

Panel ABSTRACT

Panel 07: Addiction in new cultural and class contexts

Organizer: Joseph Tulasiewicz, Bhrigupati Singh, Alastair Parsons

Abstract: Most qualitative research on addiction has engaged with and depicted a specific kind of addict: a marginalized American one, in some ways not that distant from the tropes of popular culture. This panel proposes moving research emphasis away from America, but also beyond the archetype of the down-and-out drug addict. If research focuses too heavily on extreme cases of American poverty and drug abuse, misleading generalisations about addiction may be extrapolated out onto people in wildly differing circumstances.

By studying addiction in new contexts, anthropologists can ask serious questions about what addiction is - but also what recovery looks like. In her work on Mexican anexos, Angela Garcia argued that violence and coercion can have a place in addiction care. In his research on Russian placebo therapies, Eugene Raikhel questioned the idea of the lifelong spiritual journey of recovery popularised by AA. In her work on gambling addiction in Las Vegas, Natasha Schull showed how choice itself can become a medium of addiction, rather than something addicts are deprived of. As these anthropologists have done, this panel will question received wisdom about the causes of addiction and ask provocative questions about treatment best practice.

SESSION SCHEDULE

17.09.2025 | Slot 4| 2-0-1

Armaan Mullick Alkazi: Stuck between mahols (atmospheres): binge drinking on the street in Delhi.

Lucy Clarke: "Don't worry about the God stuff": How secularity shapes recovery in London's Twelve Step Fellowships

Raffik Poole: Dependence in Recovery: Healing Suicidal Ideation with Ketamine.

Glikery Ulunov: Misuse as Adaptation and the Breakdown of Adaptation: Control and its

SESSION PAPERS

Stuck between mahols (atmospheres) : binge drinking on the street in Delhi. Armaan Mullick Alkazi

This paper describes the regular binge drinking amongst a group of men in Delhi. It focuses on the relationship between these men and a residential respite shelter, where they have lived for extended periods of time recovering from chronic bouts of TB, as well as volunteered to do care work. I use the vernacular concept of 'mahols', which can be translated as 'atmosphere, environment or ambience' used by staff at the respite shelter to think through different generative atmospheres. I conceptualize binge drinking as a discordance or difficulty in moving between different 'mahols', in this case that of the street and shelter life. 'Mahols' are a compelling way to think through both curative and toxic atmospheres, they provide an intersubjective space that is beyond the individual and shapes how someone may think, act and feel. Often used to describe moments of violence and other heightened intensities, mahols are a structure of thought that accommodates moments where an individual or collective exceeds norms. The concept shifts focuses on a wide relational ecology and can consequently move the locus of energy away from an individual focus and onto a wider set of factors. Taking 'mahol' seriously is part of a wider turn in anthropology towards investigating atmospheres, their qualities, and the qualities then enable or/and engender.

"Don't worry about the God stuff": How secularity shapes recovery in London's Twelve Step Fellowships <u>Lucy Clarke</u>

In a conversation about the 'Higher Power' concept in Twelve-Step Fellowships (TSFs), my informant, Madeline, said "I feel bad for people who are theist sometimes because there's all this "oh it says God but it's not really God it can be anything" and they must be like "for me it is actually God" You know? For them, it's not just an idea or a symbol". Madeline articulates the TSF concept that a person's 'Higher Power' can be what they wish -an idea that, she suggests, is so widespread, that theists might even feel marginalised. This reflects a starkly different picture of TSF recovery to that in the literature. Much of the literature on Twelve-Step Fellowships has articulated TSFs as primarily theist, and nonreligious or secular TSF discourse and subjectivities as marginal. This is due, perhaps, to the concentration of studies on TSF's in North America, rather than in places with widespread nonreligion such as the UK. Drawing on ethnographic fieldwork in London, this talk traces how secular and nonreligious discourse runs through TSF meetings. Concepts and practices which are etically understood to be 'religious' (such as the concept of God) become re-framed by members as practical necessities, utilised in service of recovery, not as belief statements. This focus on practical health outcomes works to render the discourse of TSFs palatable to the nonreligious

subjectivities that it anticipates. This talk will explore how, in this way, secular ideologies inform how the work of recovery is understood and carried out in London.

Dependence in Recovery: Healing Suicidal Ideation with Ketamine. *Raffik Poole*

This paper draws from ethnographic research conducted in California (USA) studying the effects of ketamine therapy, a growing mental health treatment. In non-clinical contexts, ketamine is known as a recreational drug with increasing rates of addiction in young people. In therapeutic contexts, ketamine therapy can be a highly effective intervention if used as a tool under proper supervision to process difficult emotions, heal trauma and uncover the root causes of mental illness. This is done by harnessing its psychedelic effects, embedded within a well-cultivated therapeutic relationship. However, ketamine can also be used to mask the roots of distress, treating symptoms rather than causes akin to more traditional antidepressant medications. Ketamine is able to rapidly relieve suicidal ideation, through its dissociative effects where the source of suicidal thoughts may be obscured and locked away instead of revealed and processed therapeutically. This rapid and reliable mechanism can be a lifeline for patients, but the effects of a single dose may be short-lived, leading to a dependence on 'maintenance' doses that is ultimately a convenient business model for ketamine clinics. Liberation from suicidal ideation may lead to a new form of confinement in ketamine dependence.

This paper asks – what is the line between effective medication, dependency and addiction? How should we class potentially life-saving drugs that increase overall agency but create dependency? It seeks to complicate mainstream narratives of addiction as a fall into destitution, instead showing how recovery and dependency may be intertwined, leading to an increase in quality of life.

Misuse as Adaptation and the Breakdown of Adaptation: Control and its Limits in Russian Gabapentinoid Use

Glikery Ulunov

My research examines how Russian biohackers and psychiatric patients instrumentally misuse gabapentin to control specific aspects of experience—sleep, socialization, emotional pain, or withdrawal from other substances—and how these practices can unravel. Drawing on qualitative research including interviews, participant observation, and digital ethnography, I explore how gabapentin becomes a technology of self-regulation among young adults navigating the failures of psychiatry and the repressive socio-political climate in Russia. Gabapentin, initially discovered via recreational use, is gradually incorporated into personalized pharmacological regimens aimed at enhancing functionality and "normalizing" one's state.

Rather than treating addiction as an isolated pathology, I show how it becomes embedded in everyday practices and infrastructures: shaped by pharmacy access, combinations with other psychoactive substances, interactions with psychiatric institutions, and collective experimentation. Gabapentin use is organized around

achieving "normality," yet this effort to gain control often leads to new dependencies. What constitutes "normality" is not given in advance but is produced through everyday practices, comparisons, and collective evaluations. Addiction here does not result solely from pharmacological properties but from the entanglement of bodies with sociotechnical systems that enable, mediate, and sometimes betray stability.

Drawing on Simondon's theory of technological alienation, I argue that gabapentin misuse constitutes a technology of adaptation—a mode of living that can both extend agency and undermine it. Addiction, in this context, emerges when users lose the ability to maintain this adaptive arrangement. Thus, rather than a loss of self-control, addiction appears as the breakdown of a material system of coordination between substances, knowledge, environments, and infrastructures.