in the community which can be of assistance. The Centre concentrates on health and the maintenance of health, such as the symptomatic treatment of individuals who present with problems relating to drug-taking, for example, vitamin B injection, anti-nausea and headache medication.

5.3 **South African National Council For Alcoholism (SANCA)**

SANCA’s main focus is the primary prevention of drug use and abuse, with schools being the main target. Certain programmes and awareness campaigns are held on campus as well. Information and advice apropos various aspects of drugs are given; for example, the advantages
of drinking plenty of water when taking ecstasy. In the view of the SANCA key informant, there is a high incidence of drinking and drug-taking amongst students. Students regard this as being normal and a part of their university culture. Students perceive that there are less harmful consequences to this type of behaviour whilst they are still at university, than if they were employed. Peer pressure is reported to be the most significant contributory factor to first drug use, while peers, parents and factors in the environment contribute to ongoing drug use.

The most abused substance is alcohol, as it is legal, inexpensive, available and more socially acceptable. Amongst White student groups, ecstasy and LSD are more commonly used, with mandrax and crack being used by African and Indian students. Raves in Pietermaritzburg are frequented mostly by White students. Relevant statistics covering an eighteen month period regarding students who entered the treatment programme at SANCA, supplied by the key informant, are attached in Appendix 3. Briefly, these indicate that over the course of the previous eighteen months, six students joined the treatment programme at SANCA, and were all seriously addicted at the commencement of the programme. Only two of the students were referred by the Student Counselling Centre. A variety of drugs, for example, LSD, cocaine, marijuana, mandrax and alcohol were used by the students, with each student using at least two of those mentioned. At the time of the interview, two students were still in treatment, one was in prison and the rest dropped out of treatment.

The bus that transports students from campus to various clubs in Pietermaritzburg reduces the risk of unsafe driving, but may encourage drinking. The practice at various clubs which offers unlimited drinking for a set price, for example, “pig’s night”, encourages drinking and constitutes a health risk.
In the view of the SANCA informant, prevention should begin early in life, and teachers and parents could play a role here. The treatment programme offered at SANCA has two aims: to treat medically, by managing withdrawal symptoms, and to offer a counselling service through social workers and an outpatient clinic. The relapse prevention programme teaches skills over a six month period in order to allow the person to cope with life’s stressors without using alcohol and/or drugs. A fee is charged depending on salary, or parents’ salary. There is also an on-going aftercare programme which reinforces skills and attitudes, and offers support. There is also an inpatient clinic based in Durban which costs in the region of R6 000,00 for a six week period.

5.4 *South African Narcotics Bureau (SANAB)*

The discussion centred on adolescents and young people in general aged 18 - 25 years, and not specifically on university students. SANAB encounters drug use mainly in the city, at clubs, and at private parties, including student accommodation (“digs”). SANAB hears about issues related to drug use through word of mouth. Peer pressure is a major problem. The message is “conform or get out.” Cliques are formed with each clique mainly adhering to the use of one type of drug, for example, marijuana or LSD. There is drug dealing on campus. There is also a problem at elite schools regarding drug use. The parents see the police as interfering, even if they do not know where their children are. There is a general escalation of drug use amongst the public. An example was given a five-year old boy who was suspected of smoking marijuana; his parents also smoked marijuana.

According to the SANAB key informant, drug-taking is in part culture-based. Rastafarian mothers
use marijuana as a soothing agent for their babies. The Black culture, and White adolescents, more readily use marijuana. The White culture use ecstasy and LSD more frequently, with the Indian and Coloured culture using mandrax and crack. The raves are frequented mainly by Whites, although other cultures are beginning to attend as well. A list of the various substances encountered, together with the current prices paid for them, as supplied by SANAB, is set out under the relevant section in Appendix 2.

Marijuana can apparently be bought in many places in the city. The dealers are normally the head of a syndicate, who use runners to sell drugs. The runners don’t usually use drugs, as they are aware of the dangers. However, at times the dealer gives some youngsters free drugs for a while in order to get them interested, and then starts charging for the drugs. The youngster then has to turn to selling drugs in order to pay the dealer, and are physically threatened/assaulted if they don’t produce the money. The police rely on informers to tell them about dealings and drug use, but the necessary proof is required in order to prosecute.

The police present information about drugs at various schools, including the dangers, and the possibilities of arrest and a criminal record. Safe use is not advocated. In the perception of SANAB, learners at schools are usually overtly disinterested and dismissive. Children today are very well-informed, and know more than the police know about drugs.

5.5 A University Residence

The key informant, a Residence Life Officer, mentioned that he has not encountered much drug
use this year, but was aware of general drunkenness amongst students and there have been one or two allegations of marijuana use. He was also not aware of drugs other than marijuana or alcohol that are used by students.

Drug use is more obvious amongst the first year students, as there is a spirit of getting drunk in a crowd, along with the associated noise. Students from both the men and women towers go out, especially on a Thursday evening, and come back around two o’clock in the morning. The bus that transports students to nightclubs from campus promotes safe driving. Students would drink anyway, even if the bus was not in existence, and they would also drink and drive.

Students go to the Student Counselling Centre for help or they might refer a friend who is using drugs. Students would report drug use to the residence staff, if the students are concerned or disturbed by behaviour resulting from drug use. The residence staff would send a student to the Student Counselling Centre and/or the Campus Health Centre, but would talk to them first. The staff do not report students if they are found drunk on the grass, but action will be taken if students are found drinking in non-designated areas. This may involve a case being opened, and a tribunal being held.

According to the key informant, prevention of drug use at the residence is not an issue which the residence staff has considered, as they are more involved in developmental, academic and security issues.
Bickman & Rog (1998) describe a research design as

*an action plan for getting from here to there*, where *here* may be defined as the initial set of questions to be answered and *there* is some set of conclusions (answers) about these questions. Between *here* and *there* may be a number of major steps, including data collection and data analysis (p. 236).

The research in question was an holistic, single case study, based on the collection of qualitative, experiential data. Its focus was primarily descriptive and explanatory in nature, and accordingly aimed to describe and explain certain subjective experiences of drug-taking.

Qualitative research is multifaceted and challenging, due to its inductive, naturalistic approach to studying the subjective experiences and social processes of people and the settings within which they play out their lives. It also permits the researcher to proceed with a degree of flexibility, and to begin the process of study without specific hypotheses in mind that require rigorous, objective testing in order to arrive at a particular, predetermined outcome (Patton, 1990).
Qualitative inquiry is highly appropriate in studying process because depicting process requires detailed description; the experience of process typically varies for different people; process is fluid and dynamic; and participants' perceptions are a key process consideration (Patton, 1990, p.95).

Many researchers and critics regard case study research as being a soft option. The perception is that the data collected bears fruitful results only after a lengthy period of not only observation and interaction but also modification and adaptation and that, as such, there does not appear to be any particular design, or action plan, to such research. However, it is this design flexibility and adaptability which proves to be a distinct advantage in conducting qualitative case study research (Robson, 1997, Yin, 1994).

To enable one to study, and to subsequently understand and analyse, the subjective experiences and contexts of people, it is necessary for the researcher to be able, literally and/or figuratively, to step inside such contexts for a relevant period of time. This would be difficult to achieve utilising quantitative methodology, which generally does not take into account people's subjective perspectives of their specific contexts (Marshall & Rossman, 1989; Patton, 1990).

The advantages of qualitative portrayals of holistic settings and impacts is that greater attention can be given to nuance, setting, interdependencies, complexities, idiosyncrasies, and context (Patton, 1990, p.51).

Qualitative methodology was best suited to the study in question, which aimed to describe the personal, idiosyncratic and unique drug-taking experiences of an individual in various real-life
contexts and over a period of time, and endeavoured to explain such experiences from the perspectives of the both the participant and available psychological theory.

Qualitative methodology and case study research are easily accommodated on the same page, and are indeed complimentary to one another. Robson (1997), in keeping with the views of Yin (1994), describes a case study as

a strategy for doing research which involves an empirical investigation of a particular contemporary phenomenon within its real life context using multiple sources of evidence (p.146).

Therefore, the real life context is the common denominator in both qualitative and case study research. Since drug taking, as a contemporary phenomenon, occurs within the context of the real life world, it was relevant to utilise such methodology of research in order to gain an understanding of the context, taking into account its nuances and idiosyncrasies.

According to Yin (1994), a further advantage in selecting the case study method is that it is possible not to have specific, demarcated boundaries to the case, and that certain idiosyncratic factors peculiar to a particular setting may indeed serve to redefine such boundaries, and to contribute positively to the depth of understanding.

Case studies can contribute positively to research, especially in developing countries such as South Africa, which often have a myriad of social problems to contend with. To this end, Patton (1990) confirms that:
Case studies are manageable, and it is more desirable to have a few carefully done case studies with results one can trust than to aim for large, probabilistic, and generalizable samples with results that are dubious because of the multitude of technical, logistic, and management problems in Third World settings (p.100).

2. **THE SAMPLE**

The sample, or primary unit of analysis, for the research in question was an individual person, and, therefore, this study can be referred to as being in keeping with the classic case study (Yin, 1994).

Non-probability purposive sampling was the strategy selected in order to identify the unit of analysis, and exists as a strategy of choice for case study research (Miles & Huberman, 1984; Patton, 1990; Robson, 1997). This method of sampling is recommended because of the clandestine nature of drug-taking itself, and that non-probability sampling is best suited to research which is in-depth and qualitative (Terre Blanche & Durrheim, 1999). Operational construct sampling was also utilised in deciding on the specific unit of analysis to select for in-depth, information-rich study. Patton (1990) states that if particular slices of life, time periods or people are sampled due to their being representative of a specific theoretical construct, then operational construct or theory-based sampling is required for this purpose in order to study the construct. Therefore, the particular unit of analysis, or sample, for this research was defined as a Natal University (Pietermaritzburg) student, who used various substances, such as alcohol and/or drugs. Posters were placed around the university campus in order to attract potential research participants (*cf. Appendix 4*). One student responded to the poster, who was then
selected as the primary unit of analysis for the case study. Although it was hoped to extend the sample either in response to the poster or through snowball sampling, no further suitable subjects presented themselves.

One of the questions that Miles and Huberman (1984) put forward when considering sampling in a single case study is "If you choose one kind of person to interview...why chose this kind of person?" (p.42). In response to this question, it is stated that following the posters being displayed on campus, an unknown individual walked into my office one afternoon and enquired whether I was responsible for displaying the posters. My immediate response was to assume he was a particular university authority and was about to complain about the nature of the poster! However, when it transpired that he was a prospective participant in my research process, I immediately put up a "Do not Disturb" sign on my door and proceeded to conduct a very rudimentary interview in order to ascertain whether his life world would indeed prove to be information-rich and representative of the phenomenon of interest, which is drug-taking (Patton, 1990). Rory, as I have named the person for the purpose of this report, has been using a variety of substances since the age of 14, up to and including the present time, and he was a full-time student at the University of Natal (Pietermaritzburg) campus.

3. AIMS & RESEARCH QUESTIONS

3.1 Aims

By making use of the classic, individual case study in order to generate qualitative data which is
both descriptive and explanatory in nature, it was hoped that this study would throw light on
drug-taking experiences in order to understand more fully what factors predispose, precipitate
and maintain drug-taking in individual students. This may play a positive role in generating future
conceptual frameworks to prevent drug use, and to effectively treat drug-taking individuals.

3.2 Research Questions

Sutton & Staw (1995, in Bickman & Rog, 1998) state that theoretical propositions made at the
outset of a study constitute “a story about why acts, events, structure, and thoughts occur”
(p.234). Bickman & Rog (1998) also mention the importance and relevance of correctly and
succinctly constructed research questions and that they

could specify a complete and logical (but hypothesized) series of causal events, connecting
variables and constructs (p.234).

In order to address the aims of the study, and to endeavour to satisfy the above criteria, the
following research questions were formulated:

• What predisposing factors led Rory to start taking drugs?
• What precipitated his drug-taking?
• Why does he continue to take drugs?
4. **THE INSTRUMENTS**

According to Yin (1994), one of the most important requirements of a case study is that the researcher endeavours to make use of multiple sources of evidence. For the purposes of this research the following sources of evidence were obtained:

- Firstly, referring to Chapter 1, point 5, in this report, it was stated that five semi-structured open-ended interviews were held with key personnel of various organisations both on and off campus in order to gain a preliminary understanding of the present context of drug-taking. Notes were written pursuant to the interviews in order to capture the essence of the interviews (cf. Appendix 2).

- Secondly, two semi-structured, open-ended, focussed, in-depth interviews were held in collaboration with Rory. These interviews were tape-recorded, having gained Rory’s necessary informed consent, and subsequently transcribed (cf. Appendix 5 and 7).

- Thirdly, Rory wrote a diary for a period of one month, subsequent to the first interview, during which period he recorded in the diary his relevant feelings, thoughts and actions both during and following drug-taking episodes (cf. Appendix 6). He also spontaneously submitted a poem on the experiences of drug-taking, which he wrote during 1999 (cf. Chapter 5), as well as a letter addressed to himself reflecting on his drug-taking experiences (cf. Chapter 5). He also composed a time-line highlighting specific events and experiences from adolescence to the present (cf. Appendix 8). This was done merely to facilitate understanding of the time-frame of his various experiences, and, therefore, did
not form part of the actual data collection.

4.1 *Semi-Structured, Open-Ended Interviews*

After much study...three youths came before Halcolm to ask how they might further increase their knowledge and wisdom. During the first stage he sent them forth under a six-month vow of silence...they sat at the market in whatever village they entered, watching but never speaking. After six months in this fashion they returned to Halcolm.

“So,” Halcolm began, “...What have you learned on this your first journey?”

(The third youth said): “My mind is filled with questions. I kept wondering where the people came from and where they went. I pondered what they might be thinking and feeling as they came and went. I reflected on how they happened to be at this market on this day, who they left behind, and who came with them...”

Halcolm smiled. “You have learned the value of being able to ask questions...Go forth and question. Ask and listen. The world is just beginning to open up to you. Each person you question can take you into a new part of the world. For the person who is willing to ask and listen the world will always be new. The skilled questioner and attentive listener knows how to enter into another’s experience.”

— From Halcolm’s Epistemological Parables (as cited in Patton, 1990, p.277-278)

Referring to the above excerpt from *Halcolm’s Epistemological Parables*, by asking good questions, and by being a good listener, one can increase one’s knowledge about the world and “enter into another’s experience”. This, in a nutshell, constitutes the value of interviewing
Yin (1994) mentions question-asking and interviewing as being two relevant skills which are needed by researchers in order to maximise the effectiveness and benefits of data collection in case study research. The focus of the interview dictates the types of questions that are asked, and the listening skills one possesses further dictates not only the focus of the interview, but subsequent questions as well (Patton, 1990).

Semi-structured, in-depth, open-ended interviews have proved to be the most propitious manner in which to collect data for the purposes of the kind of research conducted here. Semi-structured interviewing allows the researcher to alter focus at relevant stages in the interview in order to accommodate significant issues that arise as a result of a research participant’s disclosures (Patton, 1990; Robson, 1997). The questions asked in the interviews with Rory have permitted him to tell his story from his own perspective. A qualitative case study permits a researcher to “enter into another’s experience” and life-world, thereby tapping into another’s feelings and thoughts, and past and present history relevant to the issue under study (Patton, 1990; Terre Blanche & Durrheim, 1999).

Patton (1990) and Smith, Harre & Langenhove (1995) also report the value of tape-recording interviews which allows the researcher to focus on the interview itself, the questions asked and her particular listening skills. It is also beneficial, albeit costly and time-consuming, to transcribe the interview in its entirety which assists in subsequent data analysis. The two in-depth semi-structured interviews conducted in collaboration with Rory were tape-recorded and transcribed in their entirety. To be in possession of a written transcript of exactly what transpired in the
interviews, has proved to be immensely valuable, especially in the data analysis stage, as it allowed for review as often as needed, and direct quotes could be extricated to elucidate salient themes and issues, in response to the particular research questions.

The five initial semi-structured, open-ended interviews with relevant key informants from organisations both on and off campus, (cf. Chapter 1, point 5), were not tape-recorded. As previously mentioned, notes were written immediately subsequent to the interviews, in order to capture the salient issues that emerged. It was not deemed necessary to tape-record these interviews since they were held merely for the purpose of placing the issue of drug-taking in context, and were not intended to be used for the data analysis stage.

4.2 **Documentation**

Diaries are a traditional method of data collection (Robson, 1997; Yin, 1994), and indeed serve to tap into relevant thoughts and feelings in an almost therapeutic and cathartic manner (Progoff, 1981). Robson (1997) states that a diary is “a kind of self-administered questionnaire...(which) places a great deal of responsibility on the respondent” (p. 254). He also notes, however, that there is a danger of mis-reporting by the research participant in an effort to please the researcher, or to place the participant in a positive light, and this needs to be taken into consideration at the data analysis stage, by cross-checking the data against other sources of data (such as interviews) for consistency and integrity. Bryman’s (1989, in Robson, 1997) method of writing a diary in keeping with the critical incident approach, in this case Rory having written diary entries during his drug-taking experiences, enhances the possibility and benefits of cross-checking in response
to the research questions in order to highlight prominent themes.

Rory's poem on his experiences of drug-taking during 1999, as well as his personal letter, are also acceptable research tools, and can be used in order to elucidate various themes, and to cross-check with relevant data inherent in the interviews and the diary (Patton, 1990).

5. **VALIDITY and RELIABILITY**

Yin (1994) states that the issue of ensuring that the case study is of an acceptable quality, and of academic benefit, lies with the question of whether the study can be classified as valid and reliable. This, especially in case study research, should occupy the researcher's efforts on a continuing basis throughout the research.

5.1 **Validity**

Validity of the data collected and the subsequent findings and analysis is an issue which is of the utmost importance in all research (Robson, 1997; Yin, 1994). Three tests of validity, as proposed by Yin (1994) should be upheld if the results of case study research are to be considered seriously.

- Firstly, the construct validity of a particular research project can be endorsed if multiple sources of evidence are used in the data collection phase, in order to establish a chain of evidence. This criteria has been satisfied, as semi-structured, open-ended interviews were
held in collaboration with various key personnel from different organisations both on and off campus, as well as with Rory. A diary was written by him for the duration of one month, and a poem and a letter submitted by him were analysed.

- Secondly, internal validity of the research has been satisfied by matching certain themes or patterns in the data analysis stage, for example, the influence of peers and parents on Rory's drug-taking, as well as by building relevant, alternate, explanations with regard to the specific research questions posed.

- Finally, external validity, or generalizability, was addressed in the research design phase by making use of alternate, complementary theories, those of Albert Bandura (1986) and Erik Erikson (1968; 1980), to explain the results. Yin (1994) states that by making use of single case studies, such as this one, it is plausible to illustrate or analytically generalize, as opposed to statistically generalize, to a particular conceptualization, particularly if alternate theories and multiple sources of evidence have been utilised.

5.2 **Reliability**

Yin (1994) suggests that in order to ensure that the results of case study research are reliable, the researcher should endeavour to compile a case study protocol during the data collection phase (cf. Appendix 9). This should include the research questions, as well as the questions to be asked in the interviews, and the general procedures to be followed in the process of collecting data. Also to be included in the case study protocol should be relevant reflections as to the eventual
compilation of the case study report, which will assist in anticipating any forthcoming difficulties in this area, as well as in organising the data in a clear and unambiguous manner in response to the research questions.

According to Yin (1994), a further procedure for ensuring that reliability is addressed, is to develop a case study database during the data collection phase (cf. Appendix 10). The collected data from all sources of evidence, such as the interviews and the diary, is synthesised and subsequently organised into relevant themes according to the research and/or interview questions set out in the case study protocol. This ensures that all salient themes are accounted for, that the creation of the actual case study report is facilitated, both in terms of structure and time, and finally that new understandings apropos the data are attained.

6. **THE PROCEDURE**

6.1 **Interview One**

During the course of June, Rory responded to the poster which was displayed on campus. I briefly assessed whether he would be a suitable candidate for the case study, by allowing him to discuss his drug-taking experiences with me, for example, exactly what type of drugs he had experimented with, when he started taking drugs and what he was taking at the present time. The relevant details of the research project were explained to him, the procedures that would take place, and what he would be required to do. He agreed to the procedure, and following this initial, rudimentary contact, an appointment date was set in order to interview him.
The first interview was conducted during June, 2000, in a specially designed interview room on campus. Its duration was approximately 90 minutes in length, and was tape-recorded with Rory’s informed consent, and with the understanding that if at any stage of the interview he was uncomfortable with any of the questions posed or with the manner in which the interview was progressing, he could indicate this to me and the tape-recording would be discontinued. I also afforded him the opportunity to choose a pseudonym for himself, in order to protect his identity and confidentiality purposes, and he chose the name “Rory.” The issue of confidentiality was also addressed. Rapport was established by initially discussing his university studies and by ensuring that he felt comfortable with the ensuing interview. I also asked him why he responded to the poster. I was in possession of a rudimentary case study protocol, and this facilitated the asking of questions, and allowed the interview to maintain its focus, although the sequence and actual wording of the questions did change, according to Rory’s particular focus at any one time.

I began the interview by asking the following broad question:

- Rory, perhaps we can begin by your telling me why you are here.

This was followed by the introductory preamble which led into the question stage:

- Rory, tell me about the story of your life - before you went to school, pre-school days, primary school days, high school days and now. Try to relate it to your drug use, if possible.
Rory's life story was prompted at the appropriate intervals in order to include accounts of relations with family, peers and teachers. Facilitative questions to this effect were incorporated at the appropriate intervals, and these were:

- When did you first take drugs?
- What drugs have you taken in the past and what are you taking now?
- How often did you take drugs in the past? And now?
- Where did you get the drugs from when you were at school? And now?
- Where did you take drugs when you were at school? And now?
- Tell me why you think you started drugs.
- Tell me why you think you are still using drugs?

The interview ended with discussions apropos his forthcoming vacation, and arrangements were made regarding his collection of the notebook which would serve as his diary. I transcribed the interview within two days, and as I have experience in transcribing, this did not prove to be a difficult task. The interview was then scrutinised for salient, recurring themes, which formed part of my case study database.

6.2 The Diary

Following the first interview held in June, arrangements were made with Rory in order for him to collect the notebook for the diary purposes. He collected the diary after the July vacation, and I explained the relevant procedure to him, and its purposes:
Rory, I would like you to write a diary for the duration of one month. This will entail recording your actions, thoughts and feelings before, during and/or after taking drugs and/or drinking alcohol. Don’t worry about the actual structure of the diary, for example, grammar, neatness, etc. Try to be as honest as you can in your recordings as this will assist me in subsequently analysing what you write, and making sense of it in relation to your drug-taking experiences. You do not have to write an entry every day, just whenever you feel that it would be relevant to do so. Do you understand what you have to do?

Further explanations and elucidations were given, where necessary, to ensure that Rory fully understood what was expected of him. I made telephonic contact with him approximately two weeks after this to ensure that he was writing the diary, and that he understood what was expected of him. Arrangements were made to deliver the diary to me after the appropriate time had elapsed, i.e. one month. After delivery, I perused the diary and incorporated the relevant themes into my case study database, for ease of analysis and report-writing at a later stage. Rory also spontaneously delivered a poem which he wrote during the course of 1999 which reflects his drug-taking experiences.

6.3 Interview Two

After Rory delivered the diary, a further appointment was made in order to meet for the final interview during September, 2000. The interview was conducted in the same interview room as the first interview, and was tape-recorded. The duration of the interview was one hour in length. The necessary rapport was established by discussing Rory’s university exams. The following
broad statement was posed in order to facilitate discussion:

- Reflecting upon the process of writing your diary, and of the previous interview, perhaps you would like to share any thoughts or ideas that you have in this regard with me.

After the interview, I mentioned the possibility of my contacting him again to allow him to proof-read the case study report for accuracy of the data that was collected, and this was subsequently done. The interview was again transcribed within the next two days, and scrutinised for recurrent themes, and entered into my case study database.

6.4 The Personal Letter

Following the personal letter to himself:
reflecting on a
less affected by
chapter of this
letter was to be

ernate data source;
tribute to the final
ctual content of the
CHAPTER THREE

THE CASE STUDY

Setting the Scene

The case study should take the reader into the case situation, a person's life ... allowing the reader to understand the case as a unique, holistic entity


1. *Rory's Early Childhood Years*

Rory is a 23-year-old postgraduate student on campus. Both he and his sister, who is 21, were adopted at birth. He has always known about his adoption, and felt that he “belonged.” to his adoptive family. As a child he had many friends, and was given everything he needed and sent to the best schools. He described himself as being “hyperactive, crazy and loud.” According to Rory, his parents were very conservative, as well as quite strict, especially his father. Discipline was at times metered out with the assistance of a wooden spoon or a parental hand. He felt as though his father was “out to get him” and described him as “the boss” or “the general.” He also felt that his father didn’t do enough with him as a child, as he always wanted to go hunting, camping and fishing with his father, but his father was not interested in doing those things.
2. **Rory’s Adolescent Years**

As adolescence approached, even though he was aware of the dangers that drugs posed, Rory said that he was keen to experiment with drugs, in order to be different, and perhaps for the mere fact that they were illegal. However, he stated that when an adolescent starts to ask certain questions, and people cannot answer those questions, or perhaps give different answers from what the adolescent anticipates or deserves, then the adolescent is more keen to experiment and to find out the truth for himself. “I was going through puberty and I was just becoming a teenager and teenagers just want to do those sorts of things.”

It was Rory’s opinion that his parents were also fair in that he was always allowed to drink, for example, wine at the dinner table, and in moderation. At the age of 14, his father left him in the company of older adolescents at a relative’s party on a farm, and he got drunk for the first time. When his father returned to the main farmhouse, Rory reflected that “I think he knew I was going to do it, because I was at that age.” Older adolescents were giving him drinks, and he reflected that in order to fit in, and perhaps because he was not legally permitted to drink, he accepted the drinks and he “wanted to experience what it was like to get drunk.” After that, he used to get drunk about once a month in the company of friends, and without his parents’ knowledge. When he was 15, for about a couple of months, he and his friends started stealing alcohol, got drunk and proceeded on a “vandalising campaign.” His parents discovered that he had disappeared from home one night, and even though they did not know what he had been doing, he was grounded after that. However, his friends continued to vandalise, and they were caught by the police. He stated that his friends then mentioned that he had also been involved, and he and his friends were arrested. He also said that “our parents managed to pay the people and pay off damages and stuff,”
so nothing was said about it again, but you know my parents were quite shocked…which is understandable. Then I went to this school when I was 16…and I didn’t see those people again.”

His high school grades were not good, but around the age of 16 he performed well, though he conceded that the examination papers were “leaked.” The school that he attended at the time was in his opinion very regimental, did not value individualism, and consequently he did not fit in. When his parents learned of his good academic performance, they allowed him to choose a new school thinking “so maybe there is something to this kid after all.” People were apparently more open-minded at the new school, and drugs were more readily available, and it was then that he experimented with marijuana for the first time. He later reflected that the friends he had at that time were mainly “the mopers and losers”.

Rory reported that he believes that peers do have a role to play in whether or not a person experiments and/or continues with drugs. “Everyone would like to feel at home, or sort of have their friends”, but it is up to the individual person, and their personality, whether he gets influenced by others or not. According to him, because he has always wanted to experiment with drugs, peer pressure did not play a major role in his drug-taking experiences. He always thought that his drug-taking was related to the fact that he was “in the in-crowd, and I was like one of the big guys in school…and people (would say) ‘check, you’re stoned now’…that was quite cool.” He never took drugs in order to rebel, but he said that he enjoyed what he was doing, and it was in response to what others were doing at the time, together with feeling a sense of belonging.

He reflected that his father would perhaps have described him at this stage as “basically a waste of rations.” Rory said that his father was very strict and an authoritarian, and he felt that his dad
could've been “more of a father”, and more honest with him regarding the dangers of drugs, which in turn may have served to influence his decision-making around drugs. He stated that “I would’ve liked my father to have maybe been able to explain certain things to me, about drugs maybe...I never knew about the other side of life - the drug side - so I guess if I had a better understanding of the dangers or what can happen.” His relationship with his father broke down during adolescence, as “I had big issues with my father.” He felt that maybe they should have attended counselling sessions together in order to address the issues, although his father would never have agreed to this. His mother “was there for me more” and they did have a relationship. They were able to communicate with each other, even though he and his mother used to fight. According to Rory, he and his sister always used to fight, as well. It was Rory’s opinion that parents have a large role to play in whether or not their child has a problem with drugs. “Parents will be the first ones to see how their children are going to turn out. Parents can generally try and shape the way their children behave and act.”

His parents were divorced when he was 16, and as a result, “my whole concept of society...family and just the way you’re brought up, that the family’s like a unit, and when that crumbles and is destroyed, there’s really nothing left...” He accordingly felt that he was on his own from an early age, and that he could basically do what he wanted. It was his opinion that, because he didn’t have home security and comfort, he sought it elsewhere - which could have been within the drug scene. He reported that he felt very restricted at home, but when his parents divorced, he became more independent and free, as his mother did not have much control over him.

When Rory was about 17, one of his gym instructors gave him marijuana “to make him work harder.” However, he lost interest in gym because he was “so stoned.” After that, he only went
to gym to take marijuana with his instructor. When Rory was about 18, the police arrived at school in order to promote drug awareness, but he presumed that everything they had to say, for example, about the side-effects of certain drugs, was not true. At that stage he was only using marijuana. One of his friends started to take acid, and Rory then felt compelled to also try it, which he did. The experience was “really, really, brilliant” - as though everything in the world was one unity.

3. Rory's University Days

Rory's experiences with drugs escalated when he arrived at university. He could obtain marijuana anywhere, as well as on campus. Other drugs were readily available from drug dealers in town, provided one had the money to pay for them. He stated that many drug dealers are ex-policemen because “they know the whole thing, how it all works...it’s really corrupt.”

He started abusing diet tablets, taking, in his words, “seven or eight thins on one night”, and chloroform. He felt that as long as his studies were not adversely effected, if he was taking drugs in moderation, and if he was in control of the drugs, he did not have a problem. He then got involved in the rave scene, and he felt a sense of belonging and unity - “and maybe I felt that whole family thing again.” At the end of first year he was arrested, being found in possession of marijuana. He was convicted, but realised that he must have been addicted because he could not break the habit. He used to smoke marijuana daily. At this time, his girlfriend ended their relationship because of his involvement with drugs. He became involved with someone else, and together they regularly took drugs, including ecstasy, acid, speed, marijuana and alcohol, and he
found that “I could only relate to her when I was on drugs.” Things started getting out of control when his girlfriend started stealing money presumably in order to support her drug habit. He also got involved in that.

Rory reflected that drugs “started to show me a nasty side of life” and he realised that no-one really cared about anyone else, besides themselves. He could not achieve the positive experiences with drugs that he used to achieve, such as good hallucinations whilst taking LSD and “mushrooms”. The hallucinations allowed him to feel “one with the world, one with society, one with everything.” At times, he felt as though drugs “give you that edge, and you think you’ve got something that other people don’t have.” Later he discovered that drugs did not always give him that edge that he thought they did.

He reflected that there is a culture of drinking on campus, and this is accepted by students. Whilst at university, students have limited responsibility and must, therefore, “do all their partying, do all their messing around” at university. Students have in the past been arrested for smoking marijuana, and he was opposed to this. He would like to see marijuana decriminalised, as he does not view the smoking of marijuana as a serious offence. According to Rory, marijuana can play a therapeutic and relaxing role in one’s life, and for some people, serves to act as a means of escape. He felt that this is preferable to indulging in alcohol, and vandalising property on campus. He reported that this view was also upheld by some life resident officers on campus at a particular time. Marijuana also allowed him to become introspective, and for this reason he sometimes smoked it on his own. He reported that certain ground staff and employees on campus have in the past been, and still are, drug dealers in order to increase their income.
Rory met his biological mother for the first time last year, and he has always had the idea that his biological parents "would be this perfect family." However, his biological mother was not what he expected, and he wishes that he had never met her.

4. **Rory's Present Perspective**

Rory stated that he responded to the poster because "...I think there's not enough research and knowledge known about the certain issues we're going to be discussing, and I think as much which is known about the subject as possible will benefit everybody in the long run, and I think it is only certain sectors of society which actually have a say, and I believe that everyone should actually be able to have a say, and we should get everybody's views across, and not just...have people in power, and old-fashioned sort of views I like to call it coming across. I think that with my views....maybe something can....benefit everyone in the future." He also mentioned at a later stage that "I've tried to be as honest as possible, otherwise there's no point doing it."

At the moment he feels as though he does have a problem with alcohol, and that alcohol tends to make him aggressive at times. He feels that Pietermaritzburg is boring and that there is nothing to do, so drinking tends to be a social affair, as he always drinks with friends. However, he also feels as though the alcohol is beginning to affect his studies, especially his memory, as he finds it difficult to concentrate after a period of drinking, and "you tend to think slow, so everything operates slow."

As an example of a typical recent drug-taking session, Rory consumed over the space of one
evening, one ecstasy tablet, 10 beers, three quarters of a bottle of rum, four tots of whisky, and
one marijuana joint. During this particular drug-taking experience, he reported that he "sometimes
wonder why I even do this. Probably chasing or trying to get back the original euphoric
experiences I once used to get." On another occasion, he consumed five beers and 20 tots of
brandy and stated that he is "starting to feel really happy and elated. Getting more confident,
could take on the world or anybody." He has driven when he was over the limit because "you
think you’re not going to be caught." Although he has experimented with cocaine, he has not as
yet used heroin, which he felt he may not be able to control. As his friends still take drugs and
alcohol, he also participates in such activities because "it’s a bit blind if you’re at a party and
everyone’s drinking and you’re not."

At the moment, he is quite involved in scuba-diving, and it is "like being on acid or
mushrooms...the colours under the water...I think that’s my new fix." However, he felt that what
he is currently doing, apropos alcohol and drugs, is "kinda normal", although viewed against his
parents’ perspectives, maybe it is not normal. He felt that his alcohol and drug-taking behaviour
is related "to the fact that I’m still at university."

He felt that he no longer fits into the rave scene, and is now "on the outside looking in."
According to Rory, people must find out for themselves what the dangers of drugs are, because
if someone is keen to experiment, he will, regardless of the dangers and what people say
otherwise. At the moment he said that he doesn’t really fit into any particular group, which he is
content with, and he is now looking towards fitting into the corporate world next year. At the
present time, he is satisfied with his life and his current situation with respect to drugs, and does
not feel the need to take the same quantity of drugs that others are taking. He reported that he
also enjoys taking drugs on his own, or with one or two friends as "it's your own experience, and no-one can sort of contradict it." He reported that drugs give him a sense of confidence and a feeling of well-being. In a sense he felt as though he is in control of his experiences, and he can basically enjoy them for what they are. He said that his outlook on life has changed, and he is now looking to the future and wants to make his own life.

Rory felt as though the drug scene is "not one big unity," and it is actually just an illusion. It was his opinion that one's drug friends are not true friends, and it is only the drugs that serve as a common denominator in the relationship. He stated that drug dealers give people what they want, and as long as there are drug dealers and drugs, drug prevention will always be very difficult. Even if people are warned about the dangers of drugs, they will still experiment.

Rory's adoptive mother and father were preparing to live abroad, in different countries, and his sister was already living overseas, so he was feeling "deserted" again, and realised that he is on his own if he wants to achieve anything.
...I guess it’s very difficult to pinpoint one and to say that’s the sole cause.
I guess nothing with a person ever is the sole cause of something ... it’s probably a whole host of different factors, and that’s what people say (Rory).

The analysis and discussion that follows is intertwined with a brief, but relevant review of the literature for ease of reference, and to allow the reader to make sense of Rory’s drug-taking in the context of both theory and previous research.

1. WHAT PREDISPOSED RORY TO TAKE DRUGS?

1.1 Bronfenbrenner’s Ecological Theory or $B = f(PE)$*

According to Bronfenbrenner (1980), what is important in any understanding or interpretation

of a person's life history, is how he perceives his activities, roles and interpersonal relationships within such history. It should, therefore, be noted that throughout both interviews, and the diary, what was recalled was Rory's perception and interpretation of his activities, roles and interpersonal relationships, and not how all three were in a hypothetical objective reality. This is significant not only across all five levels of systems, but also throughout the predisposing, precipitating and maintaining factors of Rory's drug-taking experiences.

The particular microsystem which has predominated in Rory's account of his childhood and early adolescence is that of his nuclear family, and this will form the focus of the present discussion, even though other microsystems in operation at the time may also have predisposed Rory to start taking drugs.

According to Erikson (1980) one of the main agents of socialisation during early and late childhood is the family. It is, therefore, pertinent to suggest that the activities, roles and interpersonal relationships, including perceived closeness of its members, in a particular family during that time, may play a part in determining how a member or unit within that family will experience the ecological transition from childhood into adolescence (Brook, Whiteman, Finch & Cohen, 2000; Macoby, 1992). Macoby (1992) states that

*events that occur in the context of parent-child interaction affect children's social behaviour in other settings and at later times (p. 1015).*

Parenting style, which in effect defines the roles of the parents in relation to the child, is one aspect within a family which has been advanced as being a possible predisposing factor in
adolescent drug use and associated delinquent behaviour (Kimmel & Weiner, 1995; Simons et al., 1991). Authoritarian parenting may be perceived by the child as being unfair, unduly strict and restrictive, and this authoritarianism may, in turn, precede discontentment and resentment on the part of the child. This style of parenting may also result in difficult interpersonal relationships between parents and child, and this difficulty may persist into adolescence and beyond, forming part of Rory’s chronosystemic level of interrelatedness. Rory stated that “I tend to think they were quite strict...I used to get hit when I was a child. I always felt like he was out to get me....put me down. Instead of trying to be such an authoritarian he could’ve been more a father.”

A further factor that has been associated with the predisposition to start taking drugs is found within the microsystem, and is related to family functioning and structure (Brook et al., 2000; Hawkins, Catelano & Miller, 1992; Pandina & Schuele, 1983). If a family is seen as being a well-functioning unit, a child within that unit is at a reduced risk to start taking drugs. This is confirmed in Rory’s instance, as he stated that “I had big issues with my father...and my mother we used to fight, and my sister we always used to fight, so I realised I was on my own from a very young age.”

Rory also mentioned that he felt as though his father* never did enough with him as a child. According to Rory, his father was in pursuit of wealth, power and status. It could, therefore, be hypothesised that due to his father’s pursuit of the above, which may have emanated from his place of employment, it was Rory’s perception that his father had less time to spend with him.

* All references in this report to Rory’s father, mother, sister, or family refer to his adoptive father, adoptive mother, adoptive sister and adoptive family, unless specifically indicated to the contrary.
Bronfenbrenner posits that

...whether parents can perform effectively in their child-rearing roles within the family depends on role demands, stresses, and supports emanating from other settings (p. 7).

Therefore, this exosystemic level of interconnectedness may have had a part to play in reducing father-son interaction, and accordingly may have increased the risk of Rory seeking meaningful interaction elsewhere, for example, in the peer group, which served to form part of his mesosystem (Kimmel & Weiner, 1995; Marcus, 2000). Baumrind & Moselle (1985) and Spooner, Mattick & Howard (1996) postulate that the peer group is an increasingly significant means of socialisation, and to this end, Rory mentioned that during his childhood years, and beyond, he “had lots of friends. I’ve never had a problem with friends.” He also stated that “because I didn’t find that security or comfort there (the family), maybe I did seek it elsewhere.”

Bronfenbrenner’s conception of the significance of joint activity dyads is relevant at this point. It was Rory’s perception that there was a paucity of joint activity dyads, especially the father-son dyad, in his childhood. According to Bronfenbrenner (1980)

The developmental power of a joint activity dyad derives from the fact that it enhances, and thereby exhibits in more marked degree, certain properties that are characteristic of all dyads (p. 57).

The properties that are peculiar to all dyads, namely, reciprocity, balance of power and affection, will be discussed briefly in order to illustrate their significance as further possible predisposing
Firstly, reciprocity, according to Bronfenbrenner (1980), affords a young child the opportunity to acquire appropriate interactive and interdependency skills, both of which can positively influence present and future interpersonal relationships (Kimmel & Weiner, 1995; Macoby, 1992; Scheier, Botvin, Gilbert, Griffin & Diaz, 2000). Secondly, balance of power is a further property of dyads which could be significant in this instance. Bronfenbrenner states that

...the optimal situation for learning and development is one in which the balance of power gradually shifts in favour of the developing person, when the latter is given increasing opportunity to exercise control over the situation (1980, p. 58).

Rory mentioned that his father was "always the boss" and that "you could never argue. It was just do it! And as soon as you asked 'why' that was World War Three. I could imagine him being the general and me being a soldier." Accordingly, it appears as though, from Rory’s perspective, the balance of power was unequal - in favour of his father - and that Rory consequently felt that he was not in control of the situation, which, according to Bronfenbrenner (1980), is not conducive to learning and development. This is also in accordance with the concept of authoritarian parenting, where the parents are viewed as being unduly restrictive and uncompromising in their interaction with a child, and subsequently imparting a sense of powerlessness in the child (Baumrind & Moselle, 1985; Santrock, 1992). Macoby (1992) states that

simple unqualified power assertion seems effective for immediate behavioural control but appears to undermine children’s progress toward becoming independently prosocial and
Finally, the third property of a dyad is that pertaining to affection. Bronfenbrenner (1980) states that as participants engage in dyadic interaction, they are likely to develop more pronounced feelings toward one another, (which) may be mutually positive, negative, ambivalent, or asymmetrical (p. 58).

According to Rory, if his father had indeed interacted more with him as a child, he could’ve been “more a father” which may have served to foster mutually positive feelings within the dyad. However, in their negative interactions with each other, this only enhanced the negativity present in the dyad (Bronfenbrenner, 1980). Therefore, the interpersonal relationship of father and son appeared to be based on a negative reciprocity and unequal balance of power, which may have predisposed Rory to start taking drugs.

Lo (2000) states that if a child is allowed to drink in the presence of his family, this may reduce the risk of his indulging in alcohol at a later stage, as it permits the child to learn appropriate drinking habits within the safety of his family. However, this may be contrary to Rory’s experiences, and may have in turn served as a predisposing factor in his drug-taking, particularly alcohol, experiences. He mentioned that “I was always allowed to drink ... in moderation in front of my family ... wine at the table and all that.” He also stated that his parents “allow[ed] me to experiment with alcohol and stuff, so it was never restricted, and my dad always had the philosophy - like, if you do restrict it, it will become a problem.” Therefore, his parents’ particular
values regarding Rory's initiation into drinking, which constitute factors present at the macrosystemic level, may have predisposed him to start drinking and taking drugs on a more regular basis (Kandel, 1985).

Rory also mentioned that as he knew he was adopted, he had always hoped for "this other family thing that I would have if I found my biological parents...I had this...idea that they would be this perfect family." Therefore, this chronosystemic level of interrelatedness appeared to pervade and affect his experience of childhood and adolescence, and perhaps served to further alienate him from his adoptive family, which could also have caused him to seek a new connectedness and a sense of belonging within his peer group (Calabrese, & Adams, 1990 in Spooner et al., 1996; Kimmel & Weiner, 1995).

Throughout the preceding discussion, numerous cause and effect relations have been hypothesised and presaged. However, what should be borne in mind is that in keeping with the ecological model of Bronfenbrenner (1980), and Kurt Lewin's equation, this process of cause and effect is by no means a linear one...

...since the environment also exerts its influence, requiring a process of mutual accommodation, the interaction between person and environment is viewed as two-directional, that is, characterized by reciprocity (Bronfenbrenner, 1980, p. 22).

This notion of reciprocity is supported by Reed & Rose (1998), who posit that there are many reciprocal causal links among particular phenomena, and that it should not be assumed that such causal links are single and linear. Such an assumption could in turn result in a misinterpretation
of the phenomena under study.

2. **WHAT PRECIPITATED RORY'S DRUG-TAKING?**

2.1 *Bronfenbrenner's Ecological Theory*

Bronfenbrenner (1980) describes an ecological transition as

...occur[ring] whenever a person's position in the ecological environment is altered as the result of a change in role, setting, or both (p. 26).

It is significant that Bronfenbrenner's concept of ecological transitions also coincide with what may be construed as precipitating factors in Rory's drug-taking experiences, and which also constitute the formation of mesosystems. To this end, two major transitions will be discussed in an attempt to elucidate the factors that precipitated his drug-taking: Rory's first experience in drinking alcohol at 14 years of age and his first "hard" drug experience at 18 years of age.

The first major factor that may have precipitated Rory's drug-taking is related to his experiences which occurred at a relative's party when he was 14 years of age. This constituted both a change in role and setting, and therefore a systemic occurrence as micro- was transformed into the mesosystem. Finding himself interacting with older adolescents, away from the activities and interpersonal relations of his primary microsystem, he was, in his perception, afforded the freedom to undertake certain activities in the role of a pseudo-adult, and "to experience what it was like
to be drunk" (McWhirter et al., 1993). He also mentioned that “I was below the drinking age...” and this perception of his particular role in society at that time, which was contrary to the laws governing the age an individual may legally consume alcohol and which formed part of the exosystemic level, may have precipitated his drinking at this time (Epanchin & Paul, 1987). It is also noteworthy that the values which his father appeared to hold regarding Rory’s initiation into drinking, from the perception of Rory, may also have given him the go-ahead to experiment more freely with alcohol, which formed part of the macrosystemic level of interrelatedness (Epanchin & Paul, 1987; Kandel, 1985). Rory stated that “my Dad...I think knew I was going to do it [get drunk], because I was at that age, and...left me and he went back to the main farmhouse.”

His parents’ parenting style, although perceived by Rory as authoritarian, also appears to have allowed Rory a wide margin of freedom with respect to certain issues, which style could also perhaps be described as somewhat permissive. Lamborn et al. (1991) found that adolescents who had permissive parents were more likely to engage in delinquent behaviour and, for example, to use drugs. Rory stated that “they were always fair...to allow me to experiment with alcohol and stuff, so it was never restricted.” This, together with the fact that Rory was left at the party at the age of 14 to “experience what it was like to be drunk”, can perhaps be viewed as a lack of parental monitoring during Rory’s early adolescence, and may also have precipitated his drinking. A study carried out by Steinberg & Fletcher (1994) demonstrates that parental monitoring was significant at the initiation stage of adolescent alcohol and drug use, and that adolescents who were not properly monitored were at greater risk in using drugs in collaboration with peers.

A further macrosystemic influence at the time which may have precipitated Rory’s drinking, is related to the culture of the particular peer group present at that party, which appears to have been based on the joint activity of the consumption of alcohol (Kandel, 1985). Therefore, the
values which the members of the peer group were perceived to espouse, were consequently internalised by Rory, and which, in turn, formed part of his macrosystem.

Referring to the second major precipitating factor in Rory's drug-taking experiences, it is also evident that it constituted and coincided with a significant ecological transition during his adolescence at the time. His transition into "hard" drugs at 18 years of age, as a result of his friend having experimented with "acid", constituted a change in role, from experimentation with alcohol and marijuana, to experimenting with acid. Therefore, under the influence of another microsystem, which in turn ushered in a mesosystem, this perhaps precipitated his experiences with other drugs, especially when he entered university (Epanchin, & Paul, 1987; Kandel, 1973, 1985; Steinberg & Fletcher, 1994). "It led from one thing to another and eventually I'd tried a lot of different things, and anything and everything."

Although Rory was legally an adult at 18 years of age, the punitive laws governing the use of illicit drugs at any age were still in operation. These were part of the exosystem, but were not perceived by Rory as a deterrent, and their prohibitive nature could also have served as a temptation (Epanchin & Paul, 1987; Newcomb & Bentler, 1989). He reflected that "maybe just because people said that it was illegal and it was bad that that's why I wanted to do it..." Therefore, the particular values he appeared to hold, as part of the macrosystem, may also have contributed to or influenced his drug-taking at that stage.

It should also be mentioned that, in keeping with Bronfenbrenner's theory, whatever appears to have formed a causal, linear link both intra- and inter-systemically, is both bidirectional and reciprocal. Therefore, the activities that he participated in within the peer group when he was 14
years of age may not only have precipitated Rory’s drinking experiences, but Rory’s mere presence may have in turn affected the behaviour of the members within that peer group, which behaviour may in turn have influenced Rory.

...the developing person is viewed not merely as a tabula rasa on which the environment makes its impact, but as a growing, dynamic entity that progressively moves into and restructures the milieu in which it resides (Bronfenbrenner, 1980, p. 21).

2.2 Bandura’s Social Learning Theory

Bandura’s notion of observational learning and modelling, together with perceived reinforcements for particular behaviour, is notably relevant in attempting to identify and explain the precipitating factors in Rory’s drug-taking experiences.

Rory mentioned that when he was 14 years of age, his father left him at a relative’s party in the company of older adolescents, whereafter his father returned to the main farmhouse. He stated that it was at this party where he got drunk for the first time, and this may have consequently precipitated his later experiences with alcohol. Research has shown that the age of initiation into drinking serves as a contributing factor as to whether or not the adolescent will continue drinking, or will have a problem with drinking (Lo, 2000). The older adolescents served as models for the initiation of his drinking at that time, and they may have vicariously reinforced his desire to drink (Akers & Lee, 1996; Kandel, 1985). Not only was Rory observing them consuming alcohol, but some of the adolescents were already 18 years of age, and he accepted the drinks “because it was
only a thing that adults could do...so, maybe I felt I’d be grown up, or something.” Therefore, the characteristics of the adolescents served to satisfy the requirements of appropriate models. Not only were they older than Rory, but this afforded them a degree of status from his perspective. Their actions, the drinking of alcohol, were of sufficient functional and predictive value to Rory, as he stated that he wanted to get drunk and that everyone else was drinking, and the adolescents were then seen as a means to satisfy this desire. This also ensured that observational learning would take place (Bandura, 1986).

Rory mentioned that he also accepted the drinks from the adolescents “maybe just to fit in” and “because everyone else was doing it” (Akers & Lee, 1996). This served as specific motivating factors in his desire to drink alcohol on that particular occasion. He also stated that “I wanted to experience what it was like to be drunk” and so this further motivating factor, together with the presence of the older adolescents consuming alcohol, paved the way towards satisfying that desire. Although his statement that “I probably vowed never to drink again, because I got so drunk...” should have served as an inhibitor for future similar drinking episodes, it in actual fact served as a positive reinforcer, as he reflected that he would probably “get drunk once a month...I didn’t see the point in drinking alcohol unless you were going to get drunk” (Bandura, 1986).

Rory’s experimentation with marijuana at 16 years of age, and his continued use of marijuana, may have encouraged him to use other forms of illicit drugs, for example, acid and ecstasy, at the age of 18. This view is supported by Fergusson & Horwood (2000) who found that adolescents who use marijuana, especially in collaboration with peers, are more likely to experiment with other forms of illicit drugs at a later stage. It is possible that Rory’s marijuana use acted as a positive reinforcement for further experimentation with drugs such as acid and ecstasy.
A precipitating factor for Rory's experience with hard drugs at 18 years of age appeared to be related to the fact that Rory's friend experimented with acid. Rory stated that "so, after he'd done it, then I wanted to do it" (Akers & Lee, 1996; Curran, White & Hansell, 2000). Therefore, his friend's experiences with acid served as a positive vicarious reinforcer for his desire to take acid as well. It has been documented that it is the influence of peers, rather than parents, that determine a person's first experiences with hard drugs (Kandel, 1985). Rory stated that his first acid experience was "really, really brilliant", and this may have served as a positive reinforcement for future experimentation with other types of drugs (McWhirter et al., 1993). He mentioned that after his first experience with acid "now I was encouraged myself to do more...I had a friend...he regularly took ecstasy...so I'd take the odd half..."

2.3  *Erikson's Psychosocial Theory*

Rory described his early adolescence as "I was going through puberty and I was just becoming a teenager and teenagers just want to do those sorts of things...", so he was, therefore, aware of his changing roles and views of himself at this stage. However, when his father left him at 14 years of age in the company of friends at a relative's party, he stated that "my Dad I think knew I was going to do it, because I was at that age..." Therefore, his father's expectations of Rory "at that age", together with the fact that he was "just becoming a teenager" heralded a possible identity confusion from Rory's perspective. This identity confusion, according to Erikson (1980), may cause the adolescent to over-identify with members of a particular peer group or clique and in so doing to temporarily lose his own identity in the process, and then to become more susceptible to behaviours and attitudes present within the peer group, such as drug taking (Berk, 1997;
Santrock, 1992). Rory mentioned that when he got drunk for the first time at 14 years of age, he did so probably to “be different” and to “just fit in”. Thus, this desire to be different could in turn have confirmed his identity confusion and temporary loss of identity. Schuckit (1998) states that “each type or category of drug offers the chance to ‘be or feel something different’” (p. 25).

However, was his desire to be “different” satisfied by his involvement in a peer group which participated in the same activity? Therefore, was he actually being “different”? (McWhirter et al., 1993). Rory’s response to this question was that “but you think you are as well, even in the drug scene.” Rory’s desire to be different may have also correlated with a striving for unconventionality and non-traditionalism, which may place the adolescent at a higher risk for drug use (Brook et al., 2000; Newcomb & Bentler, 1989).

His aspiring to “just fit in” further confirmed the search for a new identity within his peer group and then to over-identify with them. He was then likely to participate in the activities of the group since he has subsequently over-identified with their identity. Rory’s desire to “just fit in” has been a prominent and significant theme throughout his adolescence, particularly when faced with the possibility of joining a new peer group, and this parallels Erikson’s psychosocial stage of identity versus identity confusion (Erikson, 1980).

Even though parents are one of the main agents of socialisation during early childhood, they continue to play an important role during the early adolescent stage even though, as the influence of the family decreases, the influence of peers increase (Dishion, Patterson, Stoolmiller & Skinner, 1991; Erikson, 1980). It is possible that the perceived authoritarian parenting style of his parents resulted in Rory’s difficulty in achieving ego identity together with a real sense of his new roles
in society (Macoby, 1992). Erikson (1980) states that

…it is of great relevance to the young individual’s identity formation that he be responded to, and be given function and status as a person whose gradual growth and transformation make sense to those who begin to make sense to him (p. 120).

Rory mentioned that “I realised I was on my own from a very early age”, and that “I had big issues with my father, because of how different we were...” Rory stated that his father would have described him during his adolescence as being “basically a waste of rations...off the rails”. Therefore, Rory’s perception of himself and his roles at that stage, would not only hinder the development of ego identity, but would also not have been conducive to the formation of healthy self-esteem. Erikson (1980) suggests that

Thus, self-esteem...grows to be a conviction that one is learning effective steps toward a tangible future, that one is developing a defined personality within a social reality which one understands (p. 95).

It is well-documented that self-esteem is indeed a significant factor in adolescence in determining whether or not adolescents partake in activities such as drug use (Marcus, 2000; Newcomb & Bentler, 1989; Scheier et al., 2000; Wasson & Anderson, 1995; Young & Werch, 1990).
3. **WHY DID RORY CONTINUE TO TAKE DRUGS?**

In an attempt to respond meaningfully to this question, it is necessary to explore both past and present incidents as possible reasons for Rory's continuance of his drug-taking experiences.

3.1 **Bronfenbrenner's Ecological Theory**

In keeping with the relevance of Bronfenbrenner's theory in attempting to explain certain factors which may have prompted Rory to continue taking drugs, three specific ecological transitions will be discussed and explored: his entry into his new school at 16 years of age; his parents' divorce at 16 years of age; and his entrance into university.

Rory's entrance into his new school when he was 16 years of age heralded, in his perception, the discovery that the school itself appeared to be "more open-minded" and that this permitted a degree of freedom. Therefore, the particular ethos within this mesosystem constituted the level of the macrosystem, which may have contributed to Rory's continuance of his alcohol and drug-taking experiences within a scholastic ethos espousing open-mindedness and freedom. Marcus (2000) reports on certain therapeutic boarding schools in the United States of America for children who were experiencing difficulty with, *inter alia*, drugs. He suggests that a decline and/or elimination in drug use in the schools was due to strict rules and highly organised structure. Therefore, perhaps Rory's involvement in a school which espoused open-mindedness and freedom did have a role to play in maintaining his drug-taking.
The second ecological transition that is relevant in the discussion of factors which may have maintained Rory’s drug-taking, pertains to his parents’ divorce when he was 16 years of age. Therefore, Rory’s primary microsystem, consisting of $N_{[Rory]} + 3$ [father, mother and sister] was reduced to $N + 2$ [mother and sister]. This presaged an ecological transition within the primary microsystem itself - a change in roles following the divorce, which change he perceived as negative (Demo, 2000). Rory stated that “just that my whole concept of society, religion, family and just the way you’re brought up that the family’s like a unit, and when that crumbles and is destroyed, there’s really nothing left.”

Rory mentioned that after the divorce, his mother “tried to control me, but I knew she couldn’t” and that she “hasn’t always had the finances to give me what I need”. This is significant in that his mother’s role vis a vis Rory changed following his father’s departure from the family. Bronfenbrenner (1980) states that

Placed in the unaccustomed position of the family head, the mother often finds it necessary, because of her reduced financial situation, to look for work.... The children, in the absence of a father, demand more attention, but the mother has other tasks that must be attended to. In response the children become more demanding (p. 73).

This contention was confirmed in a study conducted by Nielsen (1999), which suggests that mothers who have the responsibility of bringing up, and supervising, their children, particularly sons, experience difficulty in controlling them, and in so doing impart a degree of power onto the children. Although Rory perceived his parents as adopting an authoritarian parenting style during his early childhood and adolescence, perhaps at this stage of his adolescence, his mother had
adopted a permissive style of parenting due to changed family circumstances, and this may also have contributed to the maintenance of his drug use (Lamborn et al., 1991).

Bronfenbrenner (1980, p. 74)) asks the following question in response to whether divorce has long term effects on children and adolescents:

"Is there any evidence that separation and divorce leave their mark on the behaviour of the child in other settings and at other times?"

Bronfenbrenner’s addition of a fifth level of system, namely the chronosystem, was perhaps, *inter alia*, in an attempt to respond to his question in the affirmative (Bronfenbrenner, 1986). However, separate studies conducted by Nielsen (1999) and Demo (2000) show that adverse effects following a divorce, are not necessarily a consequence to the divorce, but that they may in fact precede the divorce, and in Nielsen’s (1999) study, it is suggested that sons are more adversely effected than daughters. This is evident in Rory’s description of the family structure prior to the divorce. Rory stated that “I had big issues with my father...my mother we used to fight, and my sister we always used to fight...there was just always this tension...” O’Connor, Caspi, deFries & Plomin (2000) found that children whose adoptive parents did not get divorced experienced fewer behavioural problems, including drug use, than children whose adoptive parents did get divorced. Interestingly, in the same study, it was shown that adoptive parents were less likely to get divorced than parents who had not adopted children. However, this was not the case in Rory’s family.

Rory’s mention of the deleterious and long-lasting effects of the divorce that were imposed on him
on two particular occasions, are noteworthy. The first occasion related to his participation in the rave scene during his university years. He stated that “I felt like it was one big unity, and this was where I belonged, and maybe I felt that whole family thing again.” Therefore, his experiences within the rave scene ushered in thoughts around what he had lost as a consequence to the divorce. The second, more recent, occasion referred to the fact that all the members of his family, his primary microsystem, were presently preparing to emigrate, and that consequently “I’m in a way feeling deserted - again - but it’s always been like that.” Accordingly, his desire for a sense of belonging in response to feelings of desertion, could be suggested as having manifested as a result of possible adverse long-term effects consequent to, as well as predating, the divorce (Demo, 2000; Nielsen, 1999).

The third, and final, ecological transition that will be explored is Rory’s progression into university. According to Rory, the availability of drugs on campus was greater than he had experienced before, and that “there’s a big thing at varsity about getting drunk all the time...and that’s sort of accepted.” (Weiss & Schwarz, 1996). The “big thing at varsity” constituted a macrosystemic phenomenon, as it related to the general value system pervasive in the university, as perceived by Rory. However, according to Rory, the university’s rules regarding drinking and taking drugs, on the level of the exosystem, did not appear to deter students, including Rory, from continuing with their drug-related experiences. The reciprocity pertaining to attitudes and activities that was evident within the mesosystem, only served to exacerbate Rory’s drug-taking experiences, as he mentioned that “when I got to university, that’s where my experiences with drugs sort of really took off.” He also stated that the involvement of the police in attempting to restrict drug-taking and dealing among university students was ineffective, and that “all the main dealers in this town, the guys who run it, and run the whole scene, and give to runners to move
the stuff, are all like ex-cops...it’s really corrupt and a bit disheartening... when it’s for ulterior motives, meaning like [when cops] are there to get it for themselves, or when they do it themselves.” Therefore, this apparent ineffectiveness and corruption, as perceived by Rory, at the level of the exosystem, appeared to contribute to the maintenance of his drug-taking, and may have in effect discouraged law abidance (Newcomb & Bentler, 1989).

A further possible factor that may have maintained Rory’s drug-taking could be related to the fact that “I thought that as long as my varsity work didn’t get effected...I didn’t have a problem with it...I actually thought I was quite clever being able to achieve all these things, and I didn’t go to lectures, and I managed to get through and I thought it was all fine.” He also said “why stamp it [marijuana] out? People are going to do it anyway...at least decriminalise [it]...as long as it’s in your own home, or in certain places...the constitution even made certain guidelines for that...” Therefore, these apparent values which occur at the level of the macrosystem, appear to have played a role in maintaining Rory’s drug-taking. This is confirmed by Schuckit (1998) who states that:

Others convince themselves either that no problem exists, or that...the drugs or alcohol couldn’t possibly be to blame (p. 94).

3.2 Bandura’s Social Learning Theory

In keeping with Bandura’s social learning theory, one of the most significant factors which appears to have maintained Rory’s drug-taking, relates to the fact that, according to Rory, drug-
taking is “a social thing.” Having initially observed his peers taking drugs, which as stated may have precipitated his drug-taking, his peers then became the means whereby he was able to continue taking drugs or alcohol as “I always drank with friends...everyone wants to feel at home...to have their friends” (Harris, 1998; Kandel, 1985). Oetting & Beauvais’ (1987) concept of a peer cluster theory supports the view that the peer group as a unit on its own should be targeted if drug-taking within the peer group is to be effectively addressed, since the negative influences within the peer group amongst its members serve to perpetuate drug-taking practices.

Oetting & Beauvais (1987) state that:

The single dominant variable in adolescent drug use is the influence provided by the peers which whom an adolescent chooses to associate. We believe that drug use is nearly always directly linked to peer relationships. Peers shape attitudes about drugs, provide drugs, provide the social contexts for drug use and share ideas and beliefs that become the rationales for drug use (p. 206).

However, Dishion, McCord and Poulin (1999) found that, depending on the age of the peers, interventions with peer groups could actually increase problematic behaviour, especially if the peers are regarded as high risk, and suggest that the parents of the peers, and not the peer group itself, should perhaps be targeted. Younger children and late adolescents/young adults may be less susceptible to the negative impact of peer group interventions.

Rory mentioned that at 15 years of age, he and his friends proceeded to steal alcohol and to “go on a bit of a vandalising campaign.” This behaviour, carried out in collaboration with his peers, served as a possible positive reinforcement for the continuance of such behaviour (McWhirter et
al., 1993; Reed & Rose, 1998). However, it appears that this behaviour ceased when his parents, and the police, learned of it. “I was grounded...we were arrested, and there was this whole big thing...I was 15 when I got involved, and I didn’t see those people again.” He realised at a later stage that some of the friends he had had in the past were “basically the losers and the mopers.” Therefore, the removal of the negative influences which appeared to emanate from that particular peer group, together with the admonishing influence of his parents and the police, may also have caused the cessation of the negative behaviour (Kandel, 1985, Oetting & Beauvais, 1987).

Rory also mentioned that although he did have friends at the new school, he also had friends outside of school. He further stated that “I always did it because I always thought I was in the in-crowd...and I was like one of the big guys in school...when people were like ‘check, you’re stoned now’ I’d think that was quite cool.” It is feasible to suggest that his friends’ responses were serving as a positive reinforcement for the maintenance of his drug-taking.

Drug use is socially reinforced by peers, who bestow attention and status on the adolescent who talks about his or her experiences with various types of substances. Such reinforcement serves as a powerful force for continuing substance use or for experimenting with more potent drugs (McWhirter et al., 1993, p. 121).

A further maintaining factor in Rory’s drug-taking experiences may have been his parents’ divorce. Rory’s perception of desertion and alienation may have caused him to seek a sense of belonging, and this was, at least in part, within his peer group. “Maybe because I didn’t find that security or comfort there, maybe I did seek it elsewhere.” It is also probable that the divorce served as a negative reinforcer for him, as the maintenance of his drug-taking may have been
related to the removal of adverse feelings of alienation and desertion (Bandura, 1986). Therefore, it was within his peer group that he was able to continue his drug-taking. Rory also mentioned that consequent to his parents’ divorce, “my freedom came” as he reported that his mother had little control over him, and so his new-found freedom may have allowed him to further experiment with drugs within his peer group (Nielsen, 1999). It is also probable that pursuant to the divorce, Rory’s feelings of emotional distress, especially anger, may have increased the risk that he sought friendship with drug-using peers (Swaim, Oetting, Edwards & Beauvais, 1989).

When Rory was 17 years of age, one of his gym instructors, outside of school, smoked marijuana and “whenever I went to gym, we’d have a joint or something...and then it ended up just me going there to smoke.” This confirms social learning theory’s concept of a model’s characteristics as to whether or not his behaviour is observed and subsequently incorporated by an observer (Bandura, 1986; Gredler, 1992). The gym instructor was admired and singled out by Rory, especially in view of the fact that as a model the gym instructor possessed a certain degree of power and status. Consequently, the gym instructor’s actions, that is, smoking marijuana, were of functional value for Rory, and facilitated observational learning. This may have, in turn, contributed to Rory’s continuing to take marijuana.

A further possible consideration in the maintenance of Rory’s drug-taking experiences was his transition into university. He stated that “I tend to feel that I can do all these carefree things, and have limited responsibility ...while I’m still at university...and it’s kind of inbred into people who go to university that they must do all their partying, do all their messing around, and then when they’ve finished university, it’s sort of time to start life as such.” This may have served as motivating factors behind his continuance of drugs and alcohol (Weiss & Schwarz, 1996). He
further stated that “just to sort of fit in with them you might do it...but obviously it’s a bit blind if it’s like you’re at a party and everyone’s drinking and you’re not.” Therefore, his experiences with alcohol were being maintained and exacerbated by, *inter alia*, his involvement in a particular peer group at any specific time (Akers & Lee, 1996; Harris, 1998). Rory also mentioned that his girlfriend at that time appeared to have a problem with drugs, and that together they would frequently take drugs. “I found that I could only relate to her when I was on drugs.” Accordingly, they appeared to be positively reinforcing each other’s drug-taking (Bandura, 1986). He stated that when she started to steal money and drugs in order to maintain her drug-taking, he also got involved. So, by observing her behaviour, and by stealing drugs as a motivating factor towards maintaining his own drug-taking, this may have served as a positive reinforcement for further stealing (Reed & Rose, 1998).

A further factor which appears to have maintained Rory’s drug-taking experiences, was his involvement in the rave scene. In keeping with social learning theory, the rave scene serves to perpetuate drug-taking behaviour by allowing the participants to observe others taking drugs, and by taking drugs themselves, the participants are, according to Rory, able to “get along with these people because you’re the same as them, so maybe I felt this feeling of belonging...I felt like it was one big unity, and this was where I belonged, and maybe I felt that whole family thing again, maybe.” Therefore, it is possible that the rave scene served as a negative reinforcer for Rory, due to the maintenance of his drug-taking being related to the removal of feelings of alienation and desertion. However, conversely, the rave scene may also have served as a positive reinforcer as well, as by observing others enjoying themselves and having positive experiences subsequent to taking drugs, this may have in turn encouraged others to take drugs in order to have similar experiences (Bandura, 1986).
Relevant aspects of Rory's present drug-taking experiences will now be discussed briefly in an
endeavour to describe its continuation. It is significant that at times the experiences he has had
as a result of taking drugs may in turn serve as a positive reinforcement for future experiences,
thereby maintaining his drug-taking experiences (McWhirter et al., 1993). Rory mentioned that
drugs afford him a degree of confidence, and that drugs such as “mushrooms” allow him to feel
“at one with the whole world, and you can sort of piece together the way things are...” He also
mentioned that he always drinks with friends, and takes certain drugs with friends. The issues
pertaining to the positive reinforcement, together with the social aspect, of his drug-taking
experiences, are confirmed in his account of the following separate experiences, as set out,
verbatim, in his diary.

i. “3/4 bottle of brandy; 4 shooters; 8 beers; 2 thins - diet tablets. Great afternoon braai,
getting happier the more I drink.”

ii. “12 beers (+/-); 5 brandies and coke; 4 hits of poppers. Feel like the centre of the party,
uncontrollable, maybe reckless thinking, hyperactive, ‘out of control’ so I am told, but I
don’t think so.”

iii. “1e; 10 beers; 3/4 bottle rum; 4 tots whisky; 1 joint. Really drunken mood...marijuana
relaxing, but don’t like the hallucinations, quite scary. People’s faces turn slightly yellow,
green...”

It can be seen that the experiences he has had are varied - both positive and negative. The positive
experiences served as positive reinforcement for future similar experiences (Bandura, 1986;
Schuckit, 1998). Conversely, negative experiences can serve as a deterrent for future similar experiences "...I've seen demons, I suppose, or evil in people. That's why now I don't tend to want to take anything psychedelic, I won't take anything psychedelic in a club. I will take ecstasy and stuff and hallucinate on that, but at least you've got that ecstasy feeling of niceness..."

Rory stated that at times he prefers to take marijuana on his own as it allows him to gain a certain degree of introspection. Upon first glance, this may appear to be contrary to social learning, but upon due reflection it can be seen that the positive experiences he has as a result of this, serve as a further positive reinforcement for future sole experiences with marijuana (Schuckit, 1998).
Secretly, I know it is not good to be stoned constantly, but it is the nicest place to be, if only society felt the same way (Rory).

1. **CONCLUSION**

1.1 *What Predisposed, Precipitated and Maintained Rory's Drug-Taking?*

In response to this question, I would like to re-iterate what Rory himself said:

> I guess it's very difficult to pinpoint one and to say that's the sole cause. I guess nothing with a person ever is the sole cause of something ... it's probably a whole host of different factors, and that's what people say.

Bearing this in mind, it is significant and indeed worthwhile to hypothesise what may have "caused" Rory to take drugs, and to continue to take drugs. Many different factors have been suggested but, three in particular, appear to have dominated the discussion: the influence of parents and peers on the negative side - but also the positive effects of drugs. However, what must
be stressed at this point is that it cannot be stated with absolute certainty that Rory's parents and peers "caused" him to take drugs. What needs to be recognised is that certain elements in Rory's environment at the time, which included his parents and peers, may have enabled and encouraged Rory to start taking drugs, and were then conducive to his continuing with his drug-taking. Authoritarian parenting style, poor family functioning, limited positive father-son interaction, and particular parental values regarding drinking can be advanced as possible predisposing factors to Rory's drinking and drug-taking. Rory's sense of identity confusion during early adolescence may have prompted him to over-identify with drug-using peers, and may have precipitated his drug-taking. Further factors in this regard could have been the possible lack of parental monitoring, together with observing peers drinking and taking drugs. Why did Rory continue to take drugs? In response to this question, it could be suggested that Rory's continued participation in drug-using peer groups, both at school and at university, may have been a major factor in this regard. His parents' divorce, as well as the apparent permissive parenting style of his mother, also appear to have played a part in maintaining his drug-taking. Rory's feelings of desertion subsequent to the divorce may have prompted his search for a sense of belonging within drug-using peer groups and nightclubs. Another factor may have been related to the availability of drugs, together with the pleasurable effects that drugs have had on Rory, and this could also contribute to maintaining his drug-taking.

However, in keeping with the ecological theory of Bronfenbrenner (1980), it should be borne in mind that what may be construed as possible causes of Rory's drug-taking at any one time, could be viewed as influencing the causal process itself, which in turn calls for a degree of reciprocity. All levels of systems, from the micro- to the chronosystem, operative within Rory's environment may have had a part to play in this process.
2. **MY REFLECTIONS**

2.1 **Initial Difficulties**

In the initial stages of this study, it was hoped that approximately four or five students would respond to the poster advertising for research participants. However, this was not the case, and only Rory responded. Towards the end of the first interview with Rory, I asked him whether he knew of any other students (like himself) who would be prepared to make contact with me with a view to conducting similar interviews with them. His response was:

"I'll speak to people. I don't know if they'll be willing to. People who take drugs generally can't be bothered, to tell you the truth. 'Why, what's the purpose.' But I'll ask around.

However, when it transpired that Rory would be my only participant, the case study method appeared to be the most appropriate means of conducting the study in question.

The case study method also demanded that I rely entirely on Rory's participation and willingness to co-operate. However, his motivation for responding to the poster in the first place, and for subsequently agreeing to participate in the process, was entirely self-induced, and therefore did not constitute an issue that warranted much deliberation. He was an eager participant who at all times complied with the requests of the study in question - he even spontaneously delivered a poem that he had written on his drug-taking experiences. To me, this was indeed extremely helpful, especially as he was a post-graduate student, who had a great deal of academic pressure
to bear. His willingness to participate facilitated the process and enabled me to focus on the study in its totality.

A consequence to the open-ended interviewing procedure was that I was reliant on Rory's account of his experiences which, to be worthy of meaningful scrutiny and interpretation, had to be as honest and complete as possible. However, it can never be stated with great certainty that a person's recollection of past and present experiences is indeed either honest or accurate. I can only hope that Rory's motivation and enthusiasm to participate in the study meant that what he recalled during the interviews and the diary, was honest and accurate - at least insofar as his perception and interpretation of his experiences were concerned. It is also noteworthy that Rory himself demarcated and highlighted certain experiences and events in his recollections, for example, his drinking experiences at the age of 14 at a relative's party, and his parents' divorce. This is important as these highlights could be interpreted as being significant milestones in his drug-taking experiences, which warrant attention and scrutiny if these experiences are to be meaningfully interpreted and understood.

I did not obtain information regarding the circumstances surrounding Rory's adoption. At the time, due to specific countertransference issues, I did not deem it appropriate to request this information. Countertransference, as a specific psychotherapeutic phenomena, is to date an unrecognised aspect of case study methodology, but which could influence the structure of the interview itself, and pose specific challenges for the interviewer. Such data would no doubt have yielded significant results, for example, the possibility that Rory's biological mother or father also used alcohol and/or drugs, which may have genetically predisposed him to take alcohol or drugs himself (Cadoret, Troughton, O'Gorman & Heywood, 1986, in Kimmel & Weiner, 1995).
Perhaps this is an issue which Rory himself could explore. If his biological mother or father did not take drugs or alcohol, then the significance of environmental issues, for example, Rory's peers and adoptive family, come even more forcefully to the fore.

2.2 The Richness of Phenomenological Data

I was somewhat apprehensive and over-awed by the prospect of conducting a phenomenological, single case study. With the complexity of issues that needed to be addressed and accounted for if the study was to bear meaningful results, the task ahead of me appeared daunting. However, as I immersed myself in the study and into the issues that subsequently arose, I realised that a single case study based on phenomenological data yielded capacious richness and depth, which other more general studies are not fortunate enough to capture. The dearth of phenomenological studies on drug-taking heralded not only a challenging task ahead, but also an opportunity to approach the study in a creative and spontaneous manner.

Subsequent to the collection of the data, I presented a paper at the annual psychology conference held at the Pietermaritzburg campus during October, 2000 (cf. Appendix 11). In preparation for the conference, I was required to scrutinise the data and to focus on various pertinent issues around the case study itself. This exercise proved to be both challenging and fruitful, as it allowed me to organise not only the data but my thoughts around the various issues.

This case study has also enabled me to pursue the fine line that exists between drug abuse and use. A significant issue that should be borne in mind is that even though Rory has used and is still using
alcohol and drugs, he continues to be in control in other areas of his life, for example, his academic achievement, and is functioning well in society.

My aim throughout the study has been to approach the issue of drug-taking in a non-judgmental manner, and not to impose any particular values that I, or society, espouse onto the study or Rory himself - hence the emphasis on drug-taking and use and not abuse. I believe that in so doing, I have managed to step inside the mind of a drug-user, and to capture the richness and holistic nature of the phenomenon of drug-taking itself, unaffected by belief-systems or constraints peculiar to today's society.

2.3 Future Possibilities

There are many possibilities for future research, subsequent to this study. It would indeed be most interesting and rewarding if a follow-up case study could be undertaken in, say, five years time, and to gain an understanding of Rory's present cognitions and circumstances apropos drug-taking.

It was mentioned at the commencement of this report that five interviews with key informants of various organisations were undertaken in order to gain an understanding of the context of drug-taking both on and off campus. It was also stated that, pursuant to the case study itself, it may transpire that certain programmes within such organisations directed towards drug use may prove to be inadequate. This could prove to be a worthwhile study in order to effectively address drug-taking on campus.
In keeping with Oetting & Beauvais' (1987) peer cluster theory, it may also be worthwhile to identify a specific peer cluster, perhaps on campus, and to subsequently conduct a phenomenological study on such a peer cluster in an attempt to gain a better understanding on the dynamics of the peer cluster in respect to drug-taking. This may prove significant in endeavouring to address, and perhaps reduce, drug use itself.

3. **'RORY’S REFLECTIONS**

3.1 **Rory’s Poem**

*Woman of my life black sunshine gold*

*Looks, feels and tastes so good.*

*Get a lite, smoke my pipe.*

*All my troubles vanish into thin air.*

*Then I have another hit and my vision*

*Blurs into warped distortions. My mind*

*can’t comprehend.*

*What a life she is for me*

*My mind, body and soul, as free as can be.*

*Why won’t this feeling of ecstasy never leave me*

*‘Cause she’s a fleeting illusion that is there*

*To haunt and taunt till I get a scare.*
I'm rushing, running, racing after her
Like a ghost in the darkness she's one step ahead.
Leaving me haunted, exhausted and fucked up in the head.
Jah, what can I do to tame
The ghost of midnight, my body desires even more.

What is this thing I sacrifice my life for
Coloured black and gold just waiting to appease
This appetite lustful tonight.
I got a scare.

3.2 **Rory's Explanatory Notes Regarding Poem**

Black (maria) = hash;
Sunshine gold = Malawi "dagga" gold (Malawi gold)

With Rory's assistance, the poem may be interpreted as "wanting to be stoned all the time. Unfortunately if one is to function in society this would not be possible, therefore one has to conform to society's rules and regulations without dagga."

As Rory said "Secretly, I know it is not good to be stoned constantly, but it is the nicest place to be, if only society felt the same way."
3.3 *Rory's Letter to Himself*

"Dear Rory

It seems after a really stormy teenage period with many let-downs and finally the realisation that the only person you can count on is yourself.

Life is unfair and not what it seems, people have to be scrutinized carefully before one trusts them. Even then mistakes can be made.

Thus, when one accepts these facts, one can make the best of the situation. I feel better the way things are going in my life. I feel more in control even though you are never in control. I feel I still party hard but also work hard. Life is a lot smoother when one doesn’t abuse and over-use drugs. Getting stoned every day isn’t good, either. It seems like all is okay, but beneath the silver lining, there is something more sinister. Shit with cops maybe, parents, certain friends, girlfriend and loved ones.

The worst thing is the disappointment one brings to those loved ones. It’s easy to say ‘you don’t care’ and that it is your own life to do as you please. But in all honesty I think everybody does care.

People in the drug world are generally fucked up and don’t have “proper” lives anyway, losers essentially.

There is a fine line for each individual to try to decide what is use and abuse for themselves. But
because of the psychological and addiction aspect most people will tell you they are not abusing drugs and they will always point out somebody worse.

I also think a lot more focus should be centred on alcohol abuse, since in reality for most people that is a lot worse.

When one loses satisfaction with alcohol, one will easily be more inclined to try ganga, LSD, etc. One will always be trying to achieve the first rush, trip or out of body and mind experience. In reality one will never get it again. Well, at least for me anyway.

Regards,

Rory


1. Letter confirming research (UNP Masters' degree requirements)
2. Notes written subsequent to initial five interviews
3. Statistics supplied by SANCA
4. Poster displayed on campus
5. Interview No. 1 with Rory
6. Rory's diary
7. Interview No. 2 with Rory
8. The time-line composed by Rory
9. Case study protocol
10. Case study database
11. Paper presented at annual psychology conference
19th April 2000

TO WHOM IT MAY CONCERN

re: CURRENT RESEARCH PROJECT

I am a student at the University of Natal (PMB), and am presently registered for the Psychology Masters (Educational) degree. It is a requirement of the university that all Masters students complete a research project, and to this end I am conducting a study of substance abuse on the university campus. The first phase of my study requires that I interview various key personnel in order to discuss aspects of substance abuse.

All information gained as a result of the interviews will be regarded as strictly confidential.

Yours faithfully

Karen Bailey

L.M. Richter (PhD)
Professor and Head of School
APPENDIX 2

Interview 1: Student Counselling Centre ("SCC")
Date: 20 April, 2000

Students usually come to SCC because of declining marks, lack of concentration, depression, but underlying problem is substance use/abuse. Very rare that they present with substance use at the outset. Students are self-referred or referred by others who are having a problem with them. Sometimes the parents' phone about a student - student reluctantly then goes to SCC. Sometimes Protection Services bring a student in because he is presenting with psychotic symptoms because of substance use. Types of substances used: dagga, ecstasy, spiking of drinks, alcohol. Use of ecstasy has increased, mainly due to the whole culture of rave clubs - students report that if they don't take ecstasy when they go to these clubs "they feel out". Taking substances is all part of being a student - form friendship groups - feelings of comradie, sense of belonging. Self-reports reveal that the students feel isolated - no close friends - when they take ecstasy it increases their confidence.

Being part of a close group brings something to the students - they feel the need to stick together. An example was given of a student who was brought in by Protection Services presenting with psychotic symptoms. Ten of his friends came in to SCC - very worried about him. Student was admitted to Town Hill Hospital. Peers stayed in contact with SCC for two days speaking as a group about the gains of friendship because of substance use, and the harmful effects of drugs. Student who was admitted to Town Hill Hospital posed a danger to himself. Peers visited him at Town Hill Hospital and took drugs to him. He was then transferred to a centre on the North Coast. Group of peers served as positive reinforcers to each other. Brought forth a sense of commitment.

SCC has in the past advertised in local newspaper for volunteers to be part of a substance abuse/use group - only a couple of responses. Students do not admit they have a problem. Support groups can have a strong impact.

At the beginning of the year, mentors are elected for first years. These mentors are very influential with these students. There is also a peer counselling programme at SCC. However, students prefer to talk to friends about their problems. Workshops are also offered on substance use/abuse. Due to the large numbers of students at UNP and the resultant practical issues, SCC has no captive audience. Therefore, SCC tries to target small groups and individuals. In the past SCC used to offer awareness drives by bringing outside speakers in to address the students, especially at the residences. Participation here was voluntary. Posters and displays were also put up. There are many other programmes on offer at present, eg. life skills, which incorporate substance use/abuse as part of their focus. Drugs are a problem on campus, and are the indirect cause of abuse and sexual harassment. There are drinking clubs on campus, mainly at the male residences. Problem is getting worse. Students say that there's not enough for them to do on campus, eg. hobbies. There's a drinking ethos on campus - this helps them to socialise. The lecturers sometimes refer students to SCC if they sense a problem eg. lack of concentration. Sometimes, the students arrive themselves because they are failing or because of date rape.
South African National Council for Alcoholism (SANCA)

4 May, 2000

Key informant will let me have details re students seen at SANCA (number, age, gender, race, range of drugs taken, etc.). This will be taken from intake forms.

SANCA mainly deals with schools - this is their primary focus. The programmes at the schools deal with primary prevention and information sharing. There are also programmes offered on campus, such as the following:

Forthcoming programmes:

- Theology Dept - students requested SANCA to present talk, mainly due to the students’ pastoral positions in future, eg. drug counselling.
- Science Foundation Programme - SANCA presents 4 or 5 lectures to students on, eg. safe drinking.
- Orientation week (beginning of year) - advocate safe drinking; not compulsory. Students are given advice re drugs, eg. drink plenty of water with ecstasy). This allows students to make sensible choices. Question time follows - students are responsive to this.

The first time a patient is seen at SANCA, an assessment is done to identify the type of problem. Treatment consists of two components - medical and counselling. The medical component is handled by doctors and nursing staff, and the aim is to help patients to manage withdrawal symptoms through, eg, taking sleeping tablets and anti-depressants. Their physical well-being is also taken care of by administering vitamins. The counselling component is handled by social workers at the outpatient clinic, eg. the relapse prevention programme, which is a structured individualised programme, once a week over the course of six months. There is a fee that is charged, based on the patient’s salary, or the parents’ salary. Skills are taught to enable patients to cope with life stressors without the use of drugs. To this end, stress management, problem solving and time management skills are taught. After the six month programme, an ongoing after-care programme is offered which reinforces skills and attitudes, and offers support. There is more success with treatment if patients present at SANCA voluntarily and are not co-erced.

The most frequently used/abused substance is alcohol as it’s legal, cheap, available and more socially acceptable. In PMB - Whites normally use ecstasy and LSD, and Indian and Coloureds use mandrax and crack. In PMB, the raves are frequented mostly by Whites. Drugs are easily available. There is a high incidence amongst students, which is regarded “normal”, and a part of the university culture - there are less harmful consequence as a student, than if employed. The bus which transports students to and from campus to various clubs in the city discourages drinking and driving, and the first drink is usually free. This reduces drinking and driving, but also encourages drinking which might not normally take place. Perhaps there is a “pay-off” or money-making scheme for clubs who participate. “Pigs night”, found at some clubs, means that students can drink as much as they want to for R25.00. This encourages drinking and is a risk to health.
It could constitute a money-making scheme on behalf of the clubs who participate.

The prevention programmes put into force during orientation week on campus are aimed at the first years, but although it is never too late to intervene, it is almost too late. Ideas and attitudes are already shaped, but the protected adolescent could be exposed to drugs when he arrives on campus, and therefore, may try drugs. Peer pressure is the most important contributory factor to first drug use. Cigarettes are used first and then alcohol. Students continue with drugs because of peers, environmental influences and parents. Prevention should begin early in life through parents and schools. Values should be taught through the medium of the life-skills programmes at schools. Because there is a lack of manpower in schools, teachers should be taught to be aware of symptoms of drug use. Problems first appear in grade 5/6. Teacher programmes and information presentations should also be directed at the rural schools.

Interview 3: South African Narcotics Bureau (SANAB)
Date: 5 May, 2000

SANAB encounters substance abuse mainly in town, at clubs and at private parties, eg. digs. Hears about substance use via word of mouth. Discussion that follows will mainly be about adolescents and youngsters in general aged 18 - 25 years, and not university students in particular.

The following, approximate, current prices of various drugs were verbally supplied by SANAB:

- LSD: R40,00 - R60,00 per trip/unit (depending on supply/demand and quality)
- Ecstasy: R80,00 - R120,00 per tablet (depending on supply/demand and quality)
- Magic mushroom (hallucinogenic): R20,00 - R50,00 per bankie.
- Cocaine: R300,00 per gram
- Marijuana: R1,00 per gram

Dealer will inform buyer/user whether quality is good/bad - the relationship is built on trust. Mandrax is not often encountered. Crack cocaine is very addictive from the first encounter, it severely effects studies, and it is used as an escape. Powder coke is more popular. There is a new drug (F2), which SANAB is presently making enquiries into - the old drug similar to F2 is rohypnol, which acts as a tranquilliser, and is used to spike drinks (eg. date rape).

There is drug dealing on campus and at digs. SANAB normally acts on public complaints or anonymous calls. There is also drug dealing in nightclubs. Dagga can be bought anywhere. Dealers are normally the head of a syndicate, who use runners to sell the drugs. The runners don’t usually use drugs as they know the dangers. The dealer normally gives some youngsters free drugs for a while to get them interested. When the dealer starts to ask for money for the drugs, the youngster then has to start selling drugs in order to pay the dealer. They are physically threatened/assaulted if they don’t pay up. If one dealer gets busted, ten more pop up. The police rely on informers to tell them about dealings/use, etc. SANAB do not go into clubs to observe, as they will be recognized, and dealers/users would scatter. Traps are successful, and they have to follow guidelines as set down by Criminal Procedure Act. The KZN Department of Public Prosecutions
hasn’t set down strict guidelines as yet.

SANAB presents talks at schools regarding the dangers of drugs, and supplying the necessary information about drugs in an attempt to deter students, eg. drug use and possession will lead to an arrest and a criminal record. Small or large groups of pupils and the teachers in schools are targeted - the smaller the group the better. Primary school and high school pupils are targeted, but the concentration level of pupils from grade 8 upwards is better... Last year SANAB presented talks at schools, and the pupils were openly disinterested. Their non-verbal behaviour said “they will still do it.” The talks, then, are pointless, off-putting for the police and a waste of time for all. Today, the children are very well-informed, and know more than the police know about drugs.

The pupils, in using drugs, “want to fit in.” Peers are a problem, with peer pressure and cliques. The message is “conform or get out.” The youngsters in the cliques normally use one particular drug, eg. LSD or dagga. If a new person wants to join a group, the existing members are sceptical and want to know the reason.

Drug use is a world-wide problem, including in South Africa. SANAB does not see any other more effective way of addressing the issue, other than what it is presently doing, ie. information giving, arresting, etc. The justice system is imposing higher sentences, eg. jail term for first offenders. Newspapers used to publicise the names of convicted offenders, and this proved to be effective.

Drug dealing is a lucrative business, especially in the nightclubs, and the dealers get the youngsters to sell the drugs.

Rehabilitation is only effective if voluntary. It also depends on the character of the person, whether he/she has “had enough”, or whether he/she has had a “near-fatal” experience with drugs, etc. Ten to 15% of rehabilitation is successful.

There is an escalation in drug use. SANAB acted on a call-out involving a five year old boy suspected of smoking dagga - the parents also used dagga.

Drug use is culture-based. It is expected that Rastafarians use dagga, esp. the mothers who let their infants inhale the smoke as a soothing agent. The Blacks grew up with dagga. Whites normally use LSD and ecstasy. Indians and Coloureds generally use mandrax and crack, and the White teenagers use dagga. Raves are normally frequented by Whites, whereas other cultures are now starting to go to raves.

There is a problem with drugs at elite schools. The parents are a big problem, and see the police as interfering. They don’t know where their children are.

SANAB feels that alcohol is better and safer than hard drugs. I was shown a case of various drugs, eg. dagga, ecstasy, magic mushrooms, LSD, which were confiscated. These drugs are sent to Pretoria for destruction or are used in displays.
Students present with problems such as not sleeping, needing vitamin B. injections, headache, cannot study, stressed, tired, depressed, wanting morning-after pill (because of spiked drinks). They normally arrive at Campus Health with no shoes, flushed faces, red eyes, shaky, jumpy, and irritable. CHC gives them direction re coping. Treatment is usually symptomatic, eg headache tablets, anti-nausea medication and vitamin B injections.

Students only approach CHC if ill, and speak to the staff re drug-related problems (eg. headaches), or about drug-taking only because they are nurses and not counsellors. The students don't come in and say "I have a drug problem." When CHC suspects, the students will deny it at first, and then they may start talking. The students are pressed subtly for information. The partner of the drug-users sometimes comes in to speak to CHC re their relationship with their partner, and are given guidelines re coping, eg. "This is what you are doing to me/yourself. You need help. go to SANCA/Student Counselling, etc."

Students are sometimes from affluent homes, and they have money for drugs. The problems sometimes start at school with experimentation. Sometimes the students admit to dagga- taking and say that there are a lot of drugs and drug-taking on campus. Dagga is quite common. Students say that it stimulates them, makes them feel good and happy, and better able to cope. They are informed by CHC that this is fine, but if at any stage they feel that they need more to feel that way, they need help. The students need family support in order to give up. CHC advocates the practice of "anti-stress water" to assist the students to give up. It flushes out the toxins and cravings, and helps neutralise the toxins with water. It constitutes a psychological and a physical need to put something back in.

CHC promotes health, well-being and happiness. There is a culture of alcohol drinking on campus, which the students are proud of, eg "pigs night" at various nightclubs in town. The bus that transports students to nightclubs from campus promote safe driving, and is a responsible way to deal with drinking. Despite statistics of the dangers of alcohol/smoking/drugs, students report that they don't care. The first years take alcohol, etc., because they have just been through matric and are stressed. These are normally bright students who are coping with their studies.

CHC tells students that they are free to make their own choices. CHC does not refer students directly to SANCA. Students are informed that they have a choice whether or not to approach SANCA. They need self-esteem, assertiveness and problem-solving skills. They need direction from, eg. the Student Counselling Centre. When a person is fully developed, he/she feels fulfilled and happy. The students are encouraged to make use of all resources on and off campus. Students are bored, and they, therefore, feel the need to drink and/or take drugs.

The aim of CHC is to reach students, because the students don't come to them.
The LRO has not seen much drug use this year - more in previous years. He wonders whether it is hidden nowadays? He is aware of drunkenness and one or two allegations of students using dagga. There was a student in 1995 who used dagga every day as his “day would not be complete without it.” He is not aware of drugs other than dagga or alcohol that are being used by students at the residence.

There is more obvious drug use amongst first years, as there is a spirit of getting drunk in a crowd, and there is the associated noise. The bus that transports students to nightclubs from campus promotes safe driving. Students will drink anyway with or without the bus. They will also drink and drive. Students from both the men and women towers go out, especially on Thursdays, and come back around 2 in the morning. When students attend raves, it is usually done secretively with friends. Students will go to the Student Counselling Centre if they need help, or they may refer a friend for help. The LRO would also send a drug user to the Student Counselling Centre and/or the Campus Health Centre, but would talk to the student first. Students might report drug use to the LRO if they are concerned about or disturbed by a drug user’s behaviour. Students who are using drugs have a habit of not attending lectures.

Prevention of drug use is not an issue that the residence staff has thought about, as they are more involved in departmental, academic and security issues. The staff does not report a student if he/she is found drunk on the grass, but if he/she is found drinking in non-designated areas, action will be taken, which may result in a tribunal being held.

[Before the interview was held, I noticed a sign on the news board in the residence office which read “It is the duty of the university to report the use or possession of dagga to the South African Police Service.”]
The following statistics and information were supplied by SANCA during May, 2000. All persons cited were University of Natal (PMB) students.

**SOCIAL WORKER 1**

<table>
<thead>
<tr>
<th>Patient</th>
<th>Sex</th>
<th>Race</th>
<th>Age</th>
<th>Substances</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Male</td>
<td>White</td>
<td>Early 20's</td>
<td>Ecstasy, LSD, dagga, cocaine</td>
</tr>
<tr>
<td>2</td>
<td>Female</td>
<td>White</td>
<td>Early 20's</td>
<td>Alcohol, dagga</td>
</tr>
<tr>
<td>3</td>
<td>Female</td>
<td>White</td>
<td>19</td>
<td>Cocaine, ecstasy</td>
</tr>
</tbody>
</table>

None referred by Student Counselling Centre

**SOCIAL WORKER 2**

<table>
<thead>
<tr>
<th>Patient</th>
<th>Sex</th>
<th>Race</th>
<th>Age</th>
<th>Substances</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Male</td>
<td>Indian</td>
<td>Early 20's</td>
<td>Dagga, mandrax</td>
</tr>
<tr>
<td>2</td>
<td>Male</td>
<td>White</td>
<td>Early 20's</td>
<td>Dagga, alcohol</td>
</tr>
<tr>
<td>3</td>
<td>Male</td>
<td>White</td>
<td>Early 20's</td>
<td>Dagga, alcohol</td>
</tr>
</tbody>
</table>

Two referred by Student Counselling Centre

**SOCIAL WORKER 3**

No patients from University of Natal (Pietermaritzburg).

All patients were seriously addicted on entering our treatment programme.
Above data from the last 18 months.
Two patients still in treatment; 1 in prison.
Rest dropped out of treatment.
DO YOU ENJOY

1. CLUBBING / RAVES?

2. ECSTASY / DAGGA ... ETC?

3. ALCOHOL?

If you have answered YES to any of the above questions and if you are a student on this campus I would really like to hear about your experiences.

Please rest assured that your name and details will at all times be respected with the utmost confidentiality.

I can only accommodate a few students so please phone me NOW.

Ask for Karen at any of the following numbers:

Cell No. 082 - 215 4459
(After 5 pm Monday to Friday and any time on Saturday and Sunday)

Or 260 5166
(School of Psychology: 8 am - 1 pm; 2 pm - 4.30 pm)

Please leave a contact phone No. and I will return your call asap, or visit me at the School of Psychology in Golf Road.
Interview 1 with Rory

K Rory, tell me - why did you come here? I know why I’m here - because I have to get this research underway, but I’m also interested to hear why you are here today.

R Well, I think there’s not enough research and knowledge known about the certain issues we’re going to be discussing, and I think as much which is known about the subject as possible will benefit everybody in the long run, and I think it is only certain sectors of society which actually have a say, and I believe that everyone should actually be able to have a say, and we should get everybody’s views across, and not just sort of have people in power, and old-fashioned sort of views I like to call it coming across. I think that with my views and maybe other people’s views of sort of my generation and that, maybe something can sort of be able to benefit everyone in the future.

K OK - and if you can give me an example perhaps of that....

R Well, I think a lot of the laws and stuff are a bit draconian, and also the parents’ views - maybe because of what happened in the 60’s - there was this whole big generation or something like that - maybe people were put off by that, but I think that if certain people want to do that, as long as they don’t harm other people in what they do, obviously there’s big debates about people becoming a burden on the state and that sort of thing, but you know lots of people will become a burden on the state anyway, and who’s to know what’s going to happen in life to people, so I think that’s a poor excuse, and I mean people I think should be in charge of their own destinies and be able to decide what they want to do for themselves.

K And in connection with parents - you mentioned parents. What sort of views do you think they hold?

R Well, my parents, for example, went through the whole 60’s generation and they were never involved in drugs, and maybe they did drink now and again, but I don’t think they ever had a problem or were heavy drinkers or anything. But if I was to discuss this subject with my father, it’s fine as long as I’m not involved, but as soon as I’m involved it becomes a problem, and I can understand it’s care and all that sort of thing, but I think he needs to be more understanding, and sort of like, if a girl gets pregnant, some parents will freak out and disown her and stuff like that, and I don’t think that’s a proper mature way to handle the subject, I mean it’s just not right, and there needs to be a better understanding between younger adults and older adults, and maybe even children and teenagers with their parents.

K And how do you think that could be accomplished?
Well, just by parents being more open-minded and children being more honest - teenagers and that being more honest, because if someone really wants to do something, they are going to do it anyway, regardless of what parents think or try and impose on them, and that will only cause to alienate people against each other, and I mean that’s not really the issue here. The issue is to build a better society and to accomplish things, not to sort of mess things up.

And do you think that peers play a role here?

I’m sure peers do play a role to a certain extent, but it will vary from individual to individual. Everyone would like to feel at home, or sort of have their friends - who they want to have, and ja, as soon as things start getting imposed on them, they might sort of feel that they sort of will be influenced in a certain way, but I mean everyone’s going to be influenced in some certain way, so it is actually up to the individual person in the first place whether they get influenced or not.

Influenced by?

Influenced by other people.

By other people...

To do certain things that they might not ordinarily do, you know. There’s a big thing at varsity about getting drunk all the time and going out to town all the time, and that’s sort of accepted. But now I’ve seen in the newspaper recently around the varsity that two students were caught smoking dagga and they’re going to be handed over to the police and all that, and I mean that’s actually I think going to ruin their careers, and what they want to achieve, over something like that. You know what I mean, it’s just I think sort of needless and ridiculous, and I’m sure there’s better ways to handle things like that.

For example?

Well, just to counsel the students, and I mean when I was in first year we got caught smoking dagga on several occasions and I mean the warden at the time said he actually preferred us to do that than to get drunk, because there are two different types of people - the ones who sort of smoke dagga and maybe took the odd drug here and there, and then the ones who just got totally drunk and broke things and vandalised, and they were the problem, you know. What we did maybe we got a bit noisy, but I mean we weren’t really destructive like they were, and I mean he actually understood that, and I mean when we were caught out a few times, you know, he used to say - please, you know, keep it to yourselves. Try and be less (??) discreet, and I mean we even had dealers in the university working for like * , and ground staff, and stuff like that. So, it’s a whole big internal thing, so it’s not really certain people bringing the element here in the first place. It’s sort of already here. It’s going to be here, and you’re not going to stamp it out, and why stamp it out? People are going to do it anyway.

* All identifying details are left blank for confidentiality purposes.
K You say - why stamp it out? Your reasoning, perhaps?

R Because there’s so many different views regarding and concerning the subject, and I could sit here for an hour and tell you about all the good things about it, and why it is that Amsterdam works, and other countries where it’s decriminalised or, you know, etc. etc. but there’s no need to be so harsh on people, and I mean it starts to be treated as if it’s like a schedule 1 offence, you know, like murder, robbery, etc. like that, and I mean even last night I saw the police line-up services or whatever that they have, some guy wanted in connection for being in possession of marijuana, you know, and was caught twice, and he didn’t pitch up at Court, and I mean that’s now become a serious offence for the guy, I mean over such a simple thing like that, and I mean it just gets all blown out of proportion.

K So you obviously don’t think it’s that much of a problem.

R No, I don’t.

K Obviously in moderation?

R In moderation, in set circumstances, but if someone wants to throw their lives away by ruining themselves over something, that’s up to them. You know, I mean, they’re not going to become a burden on the state, so I don’t think it works, because there is no state benefit for people anyway, unless you go psychologically insane or something and you get committed to an institution, but you know, marijuana’s not going to do that to you - it’s your state of mind in the first place.

K And you think that’s important.

R Ja.

K You mentioned certain personnel on campus being drug dealers. Do you know if that’s still the case?

R I don’t think it is still the case, because I know when we were in first year, we were sort of the people who knew about who was involved, and shortly afterwards I heard that the guys involved were actually arrested, you know. I’m not too sure how true that is, but that’s what I heard, and I’m sure it’s still going on. I mean, people here earn very small salaries, so to make a couple of extra bucks on the sideline, I think there’s still sort of that incentive for them to do that, so I’m sure that it’s still going on.

K So, what I hear you saying is that, correct me if I’m wrong, but you would like to see dagga legalised.

R Well, not necessarily legalised, but at least decriminalised, you know as long as it’s in your own home, or in certain places, you know, the constitution even made certain guidelines for that, and I mean as long as you’re not blase about it. Unfortunately, I see a situation developing into a whole big sort of, trying to now put controls on people who smoke
cigarettes now, and they don’t want people smoking cigarettes, and there’s this huge now campaign to sort of try to even ban tobacco, so I can hardly see if there’s this big move to do that, how now they’re going to suddenly decriminalise marijuana. I think we’re getting further and further away from that ever happening, and I mean obviously it’s sort of S.A.B. and big organisations and companies behind the whole thing as well, I think, as well as individuals I suppose. It’s much bigger than we think, ja.

K We’re always hear of the dangers - don’t do this, don’t to that - do you think there are any benefits to be gained by taking marijuana/dagga?

R Obviously it depends on the person. You know there are cases when people just can’t handle it, and it does lead to other drugs, and maybe it does destroy lives, you know maybe there’s medical benefits and benefits that aren’t there. But I think it’s up to the person. I mean I know like high-powered stock brokers and lawyers and doctors, and they smoke marijuana, and they seem to be doing fine. I personally for myself have tried that, and I found that it doesn’t quite agree with me, and maybe I get paranoid and too self-conscious, and you know it’s not a good thing. But for certain people it helps them relax. It is better for them to do that, than to say get drunk every day, because people I think do need an escape in their lives, and you know, so what if it is a drug or something? It’s better than doing certain other things, I think.

K Like LSD, or something...?

R Or, ja, or going out and shooting people because you’re fed up, you know, or whatever it is, ja.

K So do you perhaps see marijuana playing a therapeutic role, in a sense?

R Ja, I think there’s many different uses it can be used for, I mean even for like the clothing industry, and I mean for an acre of hemp is like better, you know, better than all those things, you know. Four acres of hemp is equal to one acre of trees, and we can into that side of things, but you can’t just sort of knock something out because of people’s perceptions that may not even be there, and ja, and I just think you know more needs to be known about it, and people need to be more open-minded. I mean I also know that you know my mom said once to me, being quite racist, like - it’s what gardeners smoke, it’s what workers smoke. It’s a black thing. Ja, maybe it is, maybe it isn’t, but who’s to say, and I mean surely there are benefits for it. I mean, mankind for centuries has been using various substances to achieve certain things, and I don’t think it can be all that bad.

K In moderation, obviously.

R Ja, obviously in moderation, ja.

K Do you know of anyone who has used it for relaxation purposes?

R We had a maid once at our digs the one time, and she actually used to grow it, and she used to make tea out of it, and she never used to smoke it, but I don’t think it would
actually do anything. I mean I’ve taken marijuana in lots of various forms, and there are slight differences, but ja, definitely more relaxing, I think, and it helped her arthritis and her rheumatism and all that sort of thing, so maybe it’s a psychological state of mind, but I don’t know, but I definitely know there are benefits for it. In California now people are allowed to use it for medical purposes and that, and I mean, if I got AIDS or something like that, I think that would probably be the only thing, maybe it would weaken my immune system, but the only thing that would relax me and make me maybe more content.

K And the Rastafarians - I think that’s quite a large portion of society, maybe not here...

R Ja, in certain sectors or parts of the world. Ja, they have their own beliefs. They think it’s a thing given by God, you know, I’m not too sure exactly, but you know, they’re more into this sort of thing - we’ve got to use it every day to achieve sort of spiritual enlightenment, and to meet the deity and stuff, but when they start talking about ‘Infar Halos Salasi’ and that, that’s where I’m put off by the whole thing, I mean, because obviously they believe he was the messiah, or something like that. To me, that’s not the case.

K Okay, so we’ve spoken about decriminalising marijuana and a few experiences that you’ve encountered. Perhaps we can start at the beginning, and let’s try and look at your experiences. If you can if possible start at the beginning, as far back in your life as you want to go, okay? Try and relate it to your drug experiences, or alcohol experiences, whichever applies. Try and bring your family into it. Tell me a bit about your family as well, your parents, your education, perhaps your high school days, primary school days, your friends, everything that could relate to your use of any particular substance. Then perhaps go through to varsity, and see what we come up with there. When you first started taking drugs, what did you take, where did you get them from, and so forth. And then let’s just see where that discussion lead us.

R Okay.

K And, I meant to say this at the beginning, but if there is a point where you’re not happy with the way the discussion’s going, please tell me.

R Okay.

K And, I meant to say this at the beginning, but if there is a point where you’re not happy with the way the discussion’s going, please tell me.

R Okay. Well, I was sort of brought up by very conservative parents. My dad sort of left school when he was 15. His parents didn’t want to pay, or they couldn’t afford to pay, and he sort of started his life at 15 working, and he’s now achieved a certain status in society that he’s happy with. And I think that’s sort of clouded his mind in certain ways, because he thinks certain things should happen according to certain principles, maybe that he has, and so I was given the best as a child, and sent to the best schools. I was sent to a private high school, one of the best in ____________, and I got on fine there for a while, but I started to see that it was an institution that was trying to force people to do things in a set way, and there was no sort of scope for individualism, and you know it was very regimental, and I just started to get different ideas and I realised that I couldn’t fit in, and after O levels, which is our thing just before matric, and then you do A levels, I just said to my dad - look I’m sick of this, I don’t want to go back to school. I want to drop out, you know, I can’t take this anymore - unless I can get sent to an international school,
where people will be more open-minded, it was co-ed. I thought I'd be happier there.

K  Sorry, what standard is this?

R  This is like, when I was 16. So, I was sent to this other school. And things were better. People were much more open-minded, and I really had a good time. And I was always told about the dangers of drug abuse, and that sort of thing, and, ja, at my 16th birthday I had a smoke for my first time. It didn’t really do anything.

K  Cigarettes?

R  No, marijuana. I started drinking when I was 14, but not anything I don’t think to be concerned about, or heavily.

K  Like how much did you drink, perhaps?

R  I can’t say, it wasn’t a regular thing, say once a month, and maybe I had a couple of drinks, and get drunk once a month, but it would be like - I didn’t see the point in drinking alcohol unless you were going to get drunk, you know, and I mean I wasn’t allowed to drink at that age anyway, so it was a sneaky sort of thing behind my parents’ back.

K  Did you drink by yourself?

R  No, I'd drink with friends. But sort of before the whole marijuana thing, maybe I did experiment quite a bit with alcohol, sort of now when I was about 15 before I left, I used to go to a friend’s house and we used to sneak out and we used to steal alcohol and get drunk, and then his friends would join us, and we sort of say would go on a bit of vandalising campaign. I don’t know if it was being under the influence of alcohol, I just thought it was maybe just a fun thing to do at the time. This went on for a couple of months, but I only really got involved three times or so, I can’t remember exactly, and then, you know my parents found out that I had snuck out the one night to go on one of these campaigns. They didn’t quite know what I’d done, so I was grounded and these guys carried on doing it, and of course, eventually the police got involved because they actually caught them, and of course, they mentioned my name for past sort of things that had happened, and that’s maybe where things started happening, and then my parents were called in, we were arrested, and there was this whole big thing. Our parents managed to pay the people and pay off damages and stuff, so nothing was said about it again, but you know my parents were quite shocked, you know, which is understandable. Then I went to this school when I was 16. I was 15 when I got involved, and I didn’t see those people again.

K  How much and what did you drink at that time when you went vandalising?

R  I think probably like a quarter jack, which is probably about 250ml of spirits, you know, or a bottle of wine. Not even probably, and I'd be quite drunk. So I did that, and then I moved to this new school and that's where the drugs sort of became more, you know. They were more there, and I now had friends who were smoking marijuana regularly, and
I didn't have a big problem with it, and then I always wanted to do it, so it was never I
was forced into it or peer pressure, you know. I've always wanted to do it.

K  Why?

R  Maybe just to be different. Maybe just because people said that it was illegal and it was
bad that that's why I wanted to do it, because I never wanted to as a child and while I was
growing up, I always did think no it's bad it's bad, but not really knowing why, but then
when you start to ask questions and people can't answer them or they tell you something
and you find out otherwise then you're more keen to experiment.

K  So it's more like forbidden fruit...

R  Ja, I think so, and also like my whole concept with religion took a different turn. I was a
Christian and I got confirmed when I was 14, and I was told all these things, and when my
priest couldn't answer my questions and actually when one of the pastors, actually
counsellors, was actually had up for sexually assaulting young boys, you know, that were
my age, and I mean he did weird things, not to me, but I mean like when we went on
campings, he would make us take down our pants and smack us with a bat, which you
didn't think was unusual at the time, but now thinking back to it, it is a bit unusual, you
know, and a bit demented, so all these sort of things started to happen, and my parents
then got divorced when I was 16 as well, and just that my whole concept of society,
religion, family and just the way you're brought up that the family's like a unit, and when
that crumbles and is destroyed, there's really nothing left, and I realised you know I had
big issues with my father, because of how different we were, and my mother we used to
fight, and my sister we always used to fight. So, it was pretty hectic, so I realised I was
on my own from a very young age I'd say, or maybe that was just in my mind, but that's
how I felt. So I felt that I could basically do what I want and I was going to do that. Ja....
So, then I went to this new school, and as I said there were a lot more drugs around and
that, and I got involved, really nice people, and I never had any problems. School work
was fine - it didn't effect my school work. Ja, then you started to hear how police are
watching you and that whole thing came into it, and then the police came and did a huge
big drug sort of counselling session at our school, and they told us stories about what LSD
would do to you, and it was all a load of rubbish.

K  How did you know that?

R  I didn't know that, but I assumed it was because the way they said like when you're
tripping you start to see ants all over the place, and you'll freak out, and all this will
happen, and I was always dead against hardcores drugs. I didn't think that marijuana was
a hardcore drug, so I was all against that. And then one of my best friends went and took
a cap of acid, and told me about his experiences, and I felt in a way betrayed, because
we'd promised that we'd never do that. So, after he'd done it, then I'd wanted to do it,
because he'd done that. So then as soon as I got the chance, I did, and I was probably 18
and it was New Years, and I took my first cap of acid, and it was brilliant. It was really,
really brilliant. It was only like a quarter, so it wasn't that hectic, but I realised that
everything now was a lie. So now I was encouraged myself to do more, and I had a friend
I'd made friends with from overseas, and he regularly took ecstasy - quite a few in one night - and I was still into my drinking, so I'd take the odd half, but it never really did anything, and then went I got to university, that's where my experiences my drugs sort of really took off.

K Here - Natal?

R Ja, and then it lead from one thing to another and eventually I'd tried a lot of different things, and anything and everything, from the thins abuse to like seven or eight thins in one night, which is when I look back to it, I think how ridiculous.

K Sorry, what is that?

R They're like diet tablets. Then things like that to chloroform, you know. Getting friends involved in that, and getting just wasted all the time, and I thought that as long as my varsity work didn't get effected and as long as I could cope with all that, which I did, I didn't have a problem with it. You know, I actually thought I was quite clever being able to achieve all these things, and I didn't go to lectures, and I managed to get through and I thought it was all fine. Then in second semester of first year I got an ulcer and I had really big problems with my stomach and that, and I didn't think it was related to the marijuana or the chloroform or the thins or anything. The doctor said it was alcohol, but I only realised about a year later that it was obviously because of all those things. So, that all sort of happened and I started to feel different to other people. I could only sort of relate to people who did drugs, you know. Then I got into the whole rave scene, and I felt like it was one big unity, and this was where I belonged, and maybe I felt that whole family thing again, maybe.

K Just explain that...

R This unity, that you can get along with these people because you're the same as them, so maybe I felt this feeling of belonging.

K OK, which you missed when your parents were divorced.

R Ja, I missed maybe with that, and just with growing up, and then end of first year I got arrested - caught with possession of marijuana - got convicted, and then that brought me down off this pedestal of God-like complex, you know. I started to realise that I'm only human, and that you can't keep on going on and doing these things regardless of the law and of society, because you will get punished. That sort of brought me down, so I didn't give up - I couldn't give up - I was actually addicted I think. I hate to say that, because no-one ever thinks they're addicted, but I must have been.

K Addicted to?

R To marijuana. Because I'd smoke everyday, but always think that I could stop if I wanted to, so therefore you don't have an addiction. That's how I'd see it. Ja, then I broke up with my girlfriend, who I'd been going out with for about five months, which was quite
traumatic. I think more for her than me, because she didn’t do drugs of any sort, and I sort of said well listen, I’ve got to do my own thing, I’ve got to experience what I’ve got to experience, and I was unfaithful. I went to a festival and I met another girl who did drugs, and this is what I’d wanted - someone who I could do drugs with and to sort of achieve something like in state or something. I don’t know what it was, but...

K Also like a unity...

R Ja, maybe. So, I broke up with this girl. She broke up when she found out, so it got a bit hectic. This girl seemed really nice and everything seemed to be going along fine, but as time went by, I started to realise that she had a drug problem, and I didn’t have a drug problem, because every day she wanted to take drugs, so every week we were probably taking three or four e’s, a couple of trips of acid, speed didn’t even come into it, marijuana didn’t even come into it and alcohol didn’t come into it, so I was doing all these different things...

K So, you’re saying you weren’t taking alcohol?

R No, I was. I’m just saying that in my mind it was irrelevant, because of everything else. It didn’t seem to be important or, you know, an issue. It was just always there. And, ja, things went along for a while, and then I realised that things were not so good. I mean she would start stealing from her work, and I never knew, and she would always bring me new clothes. And then I started to get suspicious about where she got the money from, and then she started stealing drugs. Of course, I became involved with that. I guess it was just to support the habit. That all started, and eventually I just wanted to get out of the relationship. I was getting in too deep, and things were just getting too hectic, and I found that I could only relate to her when I was on drugs, whatever it was, and I realised we’d had nothing in common, and then when I went back to for the one holiday and didn’t see her, I was involved with my other friends there, but it was different. They were all dealing drugs and stuff, so it’s always been around me, and I don’t have a problem with it, maybe because it’s always been around me, but obviously the consequences are very hectic if someone gets caught or something, but it was never a factor, you know. You’re along for the ride. Then things got nasty between me and her when I came back from my holiday, and she tried to get me arrested for dealing. She didn’t succeed. And all sorts of various things happened. She tried to beat me up the one night, you know. Things got out of hand. I was getting threatened, and things just got out of hand. And that’s when I realised that this whole thing is just sort of a farce. The whole rave scene that I went, and I thought was so brilliant, the drugs started to show me something else. They started to show me a nasty side of life. It got very like sexually deviant, you know, girls were just becoming sluts, and guys just wanted to have sex, and it just got all nasty, and everyone was just in it for themselves, and no-one actually gave a stuff about you. That’s how it actually really turned out to be. You know, now if I want to achieve what I used to have, I can’t. I don’t know why. I just can’t go back to what I used to have. I mean, I used to have like out-of-body experiences, and...

K While you were taking drugs?
R  Ja, especially on LSD. And mushrooms and stuff. It just doesn’t happen anymore.

K  And do you miss that?

R  I do. Because it was amazing. It was really, really amazing. And then a couple of, well not really friends, but people I knew, sort of lost it, and one guy was admitted to Town Hill. It was always a big joke, you know. If you can keep control, and I know at times I must have actually lost it, because people would say - you were mad last night - and I would think it was so funny. And I still think it’s funny, but it’s not funny. Because someone who goes mad, never thinks they’re mad. And, ja, things just got out of hand, but luckily, as long as I was passing varsity I thought there was no problem.

K  You didn’t see that you had a problem with drugs. You wouldn’t have said that.

R  No, because I could do it in moderation. And I think I did do it in moderation, and other people weren’t doing it in moderation, but what is moderation? I would not be surprised if someone said to me they took five e’s last night. You know, I know that’s not in moderation, but it wouldn’t really shock me.

K  It might be in moderation to them.

R  Ja. I know people who take up to ten, and I mean that’s no lie, and another funny side of that developed. I now feel old and I’m out of the scene even though I’m only 23, and I see now like first years and that who I see around and talk to, and they’re into this whole rave culture now, and it’s like I’ve been there. And they must find out for themselves. You can’t obviously go around saying - oh no it’s evil, and you know people are horrible - they must find out for themselves. And it’s just so funny to just...I feel like I’m on the outside now looking in. Even if I still do take drugs now, they don’t have that same effect, so that’s why I’m contemplating even giving them up, but I don’t want to say that because I don’t see the problem with it. But it just doesn’t give me that satisfaction that it used to give me.

K  What are you taking now?

R  Occasionally, I might smoke marijuana..

K  How much?

R  In the past I used to be able to smoke, say, up to 10 cigarettes not a problem in a day, but we didn’t generally do that. We’d have bongs, or pipes, or other methods...

K  At school?

R  No, at university. That would be that. Maybe I’d take the odd e here and there, but they don’t really work anymore, so I don’t see the point, but friends that I still have do it, so just to sort of fit in with them you might do it, but there’s no pressure to do it if you don’t want to do it, but obviously it’s a bit blind if it’s like you’re at a party and everyone’s
drinking and you're not, you know. It gets bit boring, I suppose. I've taken cocaine. I would still take cocaine.

K When did you last take it?

R Probably about a year ago, ja. But I don't think I'd ever do heroine, because I don't think that's something that I could control. And I don't believe that it's something you could just try. But then yet again, I don't know. Maybe one day I'll be a bit drunk or something, and I'll get offered it, and I might have it, but I hope I won't. I have no intention to do it, and I don't know anyone that does do it. I know people who have done it, but that's as far as I want to go with that sort of thing. Crack, I've smoked crack - quite a few times. That's been really nice, but I still don't understand. People also say that that's worse than heroine, and people sell themselves for it, and I just don't understand how people can actually do that. I never go without eating, or food, or something like that, and spend all my money on drugs. I just wouldn't do that. It just doesn't come into the picture.

K And drinking?

R Drinking, ja, drinking I think is becoming a bit of a problem now, because I think I've given up marijuana and drugs to an extent, or I hardly ever do that, but drinking is a bit of a problem, because I do drink quite a bit, but I think it's also an escapism as such, because I tend to find Maritzburg quite boring, and there's actually nothing to do, so maybe that's a silly way of looking at it, but I believe that when I've got my next degree I'll be able to start work and then I won't be able to drink, and I know like when I've got exams or stuff on like that, I don't drink, so I think it's just sort of more of a phase.

K Would you say it's more of a social thing....

R Ja, more of social thing. I mean I never sit at home and get drunk by myself or something like that.

K Have you ever taken drugs by yourself?

R I've smoked marijuana by myself a few times, and I think that's a good thing, because you do become sort of introspective. And I used to think more it would help you think more, but now I think more it clouds my mind. You know, it makes you sort of goofy, or something.

K When did you last take dagga?

R Probably about a month ago, ja, ja. All these things don't have the same effect, so I just don't see the point, ja.

K And your alcohol that you drink - how much, and what?

R It's sort of like before when you start to drink a lot you would get sick, and I hardly get sick. Maybe once a year I'll drink too much, and get sick, so I could probably drink in an
evening a bottle, ja, of spirits or something.

K  Brandy...

R  Ja, rum, whatever. I know that’s not right, but, ja, it’s just done anyway.

K  Okay, and how often would that be?

R  I wouldn’t drink like that very often. I’d say probably like once a month like that, which is often, I don’t know, but ja. But Generally, I’d be able to drink about eight beers in an evening, not counting shooters and stuff like that, ja.

K  And is this ongoing, or how often would that be?

R  Say more often than not three times a week.

K  Would you be over the limit with that? Would you drive?

R  I would drive as well, and I know that’s over the limit, ja. It’s something I’m trying to come to terms with. I’d prefer not to, but of course, when you’ve had one, or two, or three beers, it’s like you think you’re not going to be caught, and that’s the danger and that’s when you will get caught.

K  So it does alter your cognition - how you think...

R  Ja, definitely.

K  And you mentioned your experiences, I think it was when you were taking acid when you were about 18?

R  Up until last year, so for the last sort of four, five years, ja. Mushrooms...

K  And you mentioned these wonderful experiences. Perhaps tell me about them. What did you experience?

R  The first time I really had an out of body experience was on mushrooms, and I actually felt....obviously people who don’t do it will say - oh, it’s just because you’re so sort of - I don’t know what the word is, I don’t want to sound rude - like so sort of tripping, and I felt like another body coming out of me, and it actually freaked me out, and it only lasted for about five seconds, but it was like amazing. It’s like...I think when people astro-travel and stuff, and maybe what happens to those Indian, or whatever, medicine men, and they have that out of body experience, and I know other people have had it, and ja, you just feel something coming out of you. But that’s quite an extreme sort of thing, and it’s only really ever happened once, but generally it’s just like obviously colours are much brighter. You can feel that things are alive, you know, and ja, if it really works nicely you can feel at one with nature, one with the world, one with society, one with everything, but you see what started to happen is maybe I started to realise when I had these nasty experiences...
that it wasn’t like that, so now I can’t achieve that. Now I only start to see the bad things, and I start to get uncomfortable and upset and a bit paranoid and freak out, and ja...

K When you’re taking it....

R Ja, now. So, I can’t have those experiences anymore.

K But do you think it’s a conscious thing?

R In what way do you mean?

K You know, like now you’re saying that you only see the bad things. What I’m thinking is that before you said you only saw the good things. You are consciously aware that you are going to have a bad experience....

R I think that plays a big part, because if you read books or speak to people who do it, I know certain people who’ve never ever had a bad experience, and it is your state of mind. But I think because I view the world differently now to how I used to see it that I - ja, no-one’s there for you, no-one’s going to be out there to help you, you know - it’s just what you can do for yourself is how I see it now, and maybe that element comes into it, you know, so I can’t achieve that. I can achieve a nice state of euphoria, say if I go out into the bush or something like that, out of society. I never take acid or anything in a club, you know. It used to be fun to do that, but as soon as you’ve had a nasty experience or something, you just can’t come right again, ja.

K And you mentioned a few sentences ago about a sense of belonging. Was that when you were taking drugs...?

R No, not even then. Just all the time you’d feel belonging just because those people did what you did, and you’re on the same wavelength and they were your friends and all that, but then when things start to go wrong, when you really analyse friendship, you realise that it’s just a false thing....

K It’s really just the drugs...

R Ja, maybe it’s just really the drugs, or really just the jol, or really just the rave, you know. And you realise that there’s very few people who that are actually your friends for who you are and what you are, ja.

K And what do you think now? Do you feel that you belong?

R Ja, I feel that I belong in my own sort of sick way. I don’t feel like I belong to any certain sort of group now, which makes me start to think that I’m cleverer than everyone again because I’m not fooling myself. I don’t feel I belong in the whole drinking circle, even though I may go there, and get drunk quite a bit. I know I don’t belong with the rave sort of thing. I want to belong in the sort of corporate world now where I want to make money, and achieve something for myself so I can choose more or less or have the choice.
That's what I think now. So, I don't really care if I belong or I don't belong, because I've got a lot of friends now, who I'm just associates with because they still carry on doing what they're doing, and I'm not involved really, so....

K So you don't feel the need to fit in anymore?

R No, I don't even want to fit in.

K So what I'm hearing you saying, is that you're quite happy with where you are?

R Ja, I mean I've got a stable girlfriend, the girlfriend that I broke up with when I was in first year to go off with this other mad girl. We've been together now for over a year and a bit, and she doesn't do drugs at all, but at the beginning of the year she smoked marijuana with me for the first time, and she's done it about probably three times now, and it was really nice, and she doesn't have a problem, and I don't want her to do drugs, and I don't want her to do that, because I think in a way being sexist, I don't think women can handle drugs as well as men can. I think they've got a different metabolism, maybe they've got more hormones or something, but from what I've seen they definitely can't.

K There has actually been research done in connection with women and men, and how much a woman can take, especially drinking, alcohol-wise. You know, a woman's capacity for drink is lower than a man's. When you were at this school in __________, and you mentioned that it was a very rigid school, and you mentioned that you felt that you didn't fit in, is that what you said?

R Ja.

K Do you perhaps see a link between that and the fact that you went to this new school and in order to fit in, you had to do things that others did...

R No, I don't think that at all. At the new school I went to, no-one sort of specifically did things, but I had really good friends at the new school I went to - girls and guys - but I also started to develop friends outside of school. They way I look back at it now, they were basically the losers and mopers and had nothing going for them, and when I got into that I didn't realise that. Obviously my mom freaked out when I brought like a Rastafarian guy home, and you know she couldn't believe it, and she knew I was smoking marijuana, but sort of ignored it, because I don't know - she didn't want to get involved I guess. And then when I got arrested she sort of blamed herself for that, and I feel terrible for putting my family through everything I have put them through.

K Why did she blame herself for that?

R Because I think a lot of people will always tend to blame the parents for a child's behaviour, and I think that's just what she was doing. Because she knew what I was doing, and she didn't stop it before it came to the fact with me being arrested.

K What sort of discipline did your parents administer when you were like 12/13? Were they
very strict....

R I tend to think that they were quite strict, especially my dad. I mean I used to get hit when I was a child. My last hiding was, I was always hit with like maybe a wooden spoon or a hand, and now I totally can understand that. I think that I would also hit my children, because I believe.... I was hyperactive and a crazy kid, and I was loud, and that probably came out - well, it did - when I was taking drugs, I was always loud.

K Do you think there's a connection between your personality and drugs?

R I definitely think there's a connection with my personality. I had to find out for myself. You know, I didn't believe people, and I still don't believe people, and maybe finding out for myself will be to my detriment, but you know I feel that I've done everything that I've wanted to do, and that was through drugs, and there's not much more that I want to do now, or can do now. And now I just want to sort of be able to maybe fit into society to get what I want out of it, whether I'd agree with it or not.

K Do you see drugs and alcohol playing a part in it?

R No, not at all. What I would like is to maybe turn 60, retire somewhere, smoke marijuana, and do my own thing. That's an idealistic view I have, but whether that's going to work out is a different scenario. I probably might even not smoke marijuana again, I don't know. Because, you know my life's only just sort of started to change this year, so I'm sort of on uneven ground. A lot is hinging on whether I pass my next degree, and you know if I don't fail certain subjects...my parents have made it clear that I'm out of university, so a lot is hinging on it, so I can't really say.

K So do you think perhaps you've stopped taking drugs because of that?

R No, I don't think so, because I think I really wanted to, but it was more of an incentive. But the funny thing is, when I was in second year and I got involved and took more drugs than I've ever taken before and more alcohol when I got involved with that girl, I passed everything - I had no supps or anything, for the whole year. Now, even if I try my hardest I'll get supps. And I don't understand it. At times I just get so disheartened that I think I may as well go back to how I was, but I know that's not really what I want. Ja, I just don't know why.

K At the moment, you're still quite confused as to why...

R Ja, I am definitely doing a harder degree , so it is a harder degree, but I've put in the hours, I've put in the work, I think I know everything, and I always seem to come short somehow, so I don't know.

K And your drinking - that's not effecting ....

R I don't think so. I manage to go to lectures and stuff, and I never used to go to lectures, and this year I've started going to lectures. When I was in first year, I probably went each
semester probably to no more than 10 lectures. And now I go to all my lectures, I put in the hours, I put in the effort, I try, and I just seem to get nowhere, well, not nowhere. Maybe if I didn’t put in what I have been putting in for this degree, I would be nowhere. So, it’s really difficult to say, ja.

K But you’re not drinking between exams and when you’re studying ...?

R No, not when I’m in exams. If I’ve got tests during the week, I may not drink two days before the test. But I think alcohol now is starting to effect my memory. I never thought it would, but I’m starting to feel that maybe it is, because if I have a heavy night’s drinking and I go to varsity the next day, and try to concentrate, it’s very difficult. It’s almost like a strain, and I have read up new facts about alcohol, that I actually do think it plays a big part in memory loss and stuff, and I think that’s maybe starting to happen.

K Ja, that is true. So, if we had to look at your alcohol consumption on an average, would you say like three times a week, about eight beers each time?

R Ja, or more.

K And hard drinks, like gin and stuff?

R Generally, I’d drink brandy and coke, or rum or something and then shooters.

K And that’s like a bottle? Once a month?

R The bottle’s probably like once a month.

K Half a bottle for the rest of the time...?

R Ja, half a bottle for the rest of the time.

K Over how many years has this been?

R Since I was probably about...big time like this, probably since I started varsity - five years now. And I do feel my body is taking a punishing, and I don’t feel healthy anymore, and when I was at school obviously it was different because I was very active in sports. You know, if I look at the tell-tale signs, what parents must look for...those symptoms are there. I used to go to gym, I used to do all those things, and I don’t do that anymore, but I mean if I get through my exams this semester, I vow instead of drinking as much as I do, I’m going to put that effort and energy into going to gym, because that’s what I really like doing. But, then the whole gym thing fell out because I really had been to gym when I went to this sort of new school than I did before, because I was in first team rugby and that, and my one gym instructor smoked marijuana.

K At school?

R No, at the gym. So, whenever I went to gym, we’d have a joint or something, and his
whole attitude was it would make you work harder, so I sort of believed that. But then, I'd be so stoned, that I wouldn't want to do gym. And then it ended up just me going there to smoke.

K And how old were you then?

R I was probably about 17, ja. So then, it was an excuse to just go and hide at gym, and you wouldn't want to do gym. Now, I'm hoping that... well, everyone always says things like, I'm going to give up, I'm going to do this, but you know I'm to try get back into something. I mean I do diving quite a bit now, which is really nice. And it's kind of like being on acid or mushrooms, or something. The colours under the water. So, that's I think my new fix for the moment...

K Healthy fix....

R Ja.

K You mentioned a little while ago about tell-tale signs, and if your parents had to see the signs... what did you mean by that?

R Well, I don't know personally, but reading up on it, people say you get lethargic, you lose your drive to do things.

K Is this when you're taking drugs...

R Or when you are involved. Not when you're really taking it. You just don't want to do anything. I mean, I came to varsity and it was like - are you playing rugby, are you playing rugby? - and no, I couldn't even be bothered to play rugby. It's much more fun to sit watching TV all day or playing computer games, or drinking or smoking and something. So those are the tell-tale signs - ja, bloodshot eyes, maybe loss of appetite, but it can go either way, you can get like munchies - eat too much, or something, I don't know, but ja.

K And you also said that you were hyperactive as a child. Is that just a term you're using, or were you actually diagnosed as hyperactive?

R No, I wasn't diagnosed, but I know I was hyperactive. I mean I was wild and out of control, and I suppose now if Ritalin was around then I would probably have been put on Ritalin.

K So you weren't on Ritalin then?

R No, but my mother gave it to me once - I did calm down. I was completely changed. My whole attitude changed, and I was like quiet, and behaved, I suppose. Afterwards, I told her a couple of years later I was cross with her for giving me that.

K Why?
R Because I don’t think it’s right to give a child drugs to change their attitude and change their behaviour. But then I saw a documentary on this English kid, and he would break things and throw things and shout and squeal, and the mother was just giving him like four or five Ritalins a day to try and keep him calm, because he was abusive at school, but maybe that’s just because of his upbringing from a young age, I don’t know. Because if I’d tried that, my dad would’ve given me one good hiding and then I would have sulked and cried for an hour or something, but then I’d be alright and calmed down. So I definitely probably think there are different ways, but I don’t know, you know.

K It’s quite interesting that you were actually cross with your mom. How often did she give it to you?

R She only gave it to me once, and then she probably thinks - how could I be cross with her for that, when I’d gone and done all these other things, you know.

K And why did she give it to you? Had she been to a doctor?

R Because a friend came from overseas and had some that she’d given to her children or something and - ja, just give it to him, he’ll calm down - because I was like annoying, and she’d wanted to talk to her friend. So my mom obviously thought - ok, let’s see what happens - and gave it to me.

K And your school work? What was your school work like?

R At school I was always like bottom of the class. It didn’t really bother me. I didn’t mind. But then when O levels came, I did really well and got half colours at school and it was a big surprise to me, because despite maybe the papers had been leaked and I kind of maybe knew what was going to come up. But, ja. Then my parents thought - jus, so maybe there is something to this kid after all. So that’s why I got to choose what school I wanted to go to, when I said I was dropping out of school. My A levels were average, nothing really big. Varsity - I struggle at varsity, but maybe that’s because of how I’ve been, and what I’ve been doing, and varsity’s always had to fit in with my plans, you know. So, it’s been like that. But now only sort of this year I’ve now had to fit into varsity’s plans - I think only just to pass, you know.

K Do you think perhaps people who take drugs and alcohol feel like you do - everyone else and everything else has to fit into their life, perhaps?

R I think, ja, generally I think...I don’t know about the fitting in, but I generally think that everyone does go through that sort of God-complex, and everyone else is inferior to them - definitely that.

K And friends - did you have friends as a child?

R Ja, I had lots of friends, ja.

K And high school?
R High school, ja. I was always involved in sport, and I think that's where your really good friends were, ja. So I always had friends, even now. I've never had a problem with friends.

K You did mention that it wasn't peer pressure for you. But what do you think of peer pressure and drugs?

R Obviously, peer pressure does to a certain extent play a role. Maybe it plays a role for people in a peer pressure kind of way, I don't know, because it hasn't really done that for me, I don't think. Obviously it has played a role for me to a limited extent, I think. But, I generally think it depends on your personality, and your drive, and what you want to achieve. Like, I've really been overwhelmed with work and stuff this semester, and you know, I really want to get something, and it's just so difficult. I mean I found out like yesterday I've already got a supp, you know. I mean, it's just so disheartening, and these exams I tried so hard not to even get supps. I mean, last exams I was aiming to get supps. Now, I didn't want to get supps, and I still got a supp. So that's sort of made me feel like I'm either not doing something right, or I've got to try 10 times harder. And I think that's all it is. Because I know that I'm capable of getting this degree, and this seems to be like my big thing in my life now. You know, my sister's in the __________; my mom's moving to __________; my dad's probably going to the __________. So, I'm in a way feeling deserted - again - but it's always been like that. So, I know that in order to achieve something that I need to achieve for myself I've got to get this degree, and that sort of is the gateway as such.

K So, the family unit also seems to play quite an important role in your life. [acknowledged] How was your family when you were in school before the divorce?

R Well, my parents were married for 23 years, so when they suddenly came across...well, I was adopted as a child, so was my sister, but not that...maybe it has played some other role, but I don't know, but I've always felt like I belong, but then my dad became maybe arrogant - my mom just said he changed basically because the money and the wealth, and maybe the power that he had - he could influence people. He was trying to do that in the marriage or something, I don't know, but that whole sort of thing crumbled and broke down, and so, but as a kid I also felt like my dad didn't do enough with me. I always wanted to go hunting and camping and fishing, and he's never been into that sort of thing. So, and because he was quite strict I always felt like he was out to get me, kind of. Ja...put me down. But now, it's like he's turning around, and I mean he wants to take me overseas and do all these things with me. But then again, I mean like my girlfriend's pointed out that it's always on his terms and if it fits into the way he wants to do things, and it's got to be his rules, you know. And I'm just waiting for the day when I can finish my degree, start working and be able to just tell him and put him in his place, you know,. You can't really do that when he's still supporting you, which is why I appreciate it, but you know there's other ways of doing it I think. Ja, so it's still I'm in the big family issue as such.

K And how do you think this has effected your decision to take drugs?

R I realise that I can’t have the best of both worlds as such. I mean everyone would love to
always be - well, I think - maybe be drunk, or on drugs, or something like that, but you can’t do it. I mean, you can’t expect to work, hold down a job or go to varsity when you’re not functioning 100%.

K And your early childhood - when did you find out that you were adopted?

R As far back as I could remember - it was never hidden from me, which I think is good, because if it had been, it would have been a big problem. And I was always sort of hoping for this other family thing that I would have if I found my biological parents. And I had this sort of idea that they would be this perfect family, and I actually met my biological mother last year - I managed to trace her down, and she’s actually living in _________, which is quite a coincidence. And she’s not what I’d expected, and in a way now I wish maybe I’d never met her, but I can’t say that because I needed to have peace of mind, you know. I learned a lot about what had happened, and why she had to give me up, and all that sort of thing... ja, but it wasn’t what I’d expected, ja.

K Your early childhood - and you said your father wasn’t always there for you - do you think that’s perhaps played a role in your first experimentation with alcohol and drugs?

R I don’t think so, because I was always allowed to drink, I mean in moderation in front of my family, you know they had wine at the table and all that. When I was 14 I remember the first time I got drunk, we were at a cousin’s farm, and my dad sort of I think knew I was going to do it, because I was at that age, and sort of left me, and he went back to the main farmhouse, and left me at the sort of party. And obviously there were older kids as such there, and they were buying me drinks or giving me drinks, probably just to have a laugh, you know, and I got wasted, you know. And I probably I vowed never to drink again, because I got so drunk but that was obviously not the case, you know. So, there was also (?) vote to sort of go and do my own thing as such, because in order to do that, you can’t totally be stressed (?) somebody.

K So, your parents let you do your own thing in a way?

R Ja, in a way.

K But then again, you said they were a bit strict.

R Ja, so it was always on their terms.

K To do your own thing?

R No, when they told me to bail us (?) out of it, I could do it under their supervision I suppose, which is what all parents would do. I mean, I wouldn’t just say to my kids - right, you can just start going out and do whatever you want. So, I mean they were always fair and that - to allow me to experiment with alcohol and stuff, so it was never restricted, and my dad always had the philosophy - like, if you do restrict it, it will become a problem.
K And do you go along with that?

R I don't know now - because I think maybe it has sort of become a problem for me, anyway, but then again he drinks generally quite regularly now with his friends and stuff, and I don't know if he drinks as much as I do - but I'm sure he does, I don't necessarily know, but ja....

K And your mom - you haven't spoken much about her....

R Ja, she's always sort of been there for me, but unfortunately for her, she hasn't always had the finances to give me what I need, and sort of what I want, which has really...if she could, she would, and I mean she does, but you know I always used to side with my mother, and when the divorce happened, lived with my mother, because my dad was quite hectic, and he was always the boss, and I mean he still is the boss, because he pays for everything, and it's always been like 'the boss' sort of thing, you know. Ja, so as much as she tried to help out and stuff, she couldn't really afford to, so it was a bit hectic. Ja, she's now going over to __________ and she's going to marry some other guy there. You know, he was living with us for a while, and he had three children, and there were issues there, you know. Ja, she's going to go and try to start a life there, and I mean that's good for her.

K And how do you feel about that?

R Well, I'm annoyed, because when she came back from the holiday at the end of the year, she said she wasn't going to move in with him, but then all this sort of thing has happened in __________, you know, and it looks like there might not be a place to live, and you know my parents are like almost 60, so there's not a lot of people left in __________ that they could have relationships with. So, in a way she's forced into going over to __________ to marry this guy - to live there. I don't necessarily agree with it, but I probably, anyone would probably do the same thing as her, put in the same position, so I don't know. That's just life - you've just got to understand that the way you want things or the ideals that you have, can easily have to change - like it would be like sort of pimping your friends out because someone's threatened your family. It's not an ideal world, and your set ideals will always change, and I know that the whole drug thing, if anyone was to get arrested when they did, I mean my best friend pimped me out, so I got arrested, and that's always been the case, so I just know that that's what people do despite their loyalty to you. But when things sort of go wrong, people are only there for themselves, and I've always felt that I've always been loyal, and I would take the punishment for other people, you know, and I have done. People don't seem to do that, and certain people I think maybe would, but it's always a different scenario when it comes to the crunch, you know, so ja, I just figure that you know everyone is maybe in it for themselves, but how you get along in life or whatever, is up to you in a way.

K So, I also get a sense here that you must feel a bit betrayed and abandoned in a way?

R Ja, I do....I really do, to an extent. It's not a big deal. It's not like - oh, poor me, the world's so cruel to me or something like that - but it's just reality, you know. I don't feel
like I'm disprivileged or something in any way, you know. Ja, but it's just what you make of it. Because, it just is.

K Let's just go back now - to your varsity days. Where did you get your drugs from?

R All different sources. I mean like marijuana you can get anywhere, generally. I don't really know anymore, but when I was involved, you could get it generally anywhere.

K On campus?

R Ya, actually on campus, ja. You could. A number of different places. Harder drugs you could get from dealers who live in town, or Durban, or Joburg, or wherever. So if you really want to get drugs, it's not a problem. As long as you've got the money to pay...That would probably be the only problem.

K Do you know if there is any drug dealing on campus at the moment?

R You mean people who go to university, or who like physically bring stuff onto the campus?

K Physically bringing stuff onto the campus.

R Not that I know of, no. There are syndicates around that operate, and it would be very difficult to deal drugs, actually. I wouldn't even deal drugs, even though I had been involved in that side of things, if it wasn't from the syndicate, because it's all controlled, and I mean the price of an ecstasy tablet here is probably R90 to R100, whereas in Joburg you can pick up ecstasy for R60. So, it would be worthwhile for somebody to go to Joburg and bring ecstasy here and sell it themselves, but these guys will come and sort you out basically.

K So you have to be part of a syndicate. And those are all off campus.

R Ja.

K And obviously there are quite a few in Maritzburg.

R Ja, there are quite a few. There's probably about three of four main people. And another whole thing that gets me is that I know who's involved, and the main people, why are they still allowed to operate? How can the law not do anything to them? But they're here to come and catch people like me who will just use the thing, you know. And there's a lot of police involved as well. And I mean in the papers last year, the ex-head of police or something was involved with the whole Durban syndicate there, and when you see that everything is so corrupt, and so rotten, and so wrong, how can you have these ideals? I mean, I know cops who take drugs and will bust people, and will be on those drugs themselves on the weekend. And then they try to bust me the one time, they asked me - 'oh, so do you enjoy drugs?' 'ja, they're nice' - and they're like - 'ja, they're cool, aren't they?' And they try to be my buddy-buddy, just to like rub my nose in it, and often I
thought - ja, I maybe I'll become a cop myself, just so that I can bust people and get free drugs - you know. But that's just not me. I think that I would brilliant at it, because I know how someone who uses drugs acts, I know their hiding places, I know just how people operate. So, I'd be brilliant, I reckon. So, it would be betraying that whole thing that I've come out of. It would be my betrayal, ja.

K To others like you...

R Ja.

K Where did you take drugs?

R Generally at rave clubs, but I mean mushrooms and trips and stuff like that you could sort of take anywhere, and marijuana and that, sort of anywhere as well.

K And you always took these with friends - except marijuana, on and off.

R Ja.

K And drinking? You also drink with friends?

R Ja.

K You wouldn't just stay at home and drink and drink?

R No.

K Perhaps, why's that?

R Well, maybe because of something my father said that you really only had problems if you drink by yourself. That's like the first sign of alcoholism, if you do that. So, I reckon if I started to do that, I'd feel now I was an alcoholic, despite even though maybe I am. Even though I drink with other people. Ja. So, I wouldn't just drink by myself, because I'd feel that I'd be an alcoholic.

K So, at the moment, do you think you have a problem, or not? How would you look at it?

R I don't think I do. But, when I smoked marijuana every day, I never thought I had a problem there either. I think you'll only realise you've got a problem if you try and change what you're doing. Obviously, if I'm talking about it in that way, I must have a kind of hunch that maybe I do have a problem. But I feel that it's just because of circumstances, and that will change.

K Because you are trying to do things differently, is that what you're saying?

R Ja, and I feel like as soon as I'm working, I'm hardly going to be binging unless it's a company thing or something...
K And then how would you define abuse. Perhaps try and define abuse.

R Drug abuse or alcohol or whatever?

K Substance abuse, ja.

R It's difficult to actually say. I think it depends on the person, because one for me will not necessarily be enough for some other person who will take five. So I don't think that's abuse. So, I really think that it depends on the individual. It's a very difficult thing to determine. I suppose if you try sort of set limits or guidelines, you need to find a middle ground - what is abuse, what isn't abuse. But to me, two beers being over the limit is ridiculous. I mean, it's just insane. And I think it's even less than that now, because they've brought the limit down. But then, you know, it's the greater good of society because someone will have two beers and maybe kill ten people, or something, and it's always different when that's your family killed by someone else. I don't know, but the whole drug thing, maybe substance abuse, I really think it depends on the individual.

K And how much he consumes a day....

R And what he's happy with, what he can control, what he thinks he can control, or, ja.

K And how it effects his daily functioning.

R Ja, definitely, and I mean if you start stealing or lying and stuff like that, then you've definitely got a problem, ja.

K Do you know of any of your friends now who admit that they have a problem?

R No, no-one will admit they've got a problem. No-one will...

K Even if they are taking drugs every day....

R They won't admit they've got a problem, ja.

K Do you know people who are taking drugs?

R Every day, like?

K Well, not every day....

R But regularly?

K Ja, regularly.

R Ja, it will vary from all different sorts of things. That 'Trainspotting' movie was really a good movie, because it's just how a junkie's mind works - from chloroform to rohypnol to you know, to whatever, just to get that fix, or feel different or something. You know,
maybe because you’re doing different things you don’t feel like you’re a drug addict or you’ve got a problem, ja.

K So, as long as perhaps you feel that you can control it, you don’t see it as a problem.

R Ja, and then control for different people will be, you know, a different thing. I mean, my sort of which I like to call my rehab period would be during exams, you know, and that’s why I wouldn’t do anything, and that would just prove that I didn’t have a problem. But then it goes deeper than that, I think, ja.

K Do you think you could, as from today, perhaps say yourself ‘I’m not going to drink again. I’m not going to do drugs again’?

R I could say that, but why? And why now do that? I mean it’s the holidays coming, it’s when you should sort of do that sort of thing, but I mean obviously if I’m with my family or my father going overseas, I’m hardly going to get drunk in front of him or something, so ja, but it’s different when you’re with family and when you’re with friends.

K So it’s selective.

R Ja, it’s selective, ja.

K And the raves. You’ve mentioned the raves...in Maritzburg?

R There used to be raves here. They don’t really have them anymore. They have I think two rave clubs here now. There’s quite a few rave clubs in Durban. I don’t know if you know what a rave is.....it’s not at a club, it’s just a one-off kind of thing, ja.

K And clubbing? Much going on here?

R Not really that I know, because it’s a sort of a scene, and if you’re not in the scene, you don’t really know what’s going on and you don’t know about underground parties, and stuff like that. I’m sure it is going on, it’s just that I can’t say, because I’m not really involved anymore.

K And the places in town? Like the various clubs in town - do you go there?

R I used to go. I’ve only been to two rave clubs this whole semester - which is like unbelievable, but I now I’ll go to ________, and ________ or something and drink, and I’m still feeling like maybe it is better to go and have an e at the rave club, where people at least seem friendly, and you’re not going to get beaten up or you know just attitude from people who go drinking, because alcohol even makes me very aggressive, you know. That’s maybe why I always get into fights with people, or something, because I’m loud and I’m sort of extraverted, and I start to get a bit aggressive, and then people don’t like that, and it’s always maybe people who feel the same, and that’s when stuff starts happening.
are all like ex-cops. You know, so it's deep-rooted in there.

K Ex-cops?

R Ja, but obviously they know the whole thing, how it all works, so they'll be the perfect people to do it, and they're big, so you're not going to come and give them any trouble. It's really corrupt and a bit disheartening. But I wouldn't have a problem with it, if people were to arrest you, or something like that, because they really believe that what you're doing is bad, but when it's for other motives, ulterior motives, that's when I really have a big problem with it.

K Ulterior motives, meaning?

R Meaning like they're there to get it for themselves, or when they do it themselves.

K How do you know this?

R Because I've been involved, I've seen it, I've been in the scene for so long that you become aware of it all.

K Like practising cops right now are actually taking the drugs that they confiscate?

R Ja, I mean when do you ever hear about all the drugs that they've confiscated? What do they do with it all? You never hear of them destroying it, which is what they're meant to do, I mean get realistic. I mean when I was arrested for marijuana, the cops even said to me 'ay, this is good stuff, you know, we're going to enjoy this'. And I mean, when they even say that to you, I mean what bastards, you know sort of thing. When you get caught and they say this is rubbish, you must come and speak to us, we know where to get good stuff, you know.

K And did you?

R Ja, I've been caught a few times, but only once convicted, you know. And they all have different attitudes, and it's all generally just to spite you, or make you feel uncomfortable or to hate them more, or something.

K Did you see any cops taking...

R Ja, I've even got a couple of friends who are cops.

K And they're taking....

R Ja, ja.

K Are they part of the narcotics?

R No, I don't think I'd be able to comfortably get involved with sort of narc and that, but
I know that they do take, ja.

K  It seems to me like a whole complicated business. I mean it's not straightforward.

R  No, it's not straightforward. It's very complicated. Guys are nasty, and if you get involved with the wrong crowd, if you step out of line, you will get hurt, you know. That's what freaked me out, and I realised that these guys don't care. It's not one big unity. It's not people trying to build some good, or something like that...

K  You're talking about the cops now?

R  Ja, cops or people or whoever. It's an illusion, and I wish I still was maybe under that illusion, because it was nice, but now I can't be fooled by it.

K  And now you're actually seeing the light...

R  Ja.

K  And you don't like what you see?

R  No...

K  Maybe that's what's caused you to perhaps stop or try and slow down...

R  Ja. Maybe that is it. Maybe I've taken up for too long. I know people who will go out and take five e's and then the next day have a trip of acid, and the trip of acid won't even work, and I mean if the normal person was to have that trip of acid, they'd be off their heads, so, ja... I suppose it's like alcohol for me. I mean someone will drink two beers and be drunk, and eight beers I'll be just very happy.

K  Ja, that is true. It depends how much you can take.

R  Ja, ja...

K  Okay, let me just go through this, and see if I've asked you the questions I wanted to ask you...... Where did you get the drugs from when you were at school?

R  Generally from friends, ja.

K  And where did they get them from?

R  From, generally they would have friends who were the dealers. So, it's all like a friendship kind of thing, but if you weren't friends with anyone... I mean, I could go to a club now, and be able to buy drugs, you know, even though they don't know me, ja.

K  But won't they be scared that you were perhaps undercover...
Generally, no, you can read people. You develop this...you can read people, ja.

So they could tell.

Ja, they would pretty much be able to tell. I mean, I personally don't know how they do it. Because, I'm paranoid I suppose as it is. So every second person to me is a cop, especially if you're on something, and then they're all cops. But, you know, if you want to be a good dealer, you mustn't take anything, and be straight. But, not that anyone ever does - they all...

They all take it and deal with it as well.

Ja, so I don't know how they operate.

It would be interesting to know.

Ja, a lot of them just take the risk. Ja, there's a lot of money to be made, and generally they have their ways, you know like the drugs are kept with someone else, they receive the money. The runner will walk past, give you the drug. And you know, if I was dealing and if I was to get caught, I would bring up the whole entrapment issue, so that's what I think would sort of get me, maybe, I don't know.

Get you off?

Get me convicted, because of the whole entrapment issue.

So you'd say that it was contrived, maybe.

Ja, I know that the cops asked me. Ja.

It really is complicated, and not straightforward at all.

Ja, it's not.

I think you answered this question - I said 'tell me why you think you started drugs' I don't know whether we did go through that...

Ja, I think we did. It was like, just an experimental type of thing, because everyone told me that it was wrong, and I realised that it wasn't wrong, and I'd always wanted to try it, when I began to ask questions that weren't answered, ja.

What we'll do next time is we'll going into ways of...well, when you first met me, you spoke about how to prevent or to treat. I think we did go through that. In other words, according to you, Student Counselling, or Campus Health, are not doing a good job. I'm not too sure if that's what you said. The current measures are not adequate....

Ja, I don't know what measures could be used. I don't think that's really my problem,
because I don’t really, to be blunt, care about what other people do, but if you do care about what other people do I think that’s for you to find out, because what I know is that I’ve been to a number of psychologists and counsellors and that, and they listen to you, and then it’s all over. I don’t think there really is anything you can say to somebody.

K And also how to perhaps prevent substance abuse in the first place. Do you think you’d be able to come up with a few points there?

R The only way you can prevent it is if there were no substances around. That’s the only way you could. Like myself, I mean, there’s no way you could have prevented me from doing it. I would have done it, if I’d been able to. Then there’s that whole thing of... a dealer does just give somebody what they want, you know, and unless he’s not there, then maybe he won’t be able to give somebody what they want, so therefore there must be no dealers. Or there must be no drugs made. Drugs must be stamped out. That will never happen. So, ja, prevention would be very difficult. You can’t prevent it, you know.

K It is difficult.

R Ja. If you say ‘no drugs on campus’ how do you enforce that? ‘No firearms on campus’. I know people who walk around with firearms on campus. I mean, it’s just a rule that’s going to be broken. If any rule will be broken.

K Because it’s a rule.

R Ja.

K And these campaigns, eg. SAPS ‘do not do drugs. They harm you. They’re this and they’re that, and they’re really harmful’. What do you think about those?

R Maybe it’s good bringing it to people’s attention. It’s like an AIDS campaign. It’s good to let people know of the dangers and the consequences and all that. But, people are going to do it anyway, so you can only warn people and tell them. But I was warned. I was told. I would never have been arrested if I’d listened. I’d maybe never have got into the trouble I’d got into.

K But you knew about the dangers beforehand.

R I did. But I went ahead with it anyway. Everyone does.

K So what you’re saying is that they’re not effective.

R But I don’t know how you’d make them effective. I mean I was told by a teacher when I was in Grade 7 at school when I was 12, she said in our class that by the time you’re 18, more than half the class here would have tried marijuana. And we said ‘no, no, no, never, never, never.’ True’s bob: 18 - more than half the class had tried marijuana.

K Why did she say that? In what context?
R I don't know how it came up. I suppose she was telling us how bad drugs were, and we were all like 'we'll never do drugs. We'll never do drugs. No-one here will ever do drugs.' And we all believed that.

K So as far as prevention is concerned, it would be quite difficult...

R Ja, I don't know how you would prevent it.

K Perhaps next time we can try think of ways, and see whether the measures that are on campus at the moment whether they're effective. I also mentioned the diary. Are you still keen?

R I don't know how I'd quite do this diary...because I don't think I'm going to be taking drugs these holidays at all. But ja, if I have a few drinks or something, I will be able to maybe take note.

K A few drinks - meaning just a couple?

R Well, I'll be more specific. I'll try and monitor, but I don't think it's going to be very heavy, because I'll be with my father and family.

K And then how long are you going to be with them?

R Until basically the 20th July. Then I'll have supps. I won't be doing anything then, and then I'll be seeing you again in August.

K Do you think maybe then it would be better to start after you finish your supps?

R Ja, definitely. Because then I'll be more keen to do whatever. And see if I'm going to go to gym and try and do what I want to achieve.

K And then you make take marijuana or something....

R Ja.

K I'm certainly not encouraging it. It's not what I'm saying, but if you see that there's going to be very little opportunity or very little chance that you will do anything this holiday, and perhaps you've got supps from the 20th, it might be a little bit pointless.

R Ja. I can't see myself doing anything, no.

K So then should we leave it until when you get back.

R Ja, maybe when I get back, maybe a month or something after I've got back.

K I can give it to you when I see you, and I'll recap what you have to do.
R  Oh, okay.
K  And then we'll run with it for however long you think - maybe a month - and maybe that will bring forth better insight into something. Do you think that will be better?
R  Ja. Because I honestly can't see much more happening.
K  Because it is pointless just going ahead with a plan whereas it won't really be of much use.
R  Okay.
K  Do you know of anyone who would be willing to come and speak to me the way you have? Because now you know what the process is. You know that I'm not a cop.
R  I don't think that's what people are afraid of, and anyway I'd quite happily tell a cop what I've told you. He can't arrest me anyway. But, I'll speak to people. I don't know if they'll be willing to. People who take drugs generally can't be bothered, to tell you the truth. 'Why, what's the purpose.' But I'll ask around.
K  What I meant to ask you is how did you experience this discussion how - what happened - the process.
R  I like talking about things, and I think as long as I can talk to someone who is not involved, or not someone who cares about me like that, I think that will beneficial to myself, so I actually found that it's good to get things off your chest, and it's maybe helping me myself develop more ideas, because a lot of things have sprung into my mind about what has happened. Because I don't really know how it all happened. It all just sort of happened, and then it's like five years down the line or something, and you think 'jeez, I haven't/have been on this planet for the last five years.' And I mean that's when you stop using drugs and stuff. So I think it's beneficial in that way, and hopefully maybe something can sort of be gained from it. Maybe something for the future will help other people, or change a law or something.
ENTRY 1

5 beers
20 tots brandy

Starting to feel really happy and elated. Getting more confident, could take on the world or anybody. Not caring about anything, no scruples.

Desires and feelings of being unfaithful, I know this is wrong, but want to do it anyway.

ENTRY 2

3/4 bottle of brandy  12pm - 4am
4 shooters
8 beers
2 thins - diet tablets

Great afternoon braai, getting happier the more I drink. But when confrontation or aggravation, I seem to get angrier quicker and maybe become slightly less tolerant.

Hang-over the next day not nice and feelings of sickness and depression. Even the following day still not 100%.

ENTRY 3

12 beers (+/-)
5 brandies + coke
4 hits of poppers

Feel like the centre of the party, unstoppable, maybe reckless thinking, hyperactive "out of control" so I am told, but I don’t think so.
ENTRY 4

4 drags marijuana  4 hrs
3 quartz beers

Really cool party, laughing and having fun. Can feel the effects of alcohol more. I know that the booze is making me less energetic and tired. Horrible hang-over can’t understand why since drank so little.

ENTRY 5

½ MDMA capsule
1 e
Drank all night, lost count

Really great evening having lots of fun. Can’t remember much though, many blanks and black spots, but know it was cool anyway.

Lethargic and tired the next day, loss of appetite.

ENTRY 6

3/4 grams of cocaine
10 beers
½ bottle shooters

Feeling of euphoria and exhilaration, unstoppable and on top of the world. As lines wear off need more, but also slight agitation and racy heart not so nice. But ultimately cool.

ENTRY 7

1 e
10 beers
3/4 bottle rum
4 tots whisky
1 joint

Really drunken mood, e makes the feeling much nicer, not much energy though. Everything seems so surreal and beautiful. Marijuana relaxing, but don’t like the hallucinations, quite scary people’s faces turn slightly yellow, green. Where they have scars or blemishes they go black, freaky, but must relax and enjoy.
Sometimes wonder why I even do this. Probably chasing or trying to get back the original euphoric experiences I once used to get. Could dance and rave all night on one e and 4 hours would go by without me knowing.
APPENDIX 7

Interview No. 2 with Rory

R I think I'd like to read it [thesis] first, because I know that there's lots of things there that
I wouldn't be happy for people that really know me to see. I've tried to be as honest as
possible, otherwise there's no point in doing it.

K Let's work through firstly the diary. Just cast your mind back to the diary that you did for
me. Just reflect on the process for a while. How was it for you? Did you find it difficult?
Let's just get around that issue.

R I didn't find the process very difficult as such. But when I thought about things while I'm
writing it, it's a bit different. You always think about things after the event. Maybe a lot
of things you hope you won't remember. But the whole process maybe just clarified
certain things, because one tends to underestimate how much one drinks, I think. I
certainly do. Ja, and you may forget a lot of things.

K So when you actually went back and read what you'd written, how did you feel?

R I still have this feeling like it's kinda normal, because most people that I know and I'm
friends with, do similar sorts of things, and I guess one tends to hang out with people who
do the same sort of things to fit in. So I wouldn't be pleased to show someone who
doesn't know me those sorts of things, or say, showing my parents. So, therefore, it tends
to make me think it maybe it's not so normal. But nevertheless, I'm happy doing those
things, so I don't see the problem with doing them. Even though in the long run they may
cause problems down the line, and I know that certain things are not right, but I believe
that it's a stage that one has to go through, and I hope I'm not going to be like that, say,
in 10 years time. I don't think I can be like that, because my whole outlook has changed
so much in the last 10 years to how I used to be. So, therefore, I don't think it's possible
that I'd be the same person in 10 years time, or even maybe after I've finished university.
Ja, I tend to feel that I can do all these carefree things, and have limited responsibility for
certain things while I'm still at university, and that it's kind of inbred into people who go
to university that they must do all their partying, do all their messing around, and then
when they've finished university, it's sort of time to start life as such, and get with the
programme. When I came to university I had a whole different sort of idea of the way life
should be, and university has shown me the way life can be and can't be, and I see now
that my friends who've started working, and I see that they still behave in certain ways,
but maybe they've got a little bit more responsibility than I have, and I just think that will
naturally come, once I'm in that position.

K So, you don't see what you're doing now as a problem? You're encompassing it into your
whole lifestyle...
R  Ja, I don't really think that what I'm doing now is a problem. The unfaithfulness issue, obviously is a big problem. Maybe I actually think that I'm probably in the long relationship, because I know I wouldn't like someone to do that to me, and I believe that if I probably was in the right relationship, I wouldn't do it. But I guess statistics speak for themselves, where in lots of marriages people are unfaithful, and I don't know if it's just the sign of the times, and I obviously know when I do get married I wouldn't like to be unfaithful, or have my partner being unfaithful to me, but obviously I can't say because I'm not married. But the other aspects, ja, I do just think it's one of these phases, and that you know, I'll probably use drugs and alcohol all my life in a limited way obviously, but then I can't say, you know. I might just wake up and decide like I don't want to smoke like, eg. marijuana, anymore, and just not really do it.

K  So, going back to this unfaithful issue, what role do you think drugs have played in it?

R  Drugs definitely give you the confidence, and I definitely probably think you'd be less inclined to be unfaithful if you didn't take drugs, especially ecstasy and if you take acid or mushrooms, a psychedelic, it definitely gives you that feeling of euphoria high, and you just live for the moment, and it's all nice, and it's so nice, that you don't really think about the repercussions of what you're doing.

K  Ja, I noticed in the diary you mentioned quite a few times you're feeling on top of the world, that you can take the whole world on.

R  Ja, and that's exactly how you feel.

K  The diary entries - you were obviously out at the time. All those instances were you out at clubs or parties with friends?

R  Ja.

K  Were you never on your own?

R  No, but I was with one friend last Thursday and we went up to a nature reserve, and we took magic mushrooms, and it was one of the first times in about I'd say 2 years that I've experienced the real feeling of what it's like to be on a psychedelic, and it was really amazing, and I think it's because I think with people I tend to develop this concept that people are not the way they seem, so I distrust people, and initially when I started I thought people were your friends as long as they were doing what you were doing, and then when the weird things started to happen, I started to realise that people weren't the kind of people that I thought they were. Ja, it was amazing. It was just so nice to be in nature. I think friends of mine who've maybe lost it a bit along the way have always told me that to do it by yourself in nature and stuff is the best way, because I guess, they never said this, because people aren't there to sort of freak them out or to argue with them about what they are feeling, so it's your own experience, and no-one can sort of contradict it. Ja, they think that it's the best way to do it, and preferably if you can, not to have alcohol when you do use those things.
And possibly could you relate what happened last Thursday - how you felt...

I took a section of mushrooms, which is about a gram and a half. My friend took two sections, so that would be 3g. He took a few beers up, his dog, which was quite cool, and we just cruised around the nature reserve, looked at all the trees, and you really feel at one with the whole world, and you can sort of piece together the way things are, and you can think about friends in depth, and things. You always come to conclusions. But from past experiences I know you come to these like overwhelming conclusions about, eg. I play the lottery every week, and then I came to the conclusion that it was actually a waste of time, you know, and what are your chances of winning, and then something inside of you says well, but you’re going to do it anyway, even though you know it’s silly to do it, you will do it anyway, but you think at the time that you won’t. So you come up with these really sort of big ideas, conclusions on things, about the way things should be or work, and that’s generally what happens. But now I’ve just accepted that it’s obviously the drug inducing these feelings, and making your mind work in these other ways, and it’s not necessarily always true, but I think it can be very helpful whereby you can set your goals straight for yourself, and you can see the way things should be, so it’s not always a waste of time or such, ja...

So, after that experience had worn off, do you stick by what you have decided or do you think - that’s just the drugs talking....

Generally, you do just go - well, that’s just the drugs talking, but I don’t know, other times when I’ve done it, I’ve got really focussed, and I’m like - wow, I really want to pass these exams, and afterwards you’ll still have that feeling of what you’ve got to do, so you will do it. But it’s not like that for everybody, you know.

So you still have a memory of what has happened?

Ja, if you don’t cloud it with sort of alcohol or stuff, I mean we did drink - we had 3 quarts each, which is quite a lot, so we were kind of drunk, but you don’t feel drunk, because your mind is still alert. It sort of compensates that. Ja, so you do have a memory afterwards.

Do you think drugs in this respect play a positive role in one’s life?

It depends how one uses them, I guess. It depends how one is inclined. I know I’ve read a lot about mushrooms and stuff. Certain people are allergic to them, and I mean eg. like LSD. One person can have one trip and then say, eg. another person can have five, and it will effect the people the same way or maybe very differently. So, it’s up to the individual. I don’t think enough research has been done in the sense of, or people-monitoring has been done enough to say - well, this person should only have a half a trip, or this one should have five. But I do think that, ja, they can play a very positive role.

Let’s look at you - do they play a positive role in your life?

Yes, I think to an extent it does. I think I’ve got over that, I guess you know
overindulging, whereby I sort of learned, I mean there's not much difference between having for myself say, two ecstasy and five ecstasy, because thereby you can't get that feeling back, so it ends up being a waste, and I mean even with drinking, even though drinking one can tolerate a lot more than say hardcore drugs, so you know you reach maybe four, five beers you're at your optimum sort of peak, the way you can feel, and you feel excellent. And then that sixth beer will just make you start to feel drowsy or aggressive or whatever it may be.....

K And if we look at the word 'escapism' - do you relate to that at all, with drugs?

R I've never really used that word. I know I've said like if I can be quite rude - going to get fucked tonight as such. I don't think that's the same as saying well we're going to go and escape tonight. But maybe that's one and the same thing. But I think it's more a reward than anything, or it's more like well, every Thursday night we go out and get wasted, so I don't really think it's the same as escaping, because I wouldn't like have a family problem or have a fight or something and then just go and get completely blotted, so I can't deal with the situation, so I think maybe if you want to escape, you're trying to hide and not deal with something, and I don't think I've every really be one to - or if I've been upset I may drink, but I don't think it's like the same as a chance to escape.

K So that's your situation now - is that how you see it?

R Ja.

K You really then do it just for the enjoyment of it - to do it with friends.

R Ja.

K Now if you cast your mind back, let's say 10 years or so, when you first started drinking and taking drugs, do you think then perhaps that it did play a role? You know you did mention that your parents were getting divorced...

R I never even thought it played a role then. I always did it because I always think I was in the in-crowd, you know, and I was like one of the big guys in school or hypothetically, you know, even though maybe other people didn't agree with what I did, I always thought it was like my right to do it, because I can do it. When people were like - check, you're stoned now - I'd think that was quite cool. I never ever did it because of problems as such, or to rebel. I always did it because I enjoyed what I was doing, and the people I hanged out with, it was always what they did, it was like kinda cool to do it, I think.

K So, if we stick with that - it was more a peer thing than a family issue...

R Ja, it wasn't because of family issues that I did it, no.

K So, it wasn't to escape from certain family issues?

R No.
K  It was more - I'm in a peer group. I'm going to be cool - and if you take drugs then you're cool.

R  Ja, I guess it was more along those lines. Even though drugs make you kind of arrogant because even at the time you don't think it's that. It's kind of like you have this edge over everybody else, and I know like I've taken mushrooms, and even during the day and gone to like shopping centres, and taken those during the day and done that, and you kind of feel above everyone else, and you look at everyone and they're going about their shopping and they're doing their normal day to day things of life, and - gee, like you guys haven't got the picture here. But mind you, maybe I haven't got the picture here, but that's not what you think then, you know. I mean, even when you go out to these all night raves and it's three in the morning, and you're still raving, and those people who haven't taken drugs are now in bed, or have gone home - like this is the party, I'll be the real people - I know, eg. if I was to go out, and maybe even if I go out drinking and don't take drugs, I'm finished by like three, four o'clock at the latest, and even then I'd be happy to go home at like probably two. So those drugs at times, when I was probably always doing them and taking something to stay awake, it gives you that edge, and you think you've got something that other people don't have.

K  So maybe if you look at that, that is one of the reasons why you continue taking drugs.

R  Ja, most definitely. I kind of like the whole idea of being different, and ja...

K  Do you think that - you've just said you like the idea of being different - but now in the drug scene, are you really being different?

R  But you think you are as well even in the drug scene. If it got to the stage whereby you were cooler than most drugs you took now, and the drug thing, but I never was really in to that, because I never took that much as most people would have. I always wanted to take more, but because of maybe I've got a low metabolism, or high metabolism, or something, I wasn't able to, you know, so maybe two, three ecstasy, that's my maximum, and if I mix with other things, I don't freak out. So, I realised that, I learned the hard way. You can spoil the whole evening if you take too much. So whereby I learned that it doesn't matter how many other people take, and I have friends, who take you know double my amounts, and even more, and now I'm just happy, and I know I know like I can have half an ecstasy and that's fine for me. Maybe not a whole lot, but there's no need to take more. So, now that I've learned that, that's why I'd be happy to sort of not ever say - right I'm never going to drugs again - because I think I'd manage, and I know lots of older people who do it.

K  And you feel that you're actually under control?

R  Ja.

K  You don't feel that the drugs and alcohol are controlling you?

R  No, definitely. I believe that they're going to be more useful. Now I've got over that
childish thing - it's like with alcohol, when you first start drinking you just want to get drunk, just for the sake of getting drunk. Now I know I'm going to get drunk anyway. Maybe it's a catch 22. I'm going to get drunk anyway, but it's not my main aim to get drunk, even though it will happen. So, now I'm going to take drugs, I'm going to get wasted or whatever, but there's an aim, but I'm going to be under control, because I know from what people used to say to me, is I'd take acid or something and I'd completely lose it in their eyes. I always knew I was under control, but I guess all mad people think they're under control, so it makes me tend to wonder maybe at one stage, or two stages or three stages, I wasn't under control, and maybe if you can't remember the whole of the night or evening of events, what does that mean? You know, I don't know, because I can't remember, but it makes you wonder, ja.

K In one of your diary entries you said - you freaked out, but you don't think so, but that's what others told you.

R Ja.

K So, maybe that's where that comes in.

R That whole thing about losing it, or not being in control? Ja, definitely. The worse thing is when you're not in control and you're aware that you're not in control. I think that's what sends people over the edge. And that's definitely from LSD. But, where you're having such a good time and you're not in control also maybe that's the most dangerous time, because you know everyone I think in a mental asylum is kind of happy, or doesn't know any different. It's when you - I don't know how to explain it. It's just two different ways of looking at it, I guess, I don't know.

K So, at the moment you're quite happy with where you are, in connection with your drugs and alcohol?

R Ja.

K Now, if we go right back to your first drinking experience at age 14. You mentioned that you went to a friend’s farm, and you drank there. I think your Dad left you and went to the farmhouse. What went on there? In other words, why did you drink?

R Well, there were older people there - 18 year olds. And I guess maybe just to fit in, they were drinking heavily. They were buying me drinks. And I wanted to get drunk. I wanted to experience what it was like to be drunk.

K Why?

R I don't know why. Maybe it was because it was only a thing that adults could do, and I was below the drinking age of say, I think it's 18. So, maybe I felt I'd be grown up, or something. And they were all drinking, and there were a few girls there. So, I thought - ja, I just wanted to do it.
K So, it was because you were with friends...

R Well, they weren’t really friends these other people. I was at a party sort of, so because everyone else was doing it, and I was maybe one of the youngest there.

K You wanted to fit in.

R Basically, ja.

K You wanted to show that you were also grown up enough to drink.

R Ja.

K I think I remember you also saying at one stage that if you go to a pub, and everyone else is drinking, and you’re not drinking, you feel a bit out.

R Ja, you definitely do.

K So, if we run with that theme - because what’s coming through all the time now is that it’s not family dynamics. It’s not because you were like mad at your Mom that you went out and had a drink, or mad at your Dad and then you decided to take drugs. It’s more the fact that you wanted to fit in with friends and peers and do what they were doing - that you were cool. What do you think of that?

R I wouldn’t like to look at it in that way either. But I understand from what you’re saying that it seems to sort of look like the case. But even the way I look at things now, now I don’t feel like I’m in any particular group, and I only felt like that at the end of sort of last year. And maybe that’s just more a part of growing up, and now I wouldn’t mind going out with my Dad with all his friends, and before that would be out of the question - like, boring, going out with your Dad, you know. Now, I’d actually enjoy probably doing that. I can go out with the Christian group, not that I would, but I mean my girlfriend has friends who I’d say are kinda square - I could go out with them, and not feel different, and be able to maintain a conversation and the first thing I wouldn’t talk about is dope and drugs, you know. I mean, that’s one thing that I would’ve done before, and I mean I can go out with the drinkers, and with the drug addicts, or whatever, drug users, and it would be fine. So, I don’t necessarily think it’s a thing to fit in, but maybe initially because I wanted to be different and the whole reason of leaving that one school is because they tried to control you too much, and I wanted to be able to do what I wanted to do. Ja, I guess it is trying to be different more than just to fit in.

K Let’s basically look at those early years, rather than now, because as you’ve said you feel as though you’re under control and you don’t feel the pressure to drink or to take drugs, and you can fit in anywhere.

R Ja.

K But in those days, in the early days, when you were 14, 15, 16, 17, going from school to
that other school, do you think it was more to perhaps fit in - a sense of belonging?

R I think it was more the sense of belonging, ja. Because my older friends from that original school, you know always like I was the rebel on the weekends. I was the one who went drinking and like snuck out of the house, and they never did that sort of thing, and I always felt cool to tell them those stories on Monday. I couldn't tolerate the whole system anymore, and so I went to this new school where I had new friends, and ja, I just wanted to do it. Because I could do it with people who wanted to do it as well, I could feel comfortable, so I guess it's more a thing of comfortability, maybe, because you don't only want to be the drunken person at the party, you'd become a bit of a fool. You don't want people laughing at you. You want them laughing with you. So, the whole reason was it's like these people were doing the same things and had the same ideas, and were maybe also considered not normal, and different.

K So, it's more like a sense of oneness.

R Ja, oneness with the same people with the same ideas, ja.

K I mentioned family, and you said no, it's that there were family problems. But if we perhaps look at just the idea that maybe you didn't feel as though your whole family were one, and that you were a unity that you felt that you wanted to go and seek it elsewhere, and you found it in your drug experiences. Do you know what I'm saying?

R Ja, I understand that. I think in a way maybe yes, because you didn't have that sort of home security, and your parents were always against each other. I didn't get along well with my sister, and I actually didn't care about that, because there was nothing to care about. I love them all very much, but as I've said before I have issues with my father, and maybe because I didn't find that security or comfort there, maybe I did seek it elsewhere. Ja.

K So, you didn't feel as though you had a unity within the family - that you could go to your mom or dad or sister, and that you were all in a way doing the same thing.

R Ja, I guess. I mean, you always see like on these breakfast commercials the whole family sits down at breakfast. We had dinners together, but there was generally a fight, and it was just unpleasant, and I'd get grilled about what I did that day, and I wouldn't want to answer the questions, and then my dad would lose it, and I guess there was just always this tension and I could go to other people's houses and see how it should be, but it was never like that with us, so maybe ja.

K So, maybe by getting into a peer group that experienced drugs, that took drugs, and that had the same experiences, and you did feel that sense of belonging. Maybe that could be presented as a possible reason for you actually wanting to experience it.

R Ja, I guess so.

K Because you said you always wanted to take alcohol. You always wanted to try dagga.
I think you said that last time. You’ve always wanted to try it, and I’m just wondering why? Is it just that you wanted to do it or because of an underlying reason?

R  
Ja, I can’t understand that, like why do some people just want to do that, and some people just don’t, you know. And my feeling would be that everyone wants to do it, but they can’t do it because the law says they can’t. But maybe that’s not really the case. I know now that that’s not the case and as I always liked to be free willed and that, I would do it, just because I wanted to do it. But I don’t know exactly why one person really wants to do it, and one person really doesn’t want to do it. But maybe it is more to do for myself that sense of belonging, because I didn’t have a family that could give me that support or security, whatever that maybe I needed. I think I’d probably would have always done drugs, so I don’t think it would be right for me to say well maybe if I’d had a perfect family. I can’t say. I can’t say well it’s my parents’ and sister’s fault, because you know...

K  
Yes, obviously.

R  
But maybe things would’ve been different if I’d had that. But I don’t know.

K  
And the independence and freedom issue. Did you ever feel that you were independent within your family, or did you feel that you were restricted in some way?

R  
I felt very restricted when I lived at home with my family, but when my parents got divorced, my freedom came, and that was just what I needed, you know, like a butterfly coming out of a cocoon. My mother tried to control me, but I knew she couldn’t, and my dad knew she couldn’t, because I mean how do you control a 16 year old teenage boy who wants to go out, you know? It’s difficult - you can’t alarm the place or something. So then, ja, that’s when my freedom really came.

K  
So, then because you saw like a little gateway, then you took it.

R  
Ja, and I mean my mom would threaten to send me to my dad, and I would get to go there maybe on the odd weekend, and I’d hate it. I’d hate it. I mean he’d make it as difficult as possible for me. I know he would do that, and I’d hate it.

K  
Would you call this rebelling? You said before it wasn’t a case of rebelling.

R  
In what sense?

K  
Rebelling against what your parents wanted you to do.

R  
No, because I wanted to do that, so I don’t think it was just because they didn’t want me to do that.

K  
So, it was that fact that you wanted to do that.

R  
Ja, and because I couldn’t, I felt why couldn’t I? It’s like the whole legal law system - why can’t you do something that you want to do? Maybe that doesn’t bother other people and
hurt other people.

K And also just something that struck me now you said when you were drinking at the age of 14 - I mean you weren't allowed to drink - and now that you are allowed to drink, you know there's nothing now that you wouldn't be allowed to do, age-wise, you feel well, you know, you've done it - you've been there.

R Ja.

K There's nothing stopping you now...do you know what I'm saying?

R Ja. When that kind of dawned on me that I had the freedom basically when I came to university, I had the freedom, and I could stay up till dawn and go out to every single party that came along, it kind of like - I had to rethink about what life was all about, and to me life was going to raves and having fun and taking drugs, and when that dawned on me, I kind of realised that you know life is now...just your whole thing, your whole perspective changed. Now I want to do well - try to do well in my degree. Try and get a decent job, and I'll try and make money to make my own life, and shape it the way I want to be, and the way I see that really is only to getting a good job and working hard, and making a lot of money or something. So my whole outlook has kind of changed, and it's like I'm not going to make money and I don't know any rich people who smoke marijuana every day, you know, or who drink every day, unless they've made their money and then they can do that. So, I think when that started to dawn on me last year as well, that's maybe now changed my whole outlook, and now it's not really, even though I do go out a lot and still do take drugs, I'm more aware of what I have to do. It's not like if in 10 years time I'm on the street begging, it's not like though lack of not knowing, or something. It's probably because I haven't tried.

K So, you do have a sense of structure in terms of what you want to achieve?

R Ja, I've kind of like done all the drugs, almost all the drugs I've wanted to try and experience. They're not going to give me this edge that I used to think that it would give me. It's not going to make me better than other people, although ten to one it will make something happen that's worse, because drugs obviously aren't good for you, but only in limited quantities. So, I know I'm not going to find that edge or whatever through drugs, which I used to maybe think that.

K So, reaching that understanding - how do you feel?

R I have a great feeling about it, but I still don't like sort of like my girlfriend tries to prevent me from taking drugs and stuff, only because she cares about me, and she's scared maybe about how I would go, how I used to be. She doesn't want that to happen to me. I wouldn't tell my parents about still taking drugs. They think I've stopped. But not to mention I'm not going to talk about it with them, and at least they now, I would say, are mature enough to understand. I mean they've known all the drugs I've taken, but they're mature enough to understand and talk to me about it in an open way, you know. My dad is less able to do so, because he's so dead against it, but we can now talk about it, and it's
great. I mean because it’s not something that should be sort of hidden away like sex, you know. It only comes out of the closet when one is 16 or something. It’s something that has to be discussed, and less shunned.

K So, you feel that by talking openly to people, that it actually makes things better - actually facilitates...

R And I don’t think it’s going to, you know, everyone says you get your first drugs from your friends, but I guess it’s who your friends are, and I mean I don’t necessarily think just because you talk about drugs openly, and maybe sex, everyone’s going to go and have sex and take drugs, which is kind of the perception I think people have, you know. I mean, you read articles in papers and stuff - obviously they don’t want children to take drugs and stuff. But they could try and be more honest, and I mean obviously that element exists whereby people just won’t and people just will. So, why now persecute the people who just will? You know, as long as it’s in the right kind of way.

K Open about it...

R Ja.

K Going back to your second year. You said I think it was the second year, and you said that you didn’t go to lectures, drank and whatever, and you still passed and didn’t get supps.

R Ja.

K But now recently, you find that perhaps your memory is not as it used to be. You go to lectures and you still get supps, or something like that. Do you remember you said that?

R Ja.

K Perhaps just let’s talk about that for a moment. Why do you think now ...

R I definitely think it’s because the degree, I’m doing another degree now - a postgraduate degree, and I think the degree is a lot more demanding and a lot harder, and that’s just what it is all about, and I think maybe I was very lucky in my second year to have not got supps, but I still don’t understand how I could’ve gone through the whole of second year and not get any supps and pass everything. Now I’m trying harder, I’m going to lectures, it just seems harder. So, all I can sort of deduce is that it must be that the degree is much more difficult.

K So, you would go with that fact - the fact that the degree is more difficult, rather than the fact that you had taken alcohol and it has effected your memory in some way.

R Well, the way I look at it is at school I was in the top stream, you know. I’ve always been in the top stream or the second stream at school. And then when I got to high school I moved from the second stream to the third stream and it was like the lowest stream, and then that’s when my parents had this big freak-out, and I always stayed in the lower
stream, and then when like O-levels came, I did very well in my O-levels, and they were all very happy, and it was like well, you know he’s maybe not so stupid after all, or whatever, and then A-levels came, and I didn’t do so well in my A-levels, and now you know like my first year varsity came, and I only got one supp, so I guess I did quite well. Second year came, I got no supps, so I did very well. Third year came, I got a couple of supps, so I did less well. Then my fourth year came and I failed a few subjects, so I did quite badly, and I don’t know...if I look at that track record, it’s all sort of up and down, very down, very up, in the middle, so I don’t think I could say well, maybe it’s because of things that were happening at the time that caused that. But I don’t necessarily think that...I use excuses of the fact that I drank, and my dad died, so therefore I can’t work, but I’ve never been like prone to stress and stuff that’s made me not work, because I mean like maybe I was like very stressed, and I thought no this is going to be the end, and it wasn’t, so...

K So, do you see alcohol and drugs playing a role in any of that?

R I know that like if I’ve had a very heavy weekend or holiday week or something, the drugs and the alcohol if its just drugs, your vision isn’t so good and you don’t feel so well, so you do feel slow and your handwriting will be more untidy. With alcohol as well you tend to be hung over, you also don’t feel so good, and you tend to think slow, so everything operates slow. It does effect, but I don’t think it effects long term.

K So maybe just short term.

R Short term, ja. But I guess obviously the longer you use drinks for, the more effect it will have long term, but I know that the body regenerates and everything, so, I don’t know. I don’t think I’ve done it long enough.

K There has been research done that if you are a heavy drinker, let’s say that you’re an alcoholic, and if you stop drinking before the age of 45, that your brain is able to make those new connections, but after 45 you perhaps age, cognitively, about 10 years. So at 50 you have a cognitive functioning of a 60 year old.

R Ja, I do know that when I have had a heavy weekend’s drinking, and I have, say, got to do a tut for Monday, and Sunday comes, the last thing I want to do is a tut, and I mean you don’t function as well. I know that for a fact, but I know it’s never gone on and it’s been like now a Wednesday and I’m still not able to function, and I know maybe Monday I won’t function so well, but after that it will be okay again.

K And also alcohol and aggression - you mentioned that when you take alcohol you get aggressive. Is that true?

R Aggressive - generally not always aggressive - but I guess more aggressive than most people. Hyperactive, maybe louder, more boisterous, ja.

K And does that effect the way you perhaps behave in a peer group, or at clubs?
Yes, I definitely think so, but I still tend to think that my behaviour is related because of the fact that I’m still at university, because I know that I would not like my fellow work colleagues to think of me being this loud, boisterous, overly aggressive person, unless they all did it, but ten to one I don’t think that I’d be in that work environment where everyone would do it. So, if I would want to get promoted or something like that, I think I would be the last person who would be, so I would do it maybe with friends who know me but from before, and I would keep my working life different from my sort of friend life, and I’ve already got groups of people who, you know, I’ve got Indian friends, and I’ve got Coloured friends, and I’ve got White friends, and you don’t ever mix the three. It’s just not done, and then you’ve also got parents’ friends and you never mix them, so you have to categorise them like that.

And then, according to which group you’re in at the time ...

..you can behave in that sort of way, I mean like if I’m with my drug friends you know you talk about different things than if you’re with your alcoholic friends.

So everything really is according to context - most things.

Most things - generally yes.

And you’re able to do that?

The alcohol thing though is a problem. You see, because I wouldn’t go to sort of my parents’ friends and take drugs, but I know I would get a bit out of hand even in all circles because of alcohol. That is something that...well, you can control it by the amount you drink but alcohol is weird because the more you drink the better you feel, but then also suddenly something, you don’t even notice it. At times you can feel yourself getting aggressive when people start annoying you, but at times you just suddenly boom and you’re wasted, and it’s just like you’re out of control, and ja, that’s why I’m saying if the only way to monitor your alcohol would be to know your tolerance level, just be careful with it, I mean I went out three weeks ago, two weeks ago, and I had three black label quarts, and the next day I woke up with a horrible hangover, and I mean that was like a quarter of what I usually drink, and I mean even though that’s a lot, I couldn’t understand why I had such a bad hangover, and maybe it’s because I hadn’t drunk for about maybe five days. So you’ve just got to know what you’re doing.

So, if you knew how much you could tolerate, would you stick to that?

It depends on the circumstances. I do know generally how much I can tolerate, but I never stick to it. Ja...

If we have a look at any bad experiences that you’ve had with drugs - I think you mentioned a few last time - perhaps can you give reasons for those bad experiences with drugs.

The one very bad experience I had, I was at a club and my girlfriend and I took quite a big
cocktail of drugs, and she actually I believe, and everyone said at the time that she had basically lost it, and she was already schizophrenic and weird and had mood swings, and you know, it was a weird situation, and I think she was actually trying to jump out of this window. She claimed she wasn’t, and that really freaked me out, and then like we couldn’t even be next to each other or see each other, without all these emotions and weird things happening and that was basically what made me realise the danger of drugs, and how they can get out of control, because she still doesn’t believe that she’d lost it, and she was. She was walking around mumbling to herself, incoherently, not being able to talk properly, whereas I could. Then she turned it around and said that I was the one who had lost it, and I’d go around to people and say ‘no, but I haven’t, I’m normal’ and look – and you know it would be like ‘no, you’re fine”, but probably to her they were saying ‘oh he’s just being stupid. Why’s he harassing you like this?’ So, one never really knows, unless we probably get someone from the outside to come monitor how we behave, one wouldn’t really know, but then after that...that was like the worst experience I’ve had. I just realised the danger of drugs. Mostly bad experiences will happen on LSD, or a psychedelic. I don’t know why. But they don’t happen for lots of people, either, just for me. Even on ecstasy sometimes, you know if you hallucinate too much. It’s always the hallucinations. I think the hallucinations, you see things you don’t want to see, and your mind will think of things you don’t want to think about, and I suppose the beauty of a good hallucination is to be able to control it in a way you want to control it. But if you have too much, or if you’re not experienced, or if you even can - people say they can, I haven’t been able to, but people say they can - ja, your mind does its own thing, and you’re not in control of it, so that’s when the scary thing comes into it. I guess I used to like the idea of not being in control, and now I want to try be in control, generally, so I don’t like as such, maybe going overboard when I can’t control myself.

K  But you still like these hallucinations if you can control them?

R  Yes, but the problem is you generally can’t really control what you see. I mean if you start seeing like, I mean I’ve seen like blood coming down walls and running across the ground, you know, you actually really believe it’s there, and if you would say to someone else who was tripping ‘hey, look at the blood, look at the blood’, it will be like ‘what blood?’. And then you’ll think ‘oh jeez, I’m so wasted now’, and then maybe you’ll start not to feel together on the trip anymore, and maybe you won’t care. The way I’ve had to deal with it, well it is my own mind, it’s not really there. You can pretend it’s there if you want to and deal with it in that way.

K  But does it go away? I mean, if you say - I’ll pretend that it’s not there.

R  No, it doesn’t always go away. Even if you say in a really conscious way go to make it go away, it won’t go away. So it’s just got to go away.

K  Would you have to just go with it?

R  Just go with it, ja. If you try fight it I suppose the worse it will get. So, whatever happens, try and go with it, but if something hectic happens during the trip, say the police come and they want to search you and stuff that can send things haywire, or if your parents pitched
up from going out, and you were there at the house. But then that's only really a bad trip, but that's not as bad as say like physically losing it, you know.

K Now that trip - what were you taking then where you saw blood everywhere?

R Well, that time it was about my fifth, sixth trip and it was a smiley face. It's just like one cap of LSD. But obviously LSD varies in strength, so this was obviously a very, very strong one, because I was walking around and paper was moving all over the ground, and coke cans, and colours were unbelievable, and I tripped for like the whole night, and it was just unbelievable and I didn't freak out at all, even seeing the blood and all that. Later, only maybe when I'd spoken to people that I'd seen blood, they'd say 'What! You see blood? That's hectic, you know, it's bad! What's wrong with you?' Then maybe that's when the whole thing of my tripping started to maybe... because I knew it wasn't the norm or something, you know. I never see like smurfs and fairies and demons and all that sort of thing. But I've seen demons, I suppose, or evil in people. That's why now I don't tend to want to take anything psychedelic, I won't take anything psychedelic in a club. I will take ecstasy and stuff and hallucinate on that, but at least you've got that ecstasy feeling of niceness, and if it does get a bit too hectic with seeing people's faces and all that sort of thing, you can always leave, but it's not as bad as... it doesn't compare anything to like having a hectic trip.

K So when you say you see the evil in people, what do you mean?

R It's like people don't seem happy. They all seem there because I don't know, you see the guys and they just want to have sex, and you just see the women and they just want to have sex, and you just see this... it's so difficult to explain... it's just like evil. Everyone's there for their own good and own gain and it's not really this unified, happy world of people having a good time. Maybe that's my imagination, but lots of people I've spoken to also see it, but maybe that's only because you're having a bad trip. So now, if you're having a good trip, you'd see everyone still as happy and nice. But I know, even on ecstasy if I'm having a good trip, I will still see the evil in people, and people will not look good and all that, but I can deal with it more then, because I've been doing it a long time now, and I just accept it, and now I don't like try and allude myself that everyone is good and kind and now I'm more sort of, well what kind of people go to these places, generally?

K So, you're taking a more intellectual view, you think.

R Ja, definitely, more grown up, maybe with a bit of that, maybe more intellectual, more sort of... I think I've reached that point where I'm not some kid that's just there to get wasted, you know. I like see it, and I've been down that road and I know. Ja, so I'm looking at it more intellectually as such, ja. And I mean I've realised that all your drug friends and that and people who you may hang around with, I mean would I ever invite certain of them to some business function or work function that I have, that I'd be pleased to invite them home with me? And when I come to the conclusion of, like no, I know that, well, they're just friends to go clubbing with and friends to do certain things with, and maybe not even really friends, because most people I've realised who do drugs are very shallow
and very self-centred and couldn’t care less if anything happened to you. You know, as long as you’re partying with them it’s fine, but as soon as you’re not they don’t care about you, and generally they do things behind your back, and that sort of thing, so..

K So you wouldn’t really see them as being true friends?

R No, definitely not. Almost all my friends that I started university with, you know, people always say that you make your best friends at university, but I don’t think I have. Obviously because I’ve been in this whole drug thing and I’ve realised maybe even myself to an extent...are drugs friends generally not good friends they - just don’t make good friends, and I know that if I’m out and on ecstasy and I meet people, they always seem like such good people, but then afterwards you think what do I have in common with so and so. You know...

K It’s just the drugs...

R ...It’s just the drugs, ja, I met people, I prefer to meet people now and we have a few beers and stuff, because even alcohol if someone gets wasted and out of hand you can deal with it. It’s different when people are on drugs and you find out they maybe take drugs, or they’re business people, or they’re you know, then it’s different. Then I wouldn’t mind taking drugs with them because it’s like it’s not all that we have in common and it’s...drugs are not a bad thing. It only becomes a bad thing the way you use them and how you use them, you know it’s all.

K It all really depends on what you see...what role you think drugs are playing in your life.

R I guess it depends on what you’re doing, I mean obviously if you’re going to be a fireman and all your fireman friends take it and you’re in that class of people, you’ll see drugs differently, because drugs can unite all different classes of people, just because everyone’s on drugs, but I’ll only have something in common with that fireman if I’m on drugs, but the next day I wouldn’t want to have anything to do with him, you know, and that’s just the way I see it.

K Ja, you mentioned that you, I think it was your ex-girlfriend, and she was taking a lot of drugs, and you used to take drugs together, and you said that you realised that it was really just the drugs that you had in common.

R Ja, we had very little in common, I mean whenever I would stay with her at the weekend or we did something she was always like, come let’s chow this, let’s take this, let’s do that and, ja, there was nothing I had in common with her. She lied and everything, and ja, so...

K Let’s go back to when you were about 14, 15. Let’s take either your mom or your dad—you can choose, or your sister. How would they describe you then?

R I don’t know how my sister would describe me, but I know my dad would say probably like - basically a waste of rations, you know. Because him and I didn’t see eye to eye, and I know he probably would say I’m off the rails. That would be his...you know he’s off the
rails. He would definitely say that he would see me as having the big problem, and I obviously did have a bit of a problem, maybe, because I was going through puberty and I was just becoming a teenager and teenagers just want to do those sorts of things. Well I think he could’ve handled things in a different way, but ja. My mom - would’ve probably said ja I was also pretty hectic more than likely. At least we could talk to each other. At least we had a relationship, at least she was there for me more, so I think she would have a totally different thing to say, but I don’t know...

K You mentioned your dad could’ve done things differently - how, do you think?

R I think instead of trying to be such an authoritarian he could’ve been more a father, you know I could imagine him being the general and me being a soldier and I mean I’ve seen movies where the father is a general and the son’s like 16, and it’s always like ‘sir, sir’ and almost like saluting his father. That’s kind of how I felt it was with him. You could never argue. It was just do it! And as soon as you asked ‘why’ that was World War Three. You must never ask why. Of course, I always asked why, which made matters worse, whereas my sister would just do whatever he said without asking why, and that’s what he wanted, and I wouldn’t tow the line as such, so that was the problem.

K So then do you also see a link between his parenting style and perhaps wanting to try drugs...wanting to do things?

R So his parenting style would make me want me to go and do drugs?

K Ja.

R I haven’t really thought about that.

K So you could go out and do your own thing. You wouldn’t have anybody telling you what to do. You’d go out and do it anyway.

R I don’t know. I don’t think I could say that either, because I’ve always wanted to, but I don’t know when the time came when I wanted to because when I was 12 my teacher said ‘ten to one half the class is going to have tried marijuana’, I don’t know if I said that to you, and I thought ‘no’, and then somewhere along the line that all changed. But he was always very strict, but our relationship really only broke down when I was a teenager, so maybe there is some link, but I don’t really know, but maybe it’s a combination of things like how I wanted to be different, and I started to realise that maybe (?) were boring maybe I wanted to be more adventurous, I don’t know.

K Maybe it’s a combination of a whole lot of different things. The fact that you wanted to do it. The fact that you wanted to be with peers and friends and be more adventurous, and try things out. And maybe because your family style wasn’t one unity that you wanted to go out and find something missing.

R Ja. Probably a whole combination of factors. I guess it’s very difficult to pinpoint one and to say that’s the sole cause. I guess nothing with a person ever is the sole cause of
something, and I guess if someone is a rapist or something it’s not because they want to have sex with a woman, you know. It’s probably a whole host of different factors, and that’s what people say. A rapist only wants to do it because of that, so I guess the person who takes drugs doesn’t only do it because maybe they want to take drugs. Ja, I don’t know.

K I maybe think that’s it. What I would like to do now is just to reflect on this interview, okay, perhaps if you want to just say if you’ve thought of things in a new way, or what it’s meant to you. And then look at the whole process - the first interview, the diary and this interview, and reflect on what it’s meant to you.

R Basically, the reason why I wanted to do this interview, initially it was now for the whole drug thing to explain sort of the way drugs are and the way they work, but I guess in doing so, it’s maybe helped me understand a little bit more about myself in a way. I guess it’s always best talking to somebody else about it. Somebody who maybe you don’t know, and it’s not really like a counselling thing. It’s maybe just to listen. Maybe it’s just the listening factor, and not to pass judgment, ja. Whereby I couldn’t just sit down and tell a friend or parent these sorts of things, because you can’t obviously tell them certain things, even if you want to, you don’t want to shock them. Ja, so I guess the best thing is to let people think things out for themselves in their own mind, and people are always going to do things that they want to do, so I guess for myself, you know, to try and reach a happy medium and maybe understanding things better about what has happened. I don’t know how that’s going to help, but ja I don’t know...

K Just perhaps to try and piece things together even if you don’t....

R Ja.

K It’s like a jigsaw puzzle. You put it together even if you don’t know what the picture is at the end of the day.

R Ja. But then I would be inclined to say - well, what’s the point of that? But then what’s the point of anything? Ja, I don’t know, I guess. My big thing was to find my biological mother and I found her last year and she’s not what I expected, and it didn’t do what I wanted it to do, not that I knew what it was going to do, but it was far below my expectations, and ja, I guess you just have to rethink life. You’ve got to rethink what you want. You’ve got to rethink how everything is, and how you want it to be.

K And do you think by reflecting, writing, talking helps the process?

R Ja, definitely, ja. Yes, it does. Everyone says they can cope and stuff and I think everyone can, well most people can. But I don’t know what you want to try and achieve is maybe when someone has these problems, you know, say like I had these problems with my father when I was younger if we should have probably gone for counselling together then and had the problem sorted out, but not that he would ever have done that - not that he would ever have acknowledged that there was a problem - not that he would ever have changed, so I don’t know if he could’ve...if for example what I’d done could’ve been
prevented anyway, but I know for myself I think ultimately what this has done and helped I hope is maybe I will not be a repeat of certain things, and I think I would've liked my father to have maybe been able to explain certain things to me, about drugs maybe, about these things. I knew about the whole sexual thing, so it wasn't a problem, but I never knew about the other side of life - the drug side, so my morals were always taught to me so I knew that it was wrong to steal and stuff, so it was fine, so I guess if I had a better understanding of the dangers or what can happen, you know. I mean I can't now go and try and stop my children from taking drugs. All I can do is I preferably would like to take drugs with them first, so they can hopefully experience it first in a nice way but they probably wouldn't want to, I don't know. I know parents who have done that with their children, you know, and I know of friends who smoke marijuana with their parents and that's fine, but then there's a fine line because you don't want that to be the centre of...

K  ...their relationship.

R  Ja. But I definitely think that, you know, if you see your children are inclined or get an understanding that they maybe want to do it just to explain to them.

K  So, rather explain the dangers to them than say ‘don’t you dare go out and do it’.

R  Ja, definitely, because if they were like me that is what they would do - the complete opposite. Like my sister's never taken drugs, you know, and then only she was 20 she smoked her first joint, and that's fine and she doesn't smoke every day, maybe she'll have one once a year - or once a month. I don't know what she does, but I definitely know she doesn't do it nearly like I obviously do it.

K  So do you think parents can play quite an important role in whether their child does take drugs or not or has a problem with it?

R  Well, parents will be the first ones to see how their children are going to turn out. Parents can generally try and shape the way their children behave and act. I guess depending on the child. So, I guess parents can play a big role, ja.
APPENDIX 8

THE TIME-LINE COMPOSED BY RORY

Age

14  →  First got drunk on New Years

15  →  Arrested for vandalism; slight alcohol abuse; first night club experience

16  →  Smoked dagga first time - didn’t work; parents divorced

17  →  Sixth time smoking dagga - got stoned - “scary, but awesome.” Also tried hash - “cool”

18  →  First ever “Rave”; first time - unbelievable

19  →  Arrested for possession of dagga. Drug use takes off at start of university.
     ie. chloroform, poppers, rohipnorol, thinz, obex, e, a, shroomz, everything except heroin (wanted to try heroin - probably would have if around.)

20  →  Cocaine

22  →  Crack cocaine; met biological mum - not what I expected or wanted

23  →  Realise dangers of drugs, and should be careful and use in moderation; still drink too much alcohol.
APPENDIX 9

CASE STUDY PROTOCOL

1. **Research Questions**
   - What predisposed Rory's drug-taking?
   - What precipitated his drug-taking?
   - Why did Rory continue taking drugs?

2. **Ré-framing of Research Questions & Procedures to be Followed: Interviews, Diary & Letter**

   **Interview One:**

   **Questions:**
   - Rory, perhaps we can begin by your telling me why you are here.
   - Rory, tell me about the story of your life - before you went to school, pre-school days, primary school days, high school days and now. Try to relate it to your drug use, if possible.
   - When did you first take drugs?
   - What drugs have you taken in the past and what are you taking now?
   - How often did you take drugs in the past? And now?
   - Where did you get the drugs from when you were at school? And now?
   - Where did you take drugs when you were at school? And now?
   - Tell me why you think you started drugs.
   - Tell me why you think you are still using drugs?

   **Procedures:**
   1. Interview room to be booked (1.5 hours)
   2. Tape-recording equipment to be booked and checked.
   3. Confidentiality issues addressed.
   4. Rapport to be established.
   5. Listen and attend.
   6. Focus of the interview to dictate the questions asked.
   7. Relevant probing.
   8. Have all questions/topics been covered?
   9. Appropriate end to interview.
Diary:

Question/Instruction:

Rory, I would like you to write a diary for the duration of one month. This will entail recording your actions, thoughts and feelings before, during and/or after taking drugs and/or drinking alcohol. Don’t worry about the actual structure of the diary, eg. grammar, neatness, etc. Try to be as honest as you can in your recordings as this will assist me in subsequently analysing what you write, and making sense of it in relation to your drug-taking experiences. You do not have to write an entry every day, just whenever you feel that it would be relevant to do so. Do you understand what you have to do?

Procedure:

1. Buy notebook for Rory to serve as his diary.
2. Arrange a suitable time for him to collect notebook and to discuss what is required of him.
3. Ensure that he understands the requirements.
4. Contact Rory about two weeks later to ensure compliance of instructions and to answer any questions re instruction.
5. Arrange to collect diary.

Interview Two:

Question:

• Upon reflection of the process of writing your diary, and of the previous interview, perhaps you would like to share any thoughts or ideas that you have in this regard with me.

Procedure:

1. Same as interview one.
2. Discuss personal letter requirements.

Personal Letter:

Question/instruction:

• Rory, I would like you to write a letter to yourself, reflecting on your drug-taking experiences. There is no specific structure or format to the letter, and the length should be approximately a page. What you choose to write about, is up to you.

Procedure:

1. Ensure that Rory understands what he is required to do.
2. Arrange to collect letter.
2 Thoughts/Structure regarding Final Case Study Report

Many thoughts were spent, and several messy drafts were compiled regarding the final case study report! One of the first drafts, as well as the final draft, will be presented here (verbatim - minus the illegibility, scribbles, highlighted and coloured sections!)

FIRST DRAFT

1. **Introduction**
   - In-depth evaluation of one person - what, why, how
   - Previous research (including Research Proposal info, eg. Kandel, McWhirter, etc.)
   - Aims & Hypotheses
   - Different focus - qualitative, phenomenological study - why
   - Method - how
   - Context of research - five initial interviews (under separate headings) - what
   - Bronfenbrenner - theory - why use this one - how will it help? Diagram
   - Social Learning - esp modelling (eg. peers!)
   - Erikson - esp. adolescence

2. **Methods**
   - Design - Yin case study; hypotheses
   - Reliability, validity, generalizability
   - Participants - who, how selected, characteristics
   - Instruments - interviews, diary, letter
   - Procedure - what happened, when, how (etc.) - in steps

3. **Context**
   - Genogram
   - Time line
   - Summarise interviews/diary briefly - sequentially, logically (no quotes, just facts)

4. **Results & Discussion**
   - To follow research questions (explicitly - no deviation!!) and theories

5. **Conclusions & Reflections**
   - What happened - process
   - Difficulties encountered & envisaged.
   - Further opportunities for future research
   - Limitations
   - Rory's poem & letter

FINAL DRAFT

1. **Introduction**
   - Rationale - start with research proposal into - adapt - expand - with necessary lit. (incl. general problem area). Problem with drug use and abuse definitions; dearth of
phenomenological research

• Aims & Hypotheses - 3 research questions
• Methods - case study, qualit, phenomenological, sample, interview, diary
• Understanding the context - initial five interviews - 5 sep. headings - describe
• Bronfenbrenner's theory - relevance to research; diagram
• Bandura - relevance to research - esp. observational/vicarious learning and positive reinforcement, peers
• Erikson - relevance to research, resp. adolescence, identity, peers, belonging

2. Methods
• Research design - the case study (why?); hypotheses
• Reliability, validity and generalisability
• Sample - who, how selected, characteristics
• Instruments - semi-structured, open-ended interviews; diary
• Procedure - what happened, when, where - step by step

3. Setting the Scene
• Sequential, logical summary of life history - thorough and salient facts - headings and quotes from interviews/diary to support

4. Results & Discussion
• Predisposing factors - Bronfenbrenner
• Precipitating factors - Bronfenbrenner, Bandura & Erikson
• Maintaining factors - Bronfenbrenner, Bandura
(Bronfenbrenner: all five systems throughout)

5. Conclusions & Reflections
• What really predisposed, precipitated and maintained Rory's drug-taking?
• Initial difficulties
• Phenomenological data
• Future possibilities for research
APPENDIX 10

CASE STUDY DATABASE

My database was constructed on the actual transcripts of the interviews themselves, as well as on a photocopy of the diary. The end result would have been illegible to any outsider, but it heralded a mini-minefield of themes, patterns, inspirations and insights. Different colours and graphics were used in order to cross-reference themes in the interviews and diary and to synthesise all data. Therefore, it would prove to be an almost impossible task to reproduce the case study database in its entirety at this point. However, I will go through the steps of my database, as well as to provide a few examples in illustration. The compilation of the database was a necessary and immensely fruitful exercise, which facilitated the actual composition of the final case study report, and also ensured that all relevant themes and issues were addressed.

Steps Taken

1. After both interviews were transcribed, and hard copies printed, I went through them jotting down themes in the margins. The diary was also scrutinised for themes. An example of a few rudimentary themes (from all 3 sources) that emerged were:

   • Parents (predisposing, microsystem)
   • Influence of peers (precipitating, micro/mesosystem, Bandura)
   • Varsity (maintaining, mesosystem)
   • Drugs not a problem (maintaining)
   • Positive aspects of dagga (maintaining/reinforcing)
   • Early life - father - values (predisposing/micro/exosystem/dyad)
   • Didn’t fit in (precipitating, Erikson)
   • Drink (14) (precipitating, Bandura)
   • Drink with friends - vandalise (Bandura)
   • Friends, fun, and availability of drugs (maintaining, Bandura)
   • Divorce (16) - family dynamics (maintaining, micro/chronosystem)
   • Police - contempt; scare tactics
   • Acid (19) (maintaining, Bandura)
   • Ecstasy with friend (maintaining, Bandura)
   • Varsity - drugs (maintaining)
   • Raves - belonging - family (maintaining, mesosystem, Bandura)

2. After all the themes were noted, they were then placed into groups. New insights were discovered in the process, eg. the theme of belonging which permeated throughout. An example of some of the groups formed, were

   • Peers (precipitating, maintaining, micro/mesosystem, Bandura)
   • Parents & family (predisposing, precipitating, maintaining,
micro/exo/macro/chronosystem)
- Identity (precipitating, Erikson)
- Belonging (precipitating, maintaining, Bandura)

3 The themes were then incorporated and synthesised into the final case study report.
I would like to begin by briefly setting out what I propose to present today. Firstly, I will contextualise my study by telling you a little about the research, and also by giving you some relevant background information. Secondly, I will proceed through the various steps of case study research as proposed by Robert Yin, intertwining same with relevant examples from my own research.

The title of my study is "An experiential case study of drug-taking". A holistic single case study, such as this one, enables one to analytically generalise to other cases, i.e. it can illustrate, represent or generalise to a particular theory, and herein lies its strength.

The subject of my case study is a 23 year-old male, who is a post-graduate student at the University of Natal (PMB). I will refer to him as Rory. Rory was adopted at birth, which adoptive parents subsequently divorced when he was 16. He has a sister, who was also adopted.

Very briefly, and to afford you sufficient background information in order to contextualise my study, I will proceed through the time-line which Rory himself composed.

I will now go through Yin’s case study method in order to highlight its relevance to my research. Firstly, certain essential preliminaries need to be addressed. The researcher needs to be able to handle and to be sufficiently conversant with different types of evidence or data - viz: documentation eg. diaries; archival records; interviews; direct observations; participant observation and physical artifacts. For the purposes of my case study, I initially conducted 5 in-depth semi-structured interviews with relevant organisations both on and off campus, viz. Student Counselling, Campus Health, SANCA, the Narcotics branch of the SAPS, and finally, a life officer at one of the university’s residences, in order to develop a context of understanding around current substance use and abuse. I then conducted two in-depth semi-structured interviews in collaboration with Rory. Subsequent to the first interview, I requested him to write a diary on his substance use experiences over the duration of one month. He has also written a personal letter addressed to himself reflecting on his drug-taking experiences to date.

An essential component of the preliminary stage is the careful articulation of the research questions. This dictates the direction and ultimate design of the case study. For the purposes of my case study, I have formulated the following questions:

1. What predisposed Rory to start taking drugs? (Main findings from literature: Family dynamics, peers)
2. What precipitated his drug-taking? (Literature: Peers; lack of parental monitoring)
3. Why does he continue to take drugs? (Literature: Peers; belonging; availability of drugs; pleasurable effects of drugs)
It is also essential to draw on theory to help design the case study. One of the theories on which I interpose with my own thinking is that of Urie Bronfenbrenner, and how the individual microsystems and the mesosystem, operative during Rory’s adolescence, have contributed to his drug taking. However, it is also highly desirable to develop alternate theories in an attempt to explain the same phenomena. This is a particular challenge which I am presently grappling with.

I have elected to conduct a descriptive and explanatory case study, and to this end must be cautioned not to endeavour to describe and explain everything which will be tantamount to a virtual impossibility, which is, after all, a potential pitfall of case study research. Inquiries into relevant issues raised by Rory during the interviews, together with a priori issues, will guide and specify my reading, and simultaneous review of literature. Focussing on specific salient themes, which attempt to go hand in hand with my research questions is desirable, eg. Rory’s sense of not belonging and the influence of peers on his drug taking.

The next stage in Yin’s case study method is the actual designing of the case study itself. The research design is an action plan which sets out how to travel from “here” to “there”, where “here” may be defined as the set of research questions to be answered, and “there” is some set of answers in response to such questions. I have already mentioned that to this end my study is a holistic one, based on the experiences of a single person, and interpreted within the framework of existing literature on drug-taking.

Just as with all other research methods, both qualitative and quantitative, issues apropos validity and reliability are of paramount importance. However, in case study research, validity and reliability are addressed throughout the study at the relevant stages, in order to continuously assess its quality and integrity. In order to address both internal and external validity of the study, reviewing all possible causal links, as well as any alternate theories, to explain a particular outcome, will be preferable.

Taking all the abovementioned issues into account, it stands to reason that the researcher needs to possess specific skills in preparing to collect, and subsequently collecting, the data. Yin mentions five such investigative skills which the researcher has to acquire through experience and practice. Very briefly, the skills needed are those relating to question asking, listening, adaptiveness and flexibility, grasping of the issues being studied and freedom from bias. It is not difficult to see that these skills are highly relevant and of critical necessity to effective case research. I can only hope that the particular counselling skills which I have been endeavouring to put into practice this year, eg. question asking and listening, have indeed stood the test of time.

A case study researcher also needs to design a case study protocol, which contains the basic research questions, as well as the questions to be asked in the interviews, a plan as to how such data is to be collected, and finally thoughts and ideas pertaining to the analysis, interpretation and the actual writing up of the case study report.

Apart from a case study protocol, it is also necessary to create a case study database which relates to the organisation of the evidence as well as new insights gained from the evidence, obtained during data collection. This is an excellent manner to systematically organise all evidence into salient themes that reflect the case study design and enquiry, which in turn creates significant insights into the data. The creation of both a case study protocol and database assists in addressing
the reliability of the study in question. Two of the recurrent themes which have emerged pursuant to my data collection, and preliminary analysis, are those around family dynamics, or dysfunction, and peer influence, which themes are indeed dominant in the literature. I would like to quote from the first interview:

Rory says: “My parents divorced when I was 16...and just that my whole concept of society, religion, family and just the way you’re brought up that the family’s like a unit, and when that crumbles and is destroyed, there’s really nothing left, and I realised, you know, I had big issues with my father, because of how different we were, and my mother we used to fight, and my sister we always used to fight. So, it was pretty hectic. So I realised I was on my own from a very young age I’d say, or maybe that was just in my mind, but that’s how I felt. So I felt that I could basically do what I want and I was going to do that. So, then I went to this new school, and as I said there were a lot more drugs around and that, and I got involved.”

Later on in the same interview he said:

I could only sort of relate to people who did drugs, you know. Then I got into the whole rave scene, and I felt like it was one big unity, and this was where I belonged, and maybe I felt that whole family thing again maybe...that you can get along with these people because you’re the same as them, so maybe I felt this feeling of belonging.

Analysing case study data is an immensely challenging, time-consuming, but ultimately richly rewarding task. This is where I am at present - about to start analysing my data. To this end, I envisage that I will be concentrating on two or three dominant themes inherent in the data, eg. peer influence and family dynamics, and to subsequently link these themes to existing theory and literature in order to explain certain outcomes, that is, drug-taking. Bronfenbrenner states that a person does not exist in isolation - and Rory is no exception. Many factors may have impacted upon the predisposing and precipitating factors surrounding his drug taking. However, exactly which particular impact needs special emphasis at a specific time - therein lies my challenge over the next few months.

I would like to end my presentation with a reading of one of Rory’s recent diary entries, as well as a poem which he wrote last year, which will afford you the unique opportunity to step inside the mind of a drug user and to accompany him on his journey, even if only for a brief moment or two.

On this particular night, Rory consumed 1 ecstasy tablet, 10 beers, 3/4 bottle rum, 4 tots whiskey, and 1 marijuana joint. He writes:

Really drunken mood, E makes the feeling much nicer, not much energy though. Everything seems so surreal and beautiful. Marijuana relaxing, but don’t like the hallucinations. Quite scary. People’s faces turn slightly yellow, green. Where they have scars or blemishes they go black, freaky, but must relax and enjoy. Sometimes wonder why even do this. Probably chasing or trying to get back the original euphoric experiences I once used to get. Could dance and rave all night on one E and 4 hours would go by without me knowing.
Rory's poem, which he composed last year, reads as follows:

Woman of my life black sunshine gold
Looks, feels and tastes so good.
Get a lite, smoke my pipe.
All my troubles vanish into thin air.
Then I have another hit and my vision
Blurs into warped distortions. My mind
can't comprehend.

What a life she is for me
My mind, body and soul, as free as can be.
Why won't this feeling of ecstasy never leave me
'Cause she's a fleeting illusion that is there
To haunt and taunt till I get a scare.

I'm rushing, running, racing after her
Like a ghost in the darkness she's one step ahead.
Leaving me haunted, exhausted and fucked up in the head.
Jah, what can I do to tame
The ghost of midnight, my body desires
Even more.

What is this thing I sacrifice my life for
Coloured black and gold just waiting to appease
This appetite lustful tonight.
I got a scare.

THANK YOU
K And that's when you're drinking.

R Ja, it's only when you're drinking.

K So, you would say that perhaps a rave club scene when you're taking a few e's is perhaps preferable.

R Ja, you're not going to get beaten up. You might get beaten up if you're caught dealing or something, but then you know that you're going to get beaten up, so you don't do that.

K Do you think there's any drug dealing going on at the raves and clubs?

R Ja, definitely, ja. I mean it's not difficult to tell who's not doing it. That's why I can't understand, because obviously the police are paid off and that. I mean, it's very difficult if you are dealing to hide the fact you're dealing, I mean there's people coming to you, money exchanging hands, and you know, so....

K Does it happen at the raves...

R Ja.

K And at __________?

R Ja, not that I know of, but I do know that a lot of coke goes down there, and ja....

K Drug dealing...dealing with coke...

R Ja.

K And at __________?

R I don't think so much, but I don't think there's dealing in there, but a couple of people will probably take coke or have a few e's or something, but not generally, I don't think.

K And isn't there a new club that's opened recently?

R That __________ one? Ja, the main dealers in town actually run that club, so they're full into it.

K Is that __________?

R Ja, it's a rave club, ja.

K And where is that? Obviously I won't mention these names...

R It's just by __________, just round the corner, ja. I mean, all the main dealers in this town, the guys who run it, and run the whole scene, and give to runners to move the stuff,