

**Variations in the Accomplishment of Persistent Heroin Use in  
Wales: A Typology of Users' Lifestyles**

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**Abstract**

**Background:** Much of the previous qualitative research on heroin users has focused on the progression and inevitable decline of a heroin using career or the struggles and setbacks of small single groups of heroin users. Much less attention has been paid to the ability of heroin users to successfully integrate heroin use into their broader lifestyles. We build on this literature by offering a contemporary view of the lives of heroin users in the United Kingdom that examines the role of heroin-using lifestyles in the accomplishment of persistent heroin use.

**Methods:** The research was based on a sample of 51 current or recent heroin users recruited from a needle exchange programme and low threshold drug service operating in Wales in the United Kingdom. The interviews were semi-structured and covered topics listed in an interview schedule.

**Results:** The analysis of users' narratives identified four unique types of lifestyle: 'Domestic users', 'Top boys', 'On-the-wander', and 'On-the-run'.

**Conclusion:** The typology of heroin-using lifestyles presented shows that heroin users' needs and abilities are variable and that a drug strategy tailored to their lifestyles might be beneficial. Aspects of heroin users' lifestyles comprise recovery capital that could be drawn upon as part of the treatment process.

Key words: typologies, heroin users, lifestyles, semi-structured interviews

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## **Variations in the Accomplishment of Persistent Heroin Use in Wales: A Typology of Users' Lifestyles**

### **Introduction**

Much of the previous research on lifestyles of persistent heroin users has focused on the development of the heroin career (e.g. Waldorf, 1972; Faupel, 1991) or the struggles and setbacks of small groups of heroin users (e.g. Wakeman, 2016). While there have been references to some of the rewards of heroin use, such as street status, the generation of meaning and identity, and camaraderie (e.g. Preble & Casey, 1969; Bourgois & Schonberg, 2009), much less is known about the ways in which persistent heroin users generate stable and possibly successful lifestyles. For the purposes of this study, persistent heroin users are defined as using every day for a period of three years or longer.

Despite the common use of the word 'lifestyle' in the social research literature, the term is rarely defined or comprehensively described. When it has been defined, it most frequently refers to the role played by social-psychological influences, such as temperament, family, peers, cognition and decision-making (Walters, 1994) or cultural factors such as Cohen's (1955) subcultural theory where criminals and drug users are viewed as developing subgroups based on alternative attitudes and norms of behaviour. However, there have been some more conventional uses of the term. Weber (1974), for example, used the concept of *Lebensstil* to refer to the choices an actor makes in their behaviour and life chances (Abel & Cochrane, 1993). Criminologists have also used the term 'lifestyle' to refer to 'routine activities' (Hindelang et al., 1978) and to explain how lifestyle can lead to vulnerability to criminal victimisation (Cohen & Felson 1978). Nurco et al. (1981) described lifestyle in the context of drug use as 'the constellation of behaviours centred around the various ways in which

individuals define and pursue their central life interests' (p.1306). These definitions are useful and would apply to what is known about the lifestyles of heroin users, but so far have not been fully discussed. However, further literature can be identified that clearly describes the lifestyles of heroin users, even when they are not explicitly using the term 'lifestyle'. These bodies of research are reviewed in the following sections

Whereas progress has been made in describing the lives of persistent heroin users, contemporary studies have not provided a comprehensive depiction of heroin-using lifestyles. Recent qualitative research has tended to focus on the lives of single groups of heroin users living in specific locations. Bourgois & Schonberg (2009), for example, based their study on heroin addicts living on the boundaries of San Francisco. Their living conditions were described as squalid and their lifestyles dominated by a need to raise money for heroin use, a need they rarely adequately met. In order to survive, and minimise the frequency of heroin withdrawal, they had to support one another in what was described as a 'moral economy' (see also Wakeman, 2016). This not only enabled users to share their drugs, but also generated a feeling of community separate from conventional society. Other single-group studies have also focused on sometimes desperate lifestyles in which users struggle to survive (Briggs, 2012; Wakeman, 2016; Briggs & Monge Gamero, 2017).

However, some have identified more successful populations that were able to get by without so much squalor and struggle. Several authors (e.g. Agar, 1973; Albertín & Iñiguez, 2008; Nasir and Rosenthal, 2009; Preble & Casey, 1967; Rosenthal, 2009; Parker & Newcombe, 1987; Pearson, 1987; Taylor, 1993) have pointed out how heroin use can be somewhat empowering, or at least provide an alternative lifestyle in economically depressed locales. Brady et al. (1999), Lallander (2003) and Pierce (1999) have shown how well-adjusted young people fitted heroin use into their deviant lifestyles. Moyle & Coomber (2015, 2017) described how heroin users might sell heroin as a sustainable way to get by. Using Bourdieu's (1977) theory of practice, they demonstrate how heroin users achieved success in their chosen field.

However, Moyle & Coomber (2017) directly related this success to aspects of their participants' backgrounds that prevented participation in mainstream activities, but allowed for 'successful drug dealing'.

Research on heroin-using lifestyles has also described differences in the lifestyles of heroin users through classifications and typologies. Classifications have one singular dividing principle and identify cases by logic and reasoning (e.g. classifying participants by ethnicity, age or gender). Typologies are based on multiple dividing principles based on groups of characteristics (Marradi, 1990; Bailey, 1994). As a research tool, typologies can be useful both in terms of analysis and response (Collier et al. 2012). They can also draw attention to important similarities and differences in the lives of sub-groups of heroin users, such as demographic, social and psychological factors. Typologies can also assist practitioners in responding to users' needs by identifying the common multi-dimensional contexts of their lives and drug use problems.

As an example, typologies have been commonly used within criminology to describe and respond to criminal behaviour (Helfgott, 2013). In part this stems from a scepticism that a single theory can fully explain diverse human behaviour. As a result, it has been suggested that typologies can be helpful in offering a more rounded view of criminal behaviour by providing explanations at the level of sub-groups (Horney, 2006). While Horney (2006) was referring to the need for criminal justice responses to be directed at offender groups, this logic could also apply to drug treatment and harm reduction responses.

For much of the twentieth century, heroin addiction was treated solely by doctors prescribing managed dosages of heroin (Bennett, 1988). However, more recent developments suggest that drug users needs and treatment requirements might require a more varied approach. In 2019, for example, the Academic Council on the Misuse of Drugs advocated treatment and support *tailored* more clearly to the specific needs of drug users (ACMD 2019). In 2020, the National Health Service (NHS, 2020),

covering Wales and other areas of the United Kingdom, recommended that personal circumstances could be used to decide upon the most appropriate form of treatment to offer. While neither report mentions 'lifestyle' directly, their recommendations are consistent with this approach. A typology of heroin using lifestyles could help in matching personal circumstances to appropriate treatment. This might be considered at the point of treatment allocation or as a source of information for ancillary treatment service that support users during their process of recovery, such as health, housing and welfare (Briggs, 2013).

Faupel (1991) constructed a typology based on heroin users in Wilmington, Delaware. This was posited as a means of understanding the nature of heroin use, rather than suggesting ways of responding to it. He described a four-stage process that made up the heroin career of his respondents and their related lifestyles: (1) *The occasional user* (limited heroin use, while maintaining a structured lifestyle); (2) *The stable addict* (regular heroin use, while maintaining a structured lifestyle); (3) *The freewheeling addict* (regular heroin use and high income from crime, but low levels of life structure), and (4) *The street junkie* (high need for heroin with limited financial resources and a weakly structured lifestyle). This went beyond previous studies by Waldorf (1972) and Rosenbaum (1981) which simply outlined the development and decline of a heroin career. In all three models there was a tacit assumption that heroin users' lives are similar in how they unfold, but that variation and change is found within their heroin using careers.

Warburton et al. (2005), researching in the United Kingdom, differentiated heroin users into occasional users, frequent, but not dependent, heroin users and users who controlled their use despite being dependent on the drug. Nurco & Schaeffer (1982) produced a typology of male narcotic heroin users recruited from criminal justice and treatment institutions in the United States. The typology was based on three dimensions: primary orientation to crime, adequacy of income from criminal activities, and level of involvement in legitimate activities. This resulted in six lifestyle types: 'successful criminal', 'street addicts', 'losers', 'working addicts', 'conservative addicts' and 'moochers' (a beggar or scrounger). Cohen (1986) produced a

psychosocial typology of heroin users using cluster analysis. Similar multi-dimensional typologies of heroin users in the United States have been proposed (Nurco et al., 1981; Nurco et al., 1989; & Shaffer et al., 1984). These latter typologies researched in the United States in the 1980s were based on quantitative analyses. Large samples were used which may have produced comprehensive, although not necessarily detailed, depictions of the lifestyle of heroin users. More recently studies by Gicquelais et al., (2019) and Bunting et al., (2020) have used quantitative measures to construct typologies concerning drug use, although without measuring other variables related to lifestyle.

The studies above have used typologies in the sense of analysis rather than in terms of response of the kind mentioned earlier. As a result, their contribution has been largely academic rather than treatment oriented. Nevertheless, at the same time treatment has become more individualised. This suggests that the functions of drug use typologies might be suitable for review. Despite previous studies having described aspects of the lives of heroin users, lifestyle itself has rarely been used as a central concept to understand persistent drug use. As a result, lifestyle has been to some extent neglected as a source of support when considering treatment for heroin users. In order to progress this concept, research would need to demonstrate the role of lifestyle-characteristics in the development and longevity of heroin use and the implications of this in the development and allocation of treatment and support for different kinds of heroin users. This paper seeks to present a detailed picture of the variations of lifestyles of a small group of persistent heroin users in Wales.

## **Methods**

### ***Research Design***

The data used in the current paper were collected between November 2011 and June 2012 as part of a PhD dissertation by one of the authors (Morgan 2017). The typology described in this

paper is a development on one presented in this dissertation. The aim of this research was to interview a broad sample of current or recent heroin users about their heroin use and their lifestyles. The majority of participants were recruited from a needle exchange programme and low threshold drug service operating in Wales in the United Kingdom where one of the authors (Morgan) was volunteering as a general support worker while conducting his PhD. These services offer largely informal forms of provision in relaxed and welcoming environments to the benefit of drug users. The researcher would offer the chance to participate to any visitors to the needle exchange during his shift if they were collecting equipment consistent with heroin use. Interested users were asked to leave a telephone number and to give their name so they could be contacted to arrange an interview. The night before a planned day of interviews the researcher would contact the potential participants and offer time slots to meet them at the needle exchange. In addition, a small number of participants were recruited from two homeless hostels nearby where staff were asked to find current and former persistent heroin users. The same procedure was then adopted for obtaining their details and making contact, with extra support from staff who helped to identify heroin users amongst the residents. All aspects of the research design were agreed by the University of South Wales research ethics panel prior to commission of the research.

### *Achieved Sample*

The aim of the sampling method was to achieve a target of 50 persistent heroin users. We believed that this number would produce a broad range of users and a variety of lifestyles without unnecessary duplication. In total, 51 users were interviewed. Forty-two of the interviewees were male and 49 were white. The mean age of all participants was 35 with ages ranging from 21 to 54 years. The total lengths of heroin-using careers of respondents at the

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time of interview ranged from 3.0 to 31.5 years. All participants claimed to be using heroin on a daily basis during the periods of their lives described below .

\*\*\*Table 1 about here\*\*\*

### *Interview Method*

The interviews were based on a semi-structured method that sought heroin users' narratives from the first time they were using heroin every day up until the present day. A preliminary part of the interview involved participants guiding the researcher in drawing a visual representation of their heroin using life from the advent of their daily heroin use up to the present day. They were asked to estimate their average consumption of heroin in the number of £10 bags they consumed each day. While acknowledging some variation in their daily consumption, which would bely their stated average, participants found this task manageable. After this process had been completed the researcher and participants chose some periods within their heroin using careers to interrogate further: the period when they began using heroin every day, a period of increasing use, a period of decreasing use and two periods of stable use. Discussion of each phase within their heroin using careers began by asking for their daily routines with further prompts for participants to tell anecdotes from that period of their lives. Participants tended to be forthcoming and enjoyed the opportunity to recount their life histories. In many cases the interviews became participant led and often fully biographical, going beyond the specific periods of their lives selected at the beginning of the interview.

### *Analysis*

The transcripts were loaded into NVivo for analysis. The first author read through all the interview transcripts line-by-line coding them thematically. The main coding notes covered

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amongst other things five key themes, which became the dimensions of the typology: 1. social environment; 2. housing; 3. nature of drug use; 4. range of drugs used; 5. money earned. These themes emerged from the participants narratives rather than having been established as points of interest *a priori*. Understanding the participants' heroin use required categorisation of the participants highly changeable and varying lifestyles. Codes were then linked axially as it was noted that certain themes tended to co-occur with other themes. At this point, some prototypical types of heroin-using lifestyles began to become visible. Transcripts were reread and codes reviewed until an emerging typology solidified. The analysis of users' narratives identified four major types of heroin-using lifestyle: 'Domestic users', 'Top boys', 'On the wander', and 'On the run'.

In order to check the reliability of the developed typology we devised a method for assessing whether a second reviewer would identify the same four types from the interview transcripts. In other words, we aimed to show that the method of classification was not arbitrary, but could be identified by others. It should be noted that qualitative typologies of heroin users rarely involve any kind of substantiation (e.g. Waldorf 1972; Faupel 1991). However, some studies have devised a method for doing this (e.g. Neale et al., 2017). Our approach resembled 'inter-rater reliability, which Armstrong et al. (1997) have described in the context of qualitative research. One of the authors created a table with the four types represented in the typology on the horizontal axis and five dimensions relating to user lifestyles on the vertical axis: 1. social environment; 2. housing; 3. nature of drug use; 4. range of drugs used; 5. money earned. In each cell, interview text was pasted where the participants had described their lifestyle in relation to each of the five dimensions (e.g. the participant might have recorded generating large amounts of money through drug dealing in the 'money earned' dimension and a wide range of drugs in the 'drugs used' dimension). The table was then sent to the second author to read the text relating to each of the dimensions and make an assessment about which typology

type the person was most appropriately fitted when living that lifestyle. This was conducted using information provided from 10 transcripts. The comparison showed that based on 10 sets of lifestyle information, the authors agreed on the lifestyle type on eight of the 10 occasions

## **Results**

The analysis of participants narratives identified four main types of heroin-using lifestyle: 'Domestic users', 'Top boys', 'On-the-wander', and 'On-the-run'. The most distinctive characteristics of each of these types are described in table 2. Each of these comprise coherent yet distinct lifestyles involving the integration of daily heroin use. The first type of heroin using lifestyle was also the most numerous, with thirty-two of the participants describing living in this way for at least some of their lives as heroin users. The next most common way to live for the participants of this study was 'On-the-Wander', with seventeen reporting living in this way. Twelve reported having lived as 'Top Boys' with ten having lived 'On-the-Run'. Due to the methods of this study we cannot say that any sort of heroin using lifestyle is most common. It should also be noted that many of the participants reported more than one type of heroin using lifestyle across their heroin using lives. A full analysis of transitions away from the four heroin using lifestyles is also beyond the scope of this paper, however heroin users did report moving from one of these lifestyles to another and also to lifestyles where they may not have used heroin or used it only occasionally.

\*\*\*Table 2 about here\*\*\*

### ***Domestic users***

The lifestyle of 'Domestic users' was characterised by living a somewhat conventional life

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despite daily use of a highly stigmatized drug. This presented challenges that required skilful and imaginative solutions. Some users mentioned recourse to secretive behaviour, whereby heroin use and associated behaviours were kept under wraps. As Ray explained: *“She thought I was having affairs, I wasn’t having affairs, I was out stealing, to pay for my habit”*. In other cases, ‘Domestic users’ managed difficult relationships with partners, friends and family or were shunned from social circles that they had once shared:

*“They wouldn’t have trusted me in their houses and things like that, because people don’t when they know you’re on heroin, you know, cos in general they don’t trust you, they think you’re gonna steal from them... it’s typical stereotyping” (Warren)*

Other participants described cutting themselves off from non-heroin users to avoid embarrassment. ‘Domestic users’ mostly associated with a small numbers of other heroin users.

In some cases, romantic partners acted as a team:

*“Drive into town, cos she used to drive, and then we’d pickup, pick up three or four, take them home, smoke them through the day, do that, and keep a little bit for the morning, I’d go back out on the rob then in the night” (Warren)*

Earning enough money for daily heroin use was another challenge to be faced. Warren was not the only ‘Domestic user’ to be involved in car crime, burglary or shoplifting. But not all ‘Domestic users’ resorted to acquisitive offending to fund their drug use. Some could stretch their job seekers or disability allowances far enough to cover their daily use. Others resorted to deceiving or borrowing from friends and family. They might also benefit from the reciprocal generosity of others if they were willing for them to use at their place of residence. Others had jobs in the legitimate economy, including menial factory work, working in catering, or working as car mechanics.

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‘Domestic users’ could persist in using a regular, yet modest, amount of heroin every day. They also integrated their use into their working lives by smoking the drug before work, at lunch time (making use of toilet cubicles) and then again after work. Using heroin at work and regularly hassling others for money often made the façade of normality difficult to maintain. This sometimes resulted in loss of control of their drug use, which meant that their day jobs and relationships with non-users were no longer feasible, as Joe describes:

*“Obviously I started being late in the mornings... being up smoking all night, have a smoke obviously before you started and as soon as you finish sort of thing, and then like you’re all tired, where you haven’t been sleeping... so it started to go downhill really”*

In summary, ‘Domestic users’ continued daily heroin use by managing some level of social order and conformity. While successful in maintaining heroin use over extended periods of time, the life of the domestic heroin users was often socially and psychologically costly.

### ***Top boys***

‘Top boys’, all of whom were men, might describe connections to organised crime or having fearsome reputations. This required insulating themselves from disapproval by providing a credible public identity. However, ‘Top boys’ were also keen to laud their own social skills, talking about good relationships with family and often with women who were outside the heroin scene. These users might argue that they are able to desist from or scale down their drug using and dealing activities. However, when pressed they might struggle to identify a viable alternative to their lifestyle:

*“I’d like try and say I’m fed up ... she’d say, well why don’t you do it? ... I’d say well, tell me where I’m gonna get all this from, and I’d pull out my pocket, maybe*

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*two grand from one pocket, and a big bag of mixed, drugs in the other pocket, and I'd be like, where am I going to get this from, at my age, and a car, and everything else I've got, and without helping my mum pay the mortgage"*

Whereas 'Domestic users' tended to report keeping their heroin-using associates to a minimum, 'Top boys' described friends and 'hangers on' who enjoyed their generosity. Harry always kept a lump of crack cocaine in a cornflake bowl on this living room table so visitors would not pester him by asking for a smoke of his own. He also paid his sister to count and hide his money. When asked if anyone around him suggested he curb his drug use he replied that 'I just had loads of friends... they thought I was great'. Jonnie, Harry and Mo provided narratives suggesting they were at the higher end of the 'Top boys' earning scale. Others, such as Colin, managed crack houses and earned drugs rather than money. A 'bigger dealer' would arrive in the morning with a stash of weighed and bagged up heroin and crack. For every five £10 deals sold one could be consumed. Colin claimed that the dealer brought 100 units every morning, all of which would go. This group differed from 'Domestic users' as many described crack as their primary drug and heroin as a necessary partner, albeit a drug that they were also dependent on. As was the case with 'Domestic users', 'Top boys' needed to apply some form of control over their drug use. However, for this group, self-control was a particularly challenging task. Jonny maintained this was a strong point of his. He would always sell enough to pay off his dealer, 'because I don't want two Asian guys coming to my house with shotguns, stick em in my mouth, which I have before'. Mo, however, admits his own drug use spelled the end for his lucrative business:

*"When I was smoking gear, I'd just switch into a different zone, I just didn't want nothing to do with all that crap, didn't have time to go driving around here dropping off here, dropping off there, so it just stopped like that"*

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In summary, ‘Top boys’ described periods within their heroin-using careers when they used heroin, crack cocaine and often a cocktail of other drugs excessively, in part as a result of working in the drug industry themselves. Whereas their working lives and their social skills insulated them from significant disapproval, their plentiful supplies of drugs and money provided substantial challenges in controlling their own drug use.

### *On the wander*

This type provides the most visible face of heroin use, where the principle challenges concern negotiating homelessness and heroin dependency in the city centre. In stories from this lifestyle, agency was rare. It was a common plotline that, following a prison sentence, participants ended up homeless and using heroin. As Charlie says, “everyone in there (a homeless shelter) was doing ... just sort of got roped into it”.

The city centre also provided ample sources of funding for a heroin user, with most quickly slotting into patterns of shoplifting and begging. Nigel described shoplifting as a simple necessity to avoid withdrawal symptoms: “I just got on with making money as usual, I just didn’t want to feel like that”. Not everyone could rise to the challenge so easily though. Gerwyn ended up ‘On the wander’ after a spell as a ‘Domestic user’ ended with his car being impounded and eviction from his house. He pleaded that “I ain’t a criminal, I couldn’t pinch to save my life, you know what I mean? So I was stuck really”. Whereas narratives from time spent ‘On the wander’ emphasised how easy heroin was to buy when a member of the city centre homeless community, Gerwyn complained this did not apply to him: “...cause they don’t know you, out to rip you off as well like do you know what I mean?... I was keeping getting ripped off by girls man”. Likewise, whereas many described begging as either a lucrative earner or a decent backup to shoplifting, others could not face the shame.

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Despite plentiful sources of money and heroin to be found in the city centres, participants also described the daily grind as onerous and described how a close knit community was present to provide a helping hand. Rhys talked about his close relationships to his brother and father, but also described how he would happily team up with others who shared his predicament:

*“It depended who was around like... we’d say like come with us like we’ll make a raise or if they ain’t got no gear and we got gear then we’ll sort you out and then just end up staying with them all day, whatever we make we’d share it” (Rhys).*

Participants did not describe enjoying their heroin but being slaves to the spectre of withdrawal. If they enjoyed a windfall from a bumper shoplifting trip or some other fortuitous event they might spend the money on cannabis or crack, although such events were downplayed. Finally, Rhys also alluded to a cyclical nature of challenges and plenty when living ‘On the wander’. He has served a number of prison sentences, mostly for shoplifting. I asked him if he expected any more in the near future, to which he responded that he needed one as life was easier after a period inside: ‘I put on more weight, changed appearance, changed clothes and that’s cos they’re smarted and all of that, the shop keepers like they change as well, the owners change the security guards change’. Overall, living ‘On the wander’ can be characterised by narratives of hard luck and dependency, juxtaposed with some warm allusions to the homeless community and a city centre that can provide for the everyday needs of those skilled in making use of the opportunities presented.

### ***On the run***

Heroin users living ‘On the run’ were also homeless, but lived a lifestyle distinct to conventional street users. Homelessness for those living ‘On the run’ might also involve ‘sofa surfing’ and regular changes in living situation such was the chaotic nature of the lifestyle. Instead of being dependent on the city streets, they found more ingenious ways of getting by.

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In contrast to those ‘on the wander’, people living in this way were primarily crack users who were also dependent on heroin. They might also be dependent drinkers or use benzodiazepines. This group did not have much time for the city centre homeless community and saw themselves more as ‘lone rangers’ preferring not to associate much with non-drug users as they were “in too much of a rush to get out of it” (Mike). The primary challenge here was raising enough money to consume both crack cocaine and heroin daily whilst also being homeless. To achieve this, participants needed to be ingenious and skill themselves for a multiple ‘raises’. Mike suggested his minimal daily earnings were £57, Amber would often earn hundreds of pounds per day all of which would be spent on heroin and crack. Amber utilised street sex work, but topped this up through a number of other schemes:

*“Sometimes I’d go snooping and get handbags, things like that and sneak around in buildings, or offices and all that, and then hospitals ... I’d go out shoplifting, off doing fraud.”*

Sleeping was not a nightly or regular occurrence while living ‘On the run’. Amber described her lifestyle as ‘chaotic as fuck’, before telling me that she would ‘stay awake for about four or five days and I’d be so psychosed by the end I’d just be knocked out in the daytime’. Unlike other lifestyle types reviewed in this article there was no interest in control. This lifestyle was largely characterised by complete abandon. Many heroin users from this sample described short term binges where they, for a day or a few weeks, would be seeking out various sources of income in order to binge on heroin and crack, perhaps topped off with as many benzodiazepines as they could buy:

*“I just go different places, shoplifting, get in debt, like I said, borrow off people, get in debt... I start off with one or two people, usually finish it off with other people” (Dale)*

These shorter binges can be described as instances of being ‘On the run’. However, the narratives of some participants indicate people can live this particular lifestyle for over a year.

## **Discussion**

As far as we know, the typology presented here is unique in that it presents a detailed and comprehensive depiction of contemporary heroin using lifestyles in the United Kingdom. It also builds on previous literature by emphasising the ingenuity of heroin users in persisting in heroin use despite challenges relating to stigma, earning money and controlling their drug use. Some of the types included in the typology are similar to those reported in studies conducted in the US. For example, ‘Domestic users’ resemble the ‘Stable addicts’ described by Faupel (1991) in that they attempt to combine heroin use with apparently conventionally structured routines of living. Similar attempts of users to integrate their heroin habit with conventional life have also been reported in studies by Brady et al. (1999) and Pierce (1999). ‘Top boys’ have some of the features of Faupel’s (1991) ‘Freewheeling junkies’ except for the absence of crack cocaine use and the preference for armed robbery over drug dealing as a lucrative source of funds. Elements of ‘On the wander’ could also be found among Faupel’s (1991) ‘hitting the skids’ group. Bourgois and Schonberg (2009) also reported that their white respondents often used heroin simply to avoid withdrawal symptoms and as such had features similar to the ‘On the Wander’ group. Having said this, the previous research has found only similarities to our groups. There are no examples of exactly the same types of heroin users nor are there any examples of a comprehensive four-group typology covering all heroin users.

### ***Lifestyle and persistent heroin use***

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Our research suggests that there might be benefits from developing a lifestyle concept of heroin users that comprehensively encompasses social, economic, biographical and psychological factors associated with persistent heroin use. Clearly, a lifestyle theory that focuses on just one of these features cannot reflect the complexities of leading a life on heroin. Some of the work needed to generate a more comprehensive and intuitive concept of lifestyle has already been proposed. Moyle and Coomber (2017), for example, used Bourdieu's (1977) theory of practice in order to understand competency among heroin users who also deal. It was suggested that aspects of their participants class background, referred to as their 'habitus', which prevented participation in mainstream economies served as 'capital' which allowed for competency in the 'practice' of drug dealing. Each of the types of lifestyle described above might be regarded as a social field in which heroin user's habitus provides capital which is drawn upon to enable competence in the practice of persistent heroin use. Unlike in the analysis of Moyle and Coomber (2017), achieving competency in this deviant field should not necessarily be regarded as a lack of competency in fields relating to conventional living. It will be possible to draw on these insights and the insights gained from the current research to begin the process of developing a lifestyle theory of persistent heroin use. By constructing a typology of heroin using lifestyles and understanding some of the variation in how persistent heroin use is achieved, it is hoped that a more holistic understanding of heroin use can be produced.

### ***Implications for treatment***

Aspects of the heroin-using lifestyles identified in this paper could have implications for the treatment of heroin users. The typology of heroin-using lifestyles presented suggests that heroin user's needs, and abilities vary and that a drug strategy tailored to their lifestyles might be a useful means of guiding treatment and support intervention. In terms of policy, successive

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government drug strategies (Home office 2010, 2017) have recommended that drug problems are best treated within the logic of recovery. Neale et al. (2015) have suggested that recovery-based treatments do not suit all individuals and that user's feedback could be used to change the language used in such therapies. The National Health Service (2020) and Welsh Government (2019) both suggest that characteristics of drug users should be used when deciding how to allocate different types of treatment. This paper draws on the voices of participants from this study to show how heroin users' lifestyles can suggest variations in needs and capabilities.

Aspects of heroin users' lifestyles and social environments are likely to be related to recovery capital (Cloud & Granfield 2008). Recovery capital refers to resources that aid the recovery process, Cloud and Granfield (2008) conceptualised these as social, physical (renamed financial by Neale et al. 2014), human and cultural capital. Best et al. (2020) built on these ideas to produce a quantitative measure differentiating between barriers to recovery and assets in recovery, showing that those who have moved from active drug use to recovery see improved scores for recovery assets and reduced scores in terms of barriers to recovery. This paper has looked to a group of persistent heroin users and used qualitative data to show how, depending on lifestyle, different groups might be better suited to different forms of treatment and support.

A heroin user identified as a 'Domestic user' is likely to possess recovery resources in the forms of financial capital through their possible legal employment and social capital through conventional relationships or the potential resurrection of previously shunned contacts. Attempts at recovery might aim to build upon this pro-social capital. 'Top boys' are resourceful and might also have built their lifestyle around heroin use and drug dealing. Strategies designed to reduce heroin use might make use of their resourcefulness to channel their abilities into alternative objectives.

'On the wander' users are likely to have limited recovery capital as a result of their immersion in a non-conventional lifestyle based almost wholly on other users. This resonates with the findings of Weston et al. (2017) in that social capital might not be conducive to recovery when manifested in networks of other drug users. Neale & Stevenson (2015) found that among homeless people living in hostels (some of whom were heroin users) that stocks of social capital were often reduced to other drug users and this form of social capital was more helpful to supporting persistent drug use than recovery. Attention should be turned to their self-evident need for housing and assistance in reconnecting homeless heroin users with more varied social connections.

'On the run' heroin users, who also described heavy crack use, often report a strong motivation for inebriation. Gowan (2010) has described populations of homeless crack users in San Francisco who were also resistant to the logics of treatment and especially recovery. However, the narratives of those living 'On the Run' also revealed ingenuity and industry as evidenced high earnings despite being homeless and living a chaotic lifestyle. By living as loners on the streets they may not become so enmeshed in social scenes that aid their persistent drug use. This however may be counterbalanced by their chronic inebriation and inebriation diminishing stocks of social and human capital.

The current research builds on previous literature that has sought to understand how offenders and drug users make use of 'hooks' for change (Giordano 2001) in the process of recovery. The participants of this study demonstrated an ability to adapt themselves to varying challenges that their heroin use presented.

### ***Implications for research***

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Much of the research on lifestyles of heroin users has been based on classification rather than typology. Classifications have been used to break down the activities of heroin users into different stages of their careers. They have also been used to compare features of users based on demographic classifications such as gender or ethnicity as well as psychological characteristics. Far less attention has been paid to multi-dimensional typologies of either heroin use or users' lifestyles. However, qualitative typologies have advantages in that they can combine several lifestyle and drug use features in order to generate a richer and more realistic understanding of users lives. It is hoped that the typology constructed here has contributed to understanding heroin use while possibly providing the basis of a method for using variations in lifestyle to inform the practice of assisting heroin users. Further research should be conducted to help comprehend more fully the qualities and characteristics of heroin users' lives. There has also been a problem in the past of disproportionate focus on heroin users in the United States, which have overwhelmingly described heroin users as 'dopefiends' who would eventually become 'down and outs' (e.g. Faupel, 1991, Bourgois & Schonberg, 2009). As a result, much less is known about the generalisability of these findings and their relevance to heroin users in the United Kingdom and other countries. There is also the related problem that a great deal of the most innovative findings on heroin lifestyles were generated several decades ago in what might be regarded as a different era (e.g. Preble & Casey, 1972, Parker & Newcombe, 1987, Faupel, 1991). Contemporary research might aim to pick up on the insights of the early work and develop a fuller understanding of current user lifestyles.

### ***Limitations***

We accept that there are limitations to the current research. Respondents were selected from just one harm-reduction centre and two homeless hostels and are unlikely to be representative of either users in treatment or in the community. Although this research has presented a

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comprehensive depiction of the lifestyles discussed by these participants, we accept that other types of heroin using lifestyles might be discovered in future research. There are also the obvious problems that respondents might not tell the truth but exaggerate or fail to disclose certain features of their life. However, research on validity of users' responses has tended to show a reasonable match between users' depictions and independent data (Parker 1996). It is also a challenge to generate a valid and reliable qualitative typology. We tried to limit the problem of reliability by testing the consistency of allocation of lifestyle statements into user types. As described in the methods section, the generation of types and the method of allocation were based on principles outlined by Neale et al. (2017) in that two researchers independently agreed on matching cases to types.

### **Conclusions**

The use of typologies in the study of heroin users has tended to go out of fashion, perhaps in the belief that the major findings have already been discussed. In addition, lifestyle has not been used as a central concept for understanding heroin use and developing treatment and support for heroin users. In practice, we have found similarities between our recent typology and some previous studies, especially in relation to destitute town centre heroin users who rely on begging and minor hustling to get by and 'Domestic users' who struggle to maintain a face of conformity. However, much less is known about more recent forms of 'Top boys' who have the power to control drug scenes through their monopolies of supply and strength of character. Similarly, less is known about users 'On the run' who also can dominate drug scenes through their energetic consumption of a wide range of drugs and their leadership role in showing others how to maximise fun to the point of exhaustion. A focus on lifestyle allows an understanding

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of the diversity of experience and to apply this knowledge to not only enhance analysis, but also focus treatment and support on users' competencies and capabilities.

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Table 1: Demographic characteristics of the heroin-user sample

Sample Characteristics			
% (n)			
Gender			
	Male 82.3 (42)	Female 17.7 (9)	Total 100 (51)
Age group			
21-30	23.8 (10)	44.3 (4)	27.5 (14)
31-40	42.9 (18)	33.3 (3)	41.2 (21)
41-50	31.0 (13)	11.1 (1)	27.5 (14)
51+	2.4 (1)	11.1 (1)	3.9 (2)
Heroin career details in years			
	Male	Female	Total
Mean (range)			
Age at interview	36.2 (21-54)	35.4 (27-53)	36.1 (21-54)
Age at onset	12.6 (3-32)	8.0 (4-12)	11.9 (3-32)
Length of heroin career	12.6 (3-32)	8.0 (4-12)	11.9 (3-32)

Age at onset measured from first instance of daily heroin use. Length of heroin career measured up to most recent heroin use.

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