

3 ***Becoming a Marihuana User***

AN unknown, but probably quite large, number of people in the United States use marihuana. They do this in spite of the fact that it is both illegal and disapproved.

The phenomenon of marihuana use has received much attention, particularly from psychiatrists and law enforcement officials. The research that has been done, as is often the case with research on behavior that is viewed as deviant, is mainly concerned with the question: why do they do it? Attempts to account for the use of marihuana lean heavily on the premise that the presence of any particular kind of behavior in an individual can best be explained as the result of some trait

OUTSIDERS

which predisposes or motivates him to engage in that behavior. In the case of marihuana use, this trait is usually identified as psychological, as a need for fantasy and escape from psychological problems the individual cannot face.¹

I do not think such theories can adequately account for marihuana use. In fact, marihuana use is an interesting case for theories of deviance, because it illustrates the way deviant motives actually develop in the course of experience with the deviant activity. To put a complex argument in a few words: instead of the deviant motives leading to the deviant behavior, it is the other way around; the deviant behavior in time produces the deviant motivation. Vague impulses and desires—in this case, probably most frequently a curiosity about the kind of experience the drug will produce—are transformed into definite patterns of action through the social interpretation of a physical experience which is in itself ambiguous. Marihuana use is a function of the individual's conception of marihuana and of the uses to which it can be put, and this conception develops as the individual's experience with the drug increases.²

The research reported in this and the next chapter deals with the career of the marihuana user. In this chapter, we look at the development of the individual's immediate physical experience with marihuana. In the next, we consider the way he reacts to the various social controls that have grown up around use of the drug. What we are trying to understand here is the

1. See, as examples of this approach, the following: Eli Marcovitz and Henry J. Meyers, "The Marihuana Addict in the Army," *War Medicine*, VI (December, 1944), 382-391; Herbert S. Gaskill, "Marihuana, an Introductory," *American Journal of Psychiatry*, CII (September, 1945), 202-204; Sol Charen and Luis Perelmau, "Personality Studies of Marihuana Addicts," *American Journal of Psychiatry*, CII (March, 1946), 674-682.

2. This theoretical point of view stems from George Herbert Mead's discussion of objects in *Mind, Self, and Society* (Chicago: University of Chicago Press, 1934), pp. 277-280.

Becoming a Marihuana User

sequence of changes in attitude and experience which lead to the use of marihuana for pleasure. This way of phrasing the problem requires a little explanation. Marihuana does not produce addiction, at least in the sense that alcohol and the opiate drugs do. The user experiences no withdrawal sickness and exhibits no ineradicable craving for the drug.³ The most frequent pattern of use might be termed "recreational." The drug is used occasionally for the pleasure the user finds in it, a relatively casual kind of behavior in comparison with that connected with the use of addicting drugs. The report of the New York City Mayor's Committee on Marihuana emphasizes this point:

A person may be a confirmed smoker for a prolonged period, and give up the drug voluntarily without experiencing any craving for it or exhibiting withdrawal symptoms. He may, at some time later on, go back to its use. Others may remain infrequent users of the cigarette, taking one or two a week, or only when the "social setting" calls for participation. From time to time we had one of our investigators associate with a marihuana user. The investigator would bring up the subject of smoking. This would invariably lead to the suggestion that they obtain some marihuana cigarettes. They would seek a "tea-pad," and if it was closed the smoker and our investigator would calmly resume their previous activity, such as the discussion of life in general or the playing of pool. There were apparently no signs indicative of frustration in the smoker at not being able to gratify the desire for the drug. We consider this point highly significant since it is so contrary to the experience of users of other narcotics. A similar situation occurring in one addicted to the use of morphine, cocaine or heroin would result in a compulsive attitude on the part of the addict to obtain the drug. If unable to secure it, there would be obvious physical and mental manifestations of frustration. This may be considered presumptive evidence that there is no true

3. Cf. Rogers Adams, "Marihuana," *Bulletin of the New York Academy of Medicine*, XVIII (November, 1942), 705-730.

OUTSIDERS

addiction in the medical sense associated with the use of marijuana.⁴

In using the phrase "use for pleasure," I mean to emphasize the noncompulsive and casual character of the behavior. (I also mean to eliminate from consideration here those few cases in which marijuana is used for its prestige value only, as a symbol that one is a certain kind of person, with no pleasure at all being derived from its use.)

The research I am about to report was not so designed that it could constitute a crucial test of the theories that relate marijuana use to some psychological trait of the user. However, it does show that psychological explanations are not in themselves sufficient to account for marijuana use and that they are, perhaps, not even necessary. Researchers attempting to prove such psychological theories have run into two great difficulties, never satisfactorily resolved, which the theory presented here avoids. In the first place, theories based on the existence of some predisposing psychological trait have difficulty in accounting for that group of users, who turn up in sizable numbers in every study,⁵ who do not exhibit the trait or traits which are considered to cause the behavior. Second, psychological theories have difficulty in accounting for the great variability over time of a given individual's behavior with reference to the drug. The same person will at one time be unable to use the drug for pleasure, at a later stage be able and willing to do so, and still later again be unable to use it in this way. These changes, difficult to explain from a theory based on the user's needs for "escape" are readily understand-

4. The New York City Mayor's Committee on Marijuana, *The Marijuana Problem in the City of New York* (Lancaster, Pennsylvania: Jacques Cattell Press, 1944), pp. 12-13.

5. Cf. Lawrence Kolb, "Marijuana," *Federal Probation*, II (July, 1938), 22-25; and Walter Bromberg, "Marijuana: A Psychiatric Study," *Journal of the American Medical Association*, CXIII (July 1, 1939), 11.

able as consequences of changes in his conception of the drug. Similarly, if we think of the marijuana user as someone who has learned to view marijuana as something that can give him pleasure, we have no difficulty in understanding the existence of psychologically "normal" users.

In doing the study, I used the method of analytic induction. I tried to arrive at a general statement of the sequence of changes in individual attitude and experience which always occurred when the individual became willing and able to use marijuana for pleasure, and never occurred or had not been permanently maintained when the person was unwilling to use marijuana for pleasure. The method requires that every case collected in the research substantiate the hypothesis. If one case is encountered which does not substantiate it, the researcher is required to change the hypothesis to fit the case which has proven his original idea wrong.⁶

To develop and test my hypothesis about the genesis of marijuana use for pleasure, I conducted fifty interviews with marijuana users. I had been a professional dance musician for some years when I conducted this study and my first interviews were with people I had met in the music business. I asked them to put me in contact with other users who would be willing to discuss their experiences with me. Colleagues working on a study of users of opiate drugs made a few interviews available to me which contained, in addition to material on opiate drugs, sufficient material on the use of marijuana to furnish a test of my hypothesis.⁷ Although in the end half

6. The method is described in Alfred R. Lindesmith, *Opiate Addiction* (Bloomington, Indiana: Principia Press, 1947), chap. 1. There has been considerable discussion of this method in the literature. See, particularly, Ralph H. Turner, "The Quest for Universals in Sociological Research," *American Sociological Review*, 18 (December, 1953), 604-611, and the literature cited there.

7. I wish to thank Solomon Kobrin and Harold Finestone for making these interviews available to me.

OUTSIDERS

of the fifty interviews were conducted with musicians, the other half covered a wide range of people, including laborers, machinists, and people in the professions. The sample is, of course, in no sense "random"; it would not be possible to draw a random sample, since no one knows the nature of the universe from which it would have to be drawn.

In interviewing users, I focused on the history of the person's experience with marihuana, seeking major changes in his attitude toward it and in his actual use of it, and the reasons for these changes. Where it was possible and appropriate, I used the jargon of the user himself.

The theory starts with the person who has arrived at the point of willingness to try marihuana. (I discuss how he got there in the next chapter.) He knows others use marihuana to "get high," but he does not know what this means in any concrete way. He is curious about the experience, ignorant of what it may turn out to be, and afraid it may be more than he has bargained for. The steps outlined below, if he undergoes them all and maintains the attitudes developed in them, leave him willing and able to use the drug for pleasure when the opportunity presents itself.

Learning the Technique

The novice does not ordinarily get high the first time he smokes marihuana, and several attempts are usually necessary to induce this state. One explanation of this may be that the drug is not smoked "properly," that is, in a way that insures sufficient dosage to produce real symptoms of intoxication. Most users agree that it cannot be smoked like tobacco if one is to get high:

46

Becoming a Marihuana User

Take in a lot of air, you know, and . . . I don't know how to describe it, you don't smoke it like a cigarette, you draw in a lot of air and get it deep down in your system and then keep it there. Keep it there as long as you can.

Without the use of some such technique⁸ the drug will produce no effects, and the user will be unable to get high:

The trouble with people like that [who are not able to get high] is that they're just not smoking it right, that's all there is to it. Either they're not holding it down long enough, or they're getting too much air and not enough smoke, or the other way around or something like that. A lot of people just don't smoke it right, so naturally nothing's gonna happen.

If nothing happens, it is manifestly impossible for the user to develop a conception of the drug as an object which can be used for pleasure, and use will therefore not continue. The first step in the sequence of events that must occur if the person is to become a user is that he must learn to use the proper smoking technique so that his use of the drug will produce effects in terms of which his conception of it can change.

Such a change is, as might be expected, a result of the individual's participation in groups in which marihuana is used. In them the individual learns the proper way to smoke the drug. This may occur through direct teaching:

I was smoking like I did an ordinary cigarette. He said, "No, don't do it like that." He said, "Suck it, you know, draw in and hold it in your lungs till you . . . for a period of time."

I said, "Is there any limit of time to hold it?"

He said, "No, just till you feel that you want to let it out, let it out." So I did that three or four times.

8. A pharmacologist notes that this ritual is in fact an extremely efficient way of getting the drug into the blood stream. See R. P. Walton, *Marihuana: America's New Drug Problem* (Philadelphia: J. B. Lippincott, 1938), p. 48.

47

Many new users are ashamed to admit ignorance and, pretending to know already, must learn through the more indirect means of observation and imitation:

I came on like I had turned on [smoked marijuana] many times before, you know. I didn't want to seem like a punk to this cat. See, like I didn't know the first thing about it—how to smoke it, or what was going to happen, or what. I just watched him like a hawk—I didn't take my eyes off him for a second, because I wanted to do everything just as he did it. I watched how he held it, how he smoked it, and everything. Then when he gave it to me I just came on cool, as though I knew exactly what the score was. I held it like he did and took a ^(puff) ~~hit~~ just the way he did.

No one I interviewed continued marijuana use for pleasure without learning a technique that supplied sufficient dosage for the effects of the drug to appear. Only when this was learned was it possible for a conception of the drug as an object which could be used for pleasure to emerge. Without such a conception marijuana use was considered meaningless and did not continue.

Learning to Perceive the Effects

Even after he learns the proper smoking technique, the new user may not get high and thus not form a conception of the drug as something which can be used for pleasure. A remark made by a user suggested the reason for this difficulty in getting high and pointed to the next necessary step on the road to being a user:

As a matter of fact, I've seen a guy who was high out of his mind and didn't know it.

[How can that be, man?]

Well, it's pretty strange, I'll grant you that, but I've seen it.

This guy got on with me, claiming that he'd never got high, one of those guys, and he got completely stoned. And he kept insisting that he wasn't high. So I had to prove to him that he was.

What does this mean? It suggests that being high consists of two elements: the presence of symptoms caused by marijuana use and the recognition of these symptoms and their connection by the user with his use of the drug. It is not enough, that is, that the effects be present; alone, they do not automatically provide the experience of being high. The user must be able to point them out to himself and consciously connect them with having smoked marijuana before he can have this experience. Otherwise, no matter what actual effects are produced, he considers that the drug has had no effect on him: "I figured it either had no effect on me or other people were exaggerating its effect on them, you know. I thought it was probably psychological, see." Such persons believe the whole thing is an illusion and that the wish to be high leads the user to deceive himself into believing that something is happening when, in fact, nothing is. They do not continue marijuana use, feeling that "it does nothing" for them.

Typically, however, the novice has faith (developed from his observation of users who do get high) that the drug actually will produce some new experience and continues to experiment with it until it does. His failure to get high worries him, and he is likely to ask more experienced users or provoke comments from them about it. In such conversations he is made aware of specific details of his experience which he may not have noticed or may have noticed but failed to identify as symptoms of being high:

I didn't get high the first time. . . . I don't think I held it in long enough. I probably let it out, you know, you're a little afraid. The second time I wasn't sure, and he [smoking companion] told me, like I asked him for some of the symptoms or something,

how would I know, you know. . . . So he told me to sit on a stool. I sat on—I think I sat on a bar stool—and he said, "Let your feet hang," and then when I got down my feet were real cold, you know.

And I started feeling it, you know. That was the first time. And then about a week after that, sometime pretty close to it, I really got on. That was the first time I got on a big laughing kick, you know. Then I really knew I was on.

One symptom of being high is an intense hunger. In the next case the novice becomes aware of this and gets high for the first time:

They were just laughing the hell out of me because like I was eating so much. I just scoffed [ate] so much food, and they were just laughing at me, you know. Sometimes I'd be looking at them, you know, wondering why they're laughing, you know, not knowing what I was doing. [Well, did they tell you why they were laughing eventually?] Yeah, yeah, I come back, "Hey, man, what's happening?" Like, you know, like I'd ask, "What's happening?" and all of a sudden I feel weird, you know. "Man, you're on, you know. You're on pot [high on marihuana]." I said, "No, am I?" Like I don't know what's happening.

The learning may occur in more indirect ways:

I heard little remarks that were made by other people. Somebody said, "My legs are rubbery," and I can't remember all the remarks that were made because I was very attentively listening for all these cues for what I was supposed to feel like.

The novice, then, eager to have this feeling, picks up from other users some concrete referents of the term "high" and applies these notions to his own experience. The new concepts make it possible for him to locate these symptoms among his own sensations and to point out to himself a "something different" in his experience that he connects with drug use. It is only when he can do this that he is high. In the next case,

the contrast between two successive experiences of a user makes clear the crucial importance of the awareness of the symptoms in being high and re-emphasizes the important role of interaction with other users in acquiring the concepts that make this awareness possible:

[Did you get high the first time you turned on?] Yeah, sure. Although, come to think of it, I guess I really didn't. I mean, like that first time it was more or less of a mild drunk. I was happy, I guess, you know what I mean. But I didn't really know I was high, you know what I mean. It was only after the second time I got high that I realized I was high the first time. Then I knew that something different was happening.

[How did you know that?] How did I know? If what happened to me that night would of happened to you, you would've known, believe me. We played the first tune for almost two hours—one tune! Imagine, man! We got on the stand and played this one tune, we started at nine o'clock. When we got finished I looked at my watch, it's a quarter to eleven. Almost two hours on one tune. And it didn't seem like anything.

I mean, you know, it does that to you. It's like you have much more time or something. Anyway, when I saw that, man, it was too much. I knew I must really be high or something if anything like that could happen. See, and then they explained to me that that's what it did to you, you had a different sense of time and everything. So I realized that that's what it was. I knew then. Like the first time, I probably felt that way, you know, but I didn't know what's happening.

It is only when the novice becomes able to get high in this sense that he will continue to use marihuana for pleasure. In every case in which use continued, the user had acquired the necessary concepts with which to express to himself the fact that he was experiencing new sensations caused by the drug. That is, for use to continue, it is necessary not only to use the drug so as to produce effects but also to learn to perceive these

effects when they occur. In this way marihuana acquires meaning for the user as an object which can be used for pleasure.

With increasing experience the user develops a greater appreciation of the drug's effects; he continues to learn to get high. He examines succeeding experiences closely, looking for new effects, making sure the old ones are still there. Out of this there grows a stable set of categories for experiencing the drug's effects whose presence enables the user to get high with ease.

Users, as they acquire this set of categories, become connoisseurs. Like experts in fine wines, they can specify where a particular plant was grown and what time of year it was harvested. Although it is usually not possible to know whether these attributions are correct, it is true that they distinguish between batches of marihuana, not only according to strength, but also with respect to the different kinds of symptoms produced.

The ability to perceive the drug's effects must be maintained if use is to continue; if it is lost, marihuana use ceases. Two kinds of evidence support this statement. First, people who become heavy users of alcohol, barbiturates, or opiates do not continue to smoke marihuana, largely because they lose the ability to distinguish between its effects and those of the other drugs.⁹ They no longer know whether the marihuana gets them high. Second, in those few cases in which an individual uses marihuana in such quantities that he is always high, he is apt to feel the drug has no effect on him, since the essential element of a noticeable difference between feeling

9. "Smokers have repeatedly stated that the consumption of whiskey while smoking negates the potency of the drug. They find it very difficult to get 'high' while drinking whiskey and because of that smokers will not drink while using the 'weed.'" (New York City Mayor's Committee on Marihuana, *The Marihuana Problem in the City of New York*, op. cit., p. 13.)

high and feeling normal is missing. In such a situation, use is likely to be given up completely, but temporarily, in order that the user may once again be able to perceive the difference.

Learning to Enjoy the Effects

One more step is necessary if the user who has now learned to get high is to continue use. He must learn to enjoy the effects he has just learned to experience. Marihuana-produced sensations are not automatically or necessarily pleasurable. The taste for such experience is a socially acquired one, not different in kind from acquired tastes for oysters or dry martinis. The user feels dizzy, thirsty; his scalp tingles; he misjudges time and distances. Are these things pleasurable? He isn't sure. If he is to continue marihuana use, he must decide that they are. Otherwise, getting high, while a real enough experience, will be an unpleasant one he would rather avoid.

The effects of the drug, when first perceived, may be physically unpleasant or at least ambiguous:

It started taking effect, and I didn't know what was happening, you know, what it was, and I was very sick. I walked around the room, walking around the room trying to get off, you know; it just scared me at first, you know. I wasn't used to that kind of feeling.

In addition, the novice's naïve interpretation of what is happening to him may further confuse and frighten him, particularly if he decides, as many do, that he is going insane:

I felt I was insane, you know. Everything people done to me just wiggled me. I couldn't hold a conversation, and my mind would be wandering, and I was always thinking, oh, I don't know, weird things, like hearing music different. . . . I get the feeling that I can't talk to anyone. I'll goof completely.

OUTSIDERS

Given these typically frightening and unpleasant first experiences, the beginner will not continue use unless he learns to redefine the sensations as pleasurable:

It was offered to me, and I tried it. I'll tell you one thing. I never did enjoy it at all. I mean it was just nothing that I could enjoy. [Well, did you get high when you turned on?] Oh, yeah, I got definite feelings from it. But I didn't enjoy them. I mean I got plenty of reactions, but they were mostly reactions of fear. [You were frightened?] Yes. I didn't enjoy it. I couldn't seem to relax with it, you know. If you can't relax with a thing, you can't enjoy it, I don't think.

In other cases the first experiences were also definitely unpleasant, but the person did become a marijuana user. This occurred, however, only after a later experience enabled him to redefine the sensations as pleasurable:

[This man's first experience was extremely unpleasant, involving distortion of spatial relationships and sounds, violent thirst, and panic produced by these symptoms.] After the first time I didn't turn on for about, I'd say, ten months to a year. . . . It wasn't a moral thing; it was because I'd gotten so frightened, been' so high. An' I didn't want to go through that again, I mean, my reaction was, "Well, if this is what they call bein' high, I don't dig [like] it." . . . So I didn't turn on for a year almost, accounta that. . . .

Well, my friends started, an' consequently I started again. But I didn't have any more, I didn't have that same initial reaction, after I started turning on again.

[In interaction with his friends he became able to find pleasure in the effects of the drug and eventually became a regular user.]

In no case will use continue without a redefinition of the effects as enjoyable.

This redefinition occurs, typically, in interaction with more experienced users who, in a number of ways, teach the novice to find pleasure in this experience which is at first so

frightening.¹⁰ They may reassure him as to the temporary character of the unpleasant sensations and minimize their seriousness, at the same time calling attention to the more enjoyable aspects. An experienced user describes how he handles newcomers to marijuana use:

Well, they get pretty high sometimes. The average person isn't ready for that, and it is a little frightening to them sometimes. I mean, they've been high on lush [alcohol], and they get higher that way than they've ever been before, and they don't know what's happening to them. Because they think they're going to keep going up, up, up till they lose their minds or begin doing weird things or something. You have to like reassure them, explain to them that they're not really flipping or anything, that they're gonna be all right. You have to just talk them out of being afraid. Keep talking to them, reassuring, telling them it's all right. And come on with your own story, you know: "The same thing happened to me. You'll get to like that after awhile." Keep coming on like that; pretty soon you talk them out of being scared. And besides they see you doing it and nothing horrible is happening to you, so that gives them more confidence.

The more experienced user may also teach the novice to regulate the amount he smokes more carefully, so as to avoid any severely uncomfortable symptoms while retaining the pleasant ones. Finally, he teaches the new user that he can "get to like it after awhile." He teaches him to regard those ambiguous experiences formerly defined as unpleasant as enjoyable. The older user in the following incident is a person whose tastes have shifted in this way, and his remarks have the effect of helping others to make a similar redefinition:

A new user had her first experience of the effects of marijuana and became frightened and hysterical. She "felt like she was half in and half out of the room" and experienced a number of alarming physical symptoms. One of the more experienced

10. Charen and Perelman, *op. cit.*, p. 679.

users present said, "She's dragged because she's high like that. I'd give anything to get that high myself. I haven't been that high in years."

In short, what was once frightening and distasteful becomes, after a taste for it is built up, pleasant, desired, and sought after. Enjoyment is introduced by the favorable definition of the experience that one acquires from others. Without this, use will not continue, for marihuana will not be for the user an object he can use for pleasure.

In addition to being a necessary step in becoming a user, this represents an important condition for continued use. It is quite common for experienced users suddenly to have an unpleasant or frightening experience, which they cannot define as pleasurable, either because they have used a larger amount of marihuana than usual or because the marihuana they have used turns out to be of a higher quality than they expected. The user has sensations which go beyond any conception he has of what being high is and is in much the same situation as the novice, uncomfortable and frightened. He may blame it on an overdose and simply be more careful in the future. But he may make this the occasion for a rethinking of his attitude toward the drug and decide that it no longer can give him pleasure. When this occurs and is not followed by a redefinition of the drug as capable of producing pleasure, use will cease.

The likelihood of such a redefinition occurring depends on the degree of the individual's participation with other users. Where this participation is intensive, the individual is quickly talked out of his feeling against marihuana use. In the next case, on the other hand, the experience was very disturbing, and the aftermath of the incident cut the person's participation with other users to almost zero. Use stopped for three years and began again only when a combination of circum-

stances, important among which was a resumption of ties with users, made possible a redefinition of the nature of the drug:

It was too much, like I only made about four pokes, and I couldn't even get it out of my mouth, I was so high, and I got real flipped. In the basement, you know, I just couldn't stay in there anymore. My heart was pounding real hard, you know, and I was going out of my mind; I thought I was losing my mind completely. So I cut out of this basement, and this other guy, he's out of his mind, told me, "Don't, don't leave me, man. Stay here." And I couldn't.

I walked outside, and it was five below zero, and I thought I was dying, and I had my coat open; I was sweating, I was perspiring. My whole insides were all . . . , and I walked about two blocks away, and I fainted behind a bush. I don't know how long I laid there. I woke up, and I was feeling the worst, I can't describe it at all, so I made it to a bowling alley, man, and I was trying to act normal, I was trying to shoot pool, you know, trying to act real normal, and I couldn't lay and I couldn't stand up and I couldn't sit down, and I went up and laid down where some guys that spot pins lay down, and that didn't help me, and I went down to a doctor's office. I was going to go in there and tell the doctor to put me out of my misery . . . because my heart was pounding so hard, you know. . . . So then all week end I started flipping, seeing things there and going through hell, you know, all kinds of abnormal things. . . . I just quit for a long time then.

[He went to a doctor who defined the symptoms for him as those of a nervous breakdown caused by "nerves" and "worries." Although he was no longer using marihuana, he had some recurrences of the symptoms which led him to suspect that "it was all his nerves."] So I just stopped worrying, you know; so it was about thirty-six months later I started making it again. I'd just take a few pokes, you know. [He first resumed use in the company of the same user-friend with whom he had been involved in the original incident.]

A person, then, cannot begin to use marihuana for pleasure, or continue its use for pleasure, unless he learns to define