

1 | *The Drug Assemblage*

There are no rules in painting.

Francisco Goya, Spanish painter (1746–1828)

Introduction

In the social sciences, as in any scholarly endeavour, getting used to words is like acquiring a bad habit. And yet the necessity of adopting analytical categories remains paramount in the quest to interpret the world and, for that matter, politics. The history of the social sciences and, particularly, political science, has seen in the category of the ‘state’ a lasting frame of analysis, somehow bestowing on it a mythical unity and encompassing power.¹ Much of the theoretical gist of the deconstruction of the state is contained in Philip Abraham’s seminal article ‘Notes on the Difficulty of Studying the State’. Abrams proposes to abandon the category of state as a material object altogether and to take it as an ideological object, a ‘unified symbol of an actual disunity’.² It is this inherently multifarious and, at the same time, amorphous feature of the state that begs for an interdisciplinary and process-oriented study of politics.

The usual object of investigation of political science, power, has been transformed by the theoretical contribution of the French philosopher Michel Foucault. Foucault’s definition of power as a dynamic and omnipresent relational element contrasted starkly with the classical

¹ Even when other denominations have been in use; for instance, the use of the term ‘political system’ in Gabriel Abraham Almond and James Smoot Coleman, *The Politics of the Developing Areas* (Princeton University Press, 2015). For a thorough discussion of the developments of political science on the concept of ‘state’, see Timothy Mitchell, ‘Society, Economy, and the State Effect’ in George Steinmetz (ed.), *State/Culture: State-Formation after the Cultural Turn* (Cornell University Press, 1999).

² Abrams, ‘Notes on The...’, 75–6 and the quote in *ibid.*, 79.

definitions of power – and the state – as legitimate source of authority. The reluctance of political science to look into other fields of the social to find the political was shaken by Foucault's methodological and theoretical invitation *to read everything*. Indeed, Foucault proceeded over the emergence of a study of politics (often not carried out by political scientists) that sought after the political in *topoi* traditionally prefigured as non-political.³ The prison, the clinic, the school and the barracks became institutions entrenched with political value, and marginal categories – the 'dangerous class,' or the lumpenproletariat of Karl Marx – entered the scene of analysis. This *modus operandi* was not simply explicatory, to use Foucault's phraseology, of the mechanics of power and of the micropolitics of modern societies; its objective was to unearth more general and systemic questions around the state, government and power.

The study of political processes can only be accurate if taken through a historical lens, which captures the movements (however rhapsodic and multi-directional) of different events in time. In other words, genealogy is key to understanding politics and its changes. In genealogical quests, the flow of events may appear as a history of incongruity and discontinuity; it might manifest 'hazardous and broken trajectories' proceeding towards what Foucault labelled 'a barbarous and shameful confusion'.⁴ Yet, it is a close-up analysis of how politics works as a productive force. In our case, it is a genealogy of drugs politics in Iran and its entanglement with crisis and state formation. In that, the narrative falls parallel with Foucault's invitation to take social, medical and cultural objects as political facts. That is also the case for drugs.

The American political scientist Paul Brass refers to the impact of Foucault's theories on the study of politics – and the discipline of political science – with his self-explicatory article 'Foucault Steals Political Science'. While most of the discipline has persevered in applying exogenous categories of analysis in order to re-enhance the taxonomic difference between Western states and the rest of the world, Foucault argued that, no matter the forms authority metamorphosed into, modern states share the trait of being 'police states', or in other

³ Brass, 'Foucault Steals Political Science', *Annual Review of Political Science* 3, 1 (2000), 328.

⁴ Mitchell Dean and Kaspar Villadsen, *State Phobia and Civil Society: The Political Legacy of Michel Foucault* (Stanford University Press, 2016), 65.

words, governmental machines of disciplinary mechanisms.⁵ Although one should be aware of Hannah Arendt's warning that whatever the similarities between totalitarian (or, I dare add, authoritarian) regimes and democracies, their differences remain essential; the depiction of authoritarian states as more or less powerful unitary actors oversimplifies the complexities of processes of political formation. This reduction to a single all-powerful element within the realm of formal politics – the state – or, more recently with the rise of rational choice theory, the transformation into numerical data and statistics of any other material sign of power, has confined the study of multifaceted political phenomena to other disciplines of the social sciences, *in primis* political anthropology and political sociology.⁶ Not particularly concerned with what disciplinary affiliation this research carries on board, this book discusses drugs through the lens of politics, of state formation and crisis intervention. Drugs as an ideological object remain ultimately tied to political formulations.

The life and history of illicit drugs is symbiotic with that of states. A weakening, a retreat, a dilution of the state is often announced in favour of the emergence of other international, or localised sub-state, forces. The withdrawal of the state manifests, instead, what Beatrice Hibou defined as a form of indirect government, or 'government at a distance', whereby processes of privatisation, delegation, outsourcing and devolution of state power are intended not to diminish, but to enhance political control at the expense of other terrains of state intervention, such as welfare, education, health, development and participation.⁷ In this regard, neoliberal forms of bureaucratisation are not fixed, or clearly defined types of administration, but they are 'a point of entry, a microcosm . . . around which and within which are played battles for power, [and] are expressed conflicts of legitimacy'.⁸ State forms otherwise inconsistent with each other seem to represent similar modes of government when taken from the perspective of

⁵ Ibid., 317.

⁶ See Billie Jeanne Brownlee and Maziyar Ghiabi, 'Passive, Silent and Revolutionary: The "Arab Spring" Revisited', *Middle East Critique* 25, 3 (2016).

⁷ Béatrice Hibou, *Privatizing the State* (Columbia University Press, 2004), 15–16. Cf. Renate Bridenthal, *The Hidden History of Crime, Corruption, and States* (Berghahn Books, 2013), 238.

⁸ Béatrice Hibou, 'Introduction. La Bureaucratisation Néolibérale, Ou La Domination Et Le Redéploiement De L'état Dans Le Monde Contemporain' in *La Bureaucratisation Néolibérale* (La Découverte, 2013), 11.

practice, policy and grassroots political developments. That applies also to drugs politics.

Policy analysis, generally, has been understood as ‘a quasi-scientific activity that requires a clinical approach’. Given that, the category of policy has not been interpreted as a political, ideological or hegemonic project, but rather as objects proclaimed in ‘neutral, legal-rational idioms [which] appear to be mere instruments for promoting efficiency and effectiveness’.⁹ Borrowing Steinmetz’s definition, I refer to ‘policy’ as

cultural texts, as classificatory devices with various meanings, as narratives that serve to justify or condemn the present, or as rhetorical devices and discursive formations that function to empower some people and silence others . . . [as] fundamental organizing principles of society, [which] contain implicit (and sometimes explicit) models of society.¹⁰

Policies are practices of government that work both along formal institutional lines – for instance, through the mediation and operations of public institutions – and along informal, societal repertoires – such as personal, clandestine connections and everyday public rhetoric.¹¹ They are a powerful illustration of how power intervenes and bear ideological and symbolic value. The coherence, effectiveness and, in Foucauldian parlance, disciplinary power of these political technologies (read ‘policies’) should not overstate the state’s capacity to shape the social. Policies are the outcome of multiple scripts, inputs and lines of resistance: they can be produced through pressures from below – in spite of institutional resilience to change – by public officials, academics, NGO activists as well as a multitude of ordinary people.¹²

Health crises, of which drug crises are part, have been moments ‘for the reconfiguration of the role of the liberal [and, I suggest, non-liberal] state’.¹³ The concept of ‘crisis’ is key in framing political initiatives in terms of policymaking as much as in terms of practical intervention.

⁹ Cris Shore and Susan Wright, *Anthropology of Policy: Perspectives on Governance and Power* (Routledge, 2003), 7.

¹⁰ George Steinmetz, *State/Culture: State-Formation after the Cultural Turn* (Cornell University Press, 1999), 6.

¹¹ Javier Auyero, ‘Introductory Note to Politics under the Microscope: Special Issue on Political Ethnography’, *Qualitative Sociology* 29, 3 (2006), 4–6.

¹² Cf. Asef Bayat, *Life as Politics: How Ordinary People Change the Middle East* (Stanford University Press, 2013); Adam White, *The Everyday Life of the State: A State-in-Society Approach* (University of Washington Press, 2013), 16.

¹³ Jon E. Zibbell, ‘Can the Lunatics Actually Take over the Asylum?: Reconfiguring Subjectivity and Neo-Liberal Governance in Contemporary

Crises operate in such a way that allow societal forces to push for change in certain fields, where governments have previously been unwilling or reluctant to intervene. Thence, how does politics diagnose a crisis? And how are social groups, especially marginal ones, treated by political institutions when they are under (invented or material) conditions of crisis? The Italian philosopher Giorgio Agamben argues that in contemporary governance the use of ‘emergency’ is no longer provisional, but ‘constitutes a permanent technology of government’, and has produced the non-judicial notion of crisis.¹⁴ It is the engendering of ‘zones of indistinction’ between the law and its practice to which Agamben applies the notion of the ‘state of exception’. In the words of the author himself,

[the state of exception] defines a ‘state of the law’ in which, on the one hand, the norm is in force [*vige*] but is not applied (it has no ‘force’ [*forza*]) and, on the other, acts that do not have the value [*valore*] of law acquire its ‘force’.¹⁵

The prognosis of crisis is rooted in the modern conceptualisation of politics and the political;¹⁶ and because crisis operates as a narrative device regulating the framing of the present (or of history), it functions also as an analytical category, a prism of understanding of complex phenomena throughout historical progress. It is therefore a central interpretative category for studying state formation and state–society relations, in the West as much as globally.

Apparatuses (*dispositifs*) are a key dimension of crisis politics and crisis management. Social service organisations, medical personnel, gangs, charity workers and volunteers, as well as ideological machine and media tools, all embody different forms of apparatuses.¹⁷ According to the definition, apparatus is a ‘device of population control and economic management composed of disparate elements that coalesce in particular historical conjectures, usually moments identified as “crises”’, composed of ‘discourses, institutions, architectural arrangements, policy decisions, laws, administrative measures, scientific statements, moral and philosophical

British Drug Treatment Policy’, *International Journal of Drug Policy* 15, 1 (2004), 56.

¹⁴ Giorgio Agamben, ‘For a Theory of Destituent Power’, *Kronos* (2013).

¹⁵ *Stato Di Eccezione* (Torino: Bollati Boringhieri, 2003), 38.

¹⁶ Janet Roitman, *Anti-Crisis* (Duke University Press, 2013), 22.

¹⁷ See Michel Foucault, ‘Il Faut Défendre La Société’. *Cours Au Collège De France*, 1976 (1997).

propositions'.¹⁸ Seen as such, crisis and apparatus live in a symbiotic relation. Crisis justifies the existence of apparatuses, whereas apparatuses give shape to the perception and materialisation of crisis.

This brings us to the subject matter of this book: Because the framing of the 'drug problem' has rhetorically and materially produced and reproduced multiple lines of crises – health, social, ethical and political – both globally and locally, an array of different, and often apparently incoherent, apparatuses have emerged over the course of a hundred years.¹⁹ I shall now consider some of these apparatuses.

Apparatuses: Addiction, Treatment, Harm Reduction

It is an unattainable task to arrive at a definition of 'drug' in today's parlance. Linguistic references are ambiguous and refer to multiple *things* at the same time; or, perhaps, language is precise enough and the problem lies in the politics of definitions. After all, 'drug' in the English language refers to a large variety of 'substances', which have, or might not have, therapeutic, alimentary or other psycho-physical effects. The use of adjectives such as 'narcotic', 'stimulant', 'illicit' or 'psychoactive' is intended to clarify the ethereal nature of words such as drugs and substance. The words drugs and substances can only be temporarily discharged of their ambiguity with the use of an attribute: illicit or illegal. That confirms to us that the nature of drugs in modern societies is inherently political, for drugs are tied to a political classification enunciated through legal means: the prohibitionist regime.

Despite the recent debates about changes in the global policy on illicit drugs – exemplified by cannabis legalisation in Canada, a number of US States, and Uruguay – most of the world's states adopt rules and regulations which prohibit, limit and outlaw a rather uniform set of

¹⁸ Gregory Feldman, 'Illuminating the Apparatus: Steps toward a Nonlocal Ethnography of Global Governance' in *Policy World*, 34.

¹⁹ For a journalistic account of drug crises in the West over the last century, see Johann Hari, *Chasing the Scream: The First and Last Days of the War on Drugs* (Bloomsbury Publishing, 2015). For an intellectual analysis of Western drug prohibitions, see David Musto, *The American Disease: Origins of Narcotic Control* (Oxford University Press, 1999); David Courtwright, *Forces of Habit* (Harvard University Press, 2009).

substances.²⁰ These, to be brief, include, narcotic drugs such as opiates (opium, heroin), cannabis (marijuana, weed, hashish) as well as amphetamine-type stimulants (ATS: ecstasy, MDMA ...), hallucinogens (LSD, 'magic mushrooms' ...) and a set of pharmaceutical products considered controlled substances (methadone, morphine, Ritalin, etc.).

When one studies drugs politics, it becomes inevitable to define a key question about drugs: addiction. It is often considered as a chronic disease by the medical community, which has bolstered this reading within the policymaking community.²¹ However, one could argue, along with Toby Seddon, that addiction is de facto a governmental concept, whose historical roots cannot be traced beyond two hundred years ago.²² As a governmental concept, addiction has been instrumental in defining limits of morality regarding public and private behaviour. Individuals develop neurotic, chronic relationships with such different things as food, sex, gambling, internet shopping and any other material or immaterial object.

Drug addiction is a definition with a public life – but weak scientific legitimacy. Public authorities, NGOs, medical and welfare workers use it to refer to a broad spectrum of human situations. I refer interchangeably to this definition of addiction as drug (ab)use. By using the idiom (ab)use, I want to suggest the malleability of the concept of addiction, which is both dynamic and ambiguous. It is a practice deemed problematic, but the boundaries of which are not clearly defined and, as such, leave room for interpretation of what is addiction. Although it is beyond the scope of this book to treat the issues around the definitions of addiction, I invite a look at addiction as a total social fact – *un fait social total*, as Marcell Mauss would say – that echoes through the legal, economic, religious and individual fabric of life.²³

²⁰ See LSE Ideas, 'Ending the Drug Wars: Report of the LSE Expert Group on the Economics of Drug Policy' (May 2014), retrieved from www.lse.ac.uk/IDEAS/Projects/IDPP/The-Expert-Group-on-the-Economics-of-Drug-Policy.aspx.

²¹ Addiction has been a term in use for several decades, preceded by 'habit' and followed by 'dependence' or 'drug dependence'. See Virginia Berridge and Alex Mold, *Concepts of Addictive Substances and Behaviours across Time and Place* (Oxford University Press, 2016).

²² Toby Seddon, *A History of Drugs: Drugs and Freedom in the Liberal Age* (Routledge, 2009), 27–8.

²³ See Marcel Mauss. 'Essai sur le don forme et raison de l'échange dans les sociétés archaïques.' *L'Année sociologique (1896/1897–1924/1925)* 1 (1923): 30–186.

When faced with growing complexities of social facts, states react through forms of governmentalisation. Seen through phenomenological forms, by *seeing like a state*, drugs (ab)use affects and is affected by political transformation.²⁴ How do governments *treat* drug (ab)use? And what does this treatment signify in political terms?

Multiple apparatuses partake in the drug assemblage made of consumption, treatment and punishment. Methadone is a device that illustrates the many dimensions of the assemblage. A synthetic drug first produced in late-1930s Germany, methadone is a substance that mirrors the effect of opiates. Included by the World Health Organisation in the List of Essential Medicines, methadone is a cost-effective substitute of opium, morphine and heroin. For this reason, it is administered in clinics or through other medical facilities, under so-called methadone maintenance treatments (MMT). These programmes administer methadone as a substitute substance to drug (ab)users over a prolonged period, sometimes indefinitely. The introduction of methadone into the technologies of treatment remains nonetheless contested, for methadone induces a strong dependency in the patients. For the medical community, it is considered a pharmaceutical product, a medicine and it is prescribed as such in case of opiate dependency. Among law enforcement agencies (LEAs), however, it has been widely considered as an illegal substance and, indeed, methadone is currently scheduled as a 'narcotic drug' under the Single Convention of Narcotic Drugs (1961), the modern regulatory base of international drug control.²⁵ Civil society groups supporting abstinence-based treatment (aka 'cold turkey') – the most famous being *Narcotics Anonymous* – cast it as a drug both dangerous and unethical, as do many religious groups that do not make distinction between methadone and other narcotics.²⁶ An increasing number of drug (ab)users consume methadone as their primary intoxicant drug, buying it in the illegal market. Supporters of MMT argue that its benefits outdo its harms: by substituting dangerous drugs, such as opium and heroin, with a legal, prescription drug, methadone produces a positive change in drug (ab)users. Yet rather than causing a positive transformation in the medical condition of the drug (ab)user,

²⁴ See James Scott, *Seeing like a State: How Certain Schemes to Improve the Human Condition have Failed* (Yale University Press, 1999).

²⁵ See 'Methadone and Buprenorphine and International Drug Control Conventions', retrieved from www.ncbi.nlm.nih.gov/books/NBK143176/.

²⁶ Philippe Bourgois and Jeffrey Schonberg, *Righteous Dopefiend* (University of California Press, 2009), 284.

methadone prevents the subject from entering the world of illegality, with all its obvious harms, the most remarkable of all being, perhaps, the threat of the police and the prison. In fact, its pharmacological effects are similar to heroin and morphine, as is its addictive (dependence inducing) nature. But the normalising effect, the power to transform unruly individuals into ‘docile bodies’, accounts for methadone’s status as a privileged technology of government, beside its cost-effectiveness given that methadone remains a relatively inexpensive product. Often labelled as ‘liquid handcuffs’, methadone treatment produces immediate biopolitical effects on its target subjects. By stopping the cravings for narcotic drugs and hooking the patient onto a controlled substance, methadone produces stability and legibility within the disorderly community of drug (ab)users. One should not avoid saying that, for injecting drug users, methadone treatment can prevent the risk of intravenous infectious diseases, notably HIV/AIDS and hepatitis caused by shared needles and paraphernalia. That said, methadone is an apparatus, a technology of government, political in nature and medical in its unwrapping, with underlying political effects. In the words of anthropologist Philippe Bourgois, methadone is ‘a pernicious and intense exercise of biopower, an attempt by a hostile state’ – which after all condemns the use of narcotic drugs – ‘to control unruly misuse of pleasure’ and to ‘reform unproductive bodies’.²⁷

But methadone is not the only device in the drug assemblage. Drug policy in general, and treatment technologies in particular, are updated with changing paradigms of government. This does not imply that previously accepted treatment forms are substituted by new models amid political change; more often, it implies a coexistence of multiple forms of treatment technologies that apply at different times, to different political contexts and for different purposes. Coexistence of multiple techniques is the key to the state objective of management of risk. Harm reduction is a case in point. A set of ‘policies, programmes and practices that aim to reduce the harms associated with the use of psychoactive drugs in people unable or unwilling to stop’, harm reduction’s defining features ‘are the focus on the prevention of harm, rather than on the prevention of drug use itself, and the focus on people who continue to use drugs’.²⁸ The provision of clean needles and injection paraphernalia – known also as Needle

²⁷ Bourgois cited in Helen Keane, ‘Foucault on Methadone: Beyond Biopower’, *International Journal of Drug Policy* 20, 5 (2009), 450.

²⁸ See HRI website at www.hri.global.

Exchange Programmes (NEPs) – as well as condoms, account for the main, but not exclusive, practices of harm reduction. A highly controversial practice, harm reduction has faced great obstacles since the start of its journey as a public policy approach to drug consumption. Conceived in the 1980s, amidst the HIV epidemic that had struck Europe and North America, harm reduction called for a pragmatic understanding of the public health and welfare challenges represented by people using drugs. Over the years, harm reduction encompassed different ideological strands, which turned it into a spectrum of ideas rather than a clear public policy plan. It included radical harm reduction activism which called for toppling down the prohibition, law enforcement regime against drug users – therefore guaranteeing their rights to safe and protected drug consumption – to state-led forms of harm reduction, which coexist with clearly punitive drug policy. Despite this inconsistency, harm reduction policies have been introduced as a legitimate public policy approach by an increasing number of countries. Initially in Western and Northern Europe, the discourse of harm reduction is currently discussed and considered as a viable policy on drug consumption in several MENA countries. Harm reduction, thus, turns into an apparatus of management of drugs crisis which coexists with apparently incompatible forms of drug control, such as incarceration, police control, forced treatment and prohibition of drug consumption. The Islamic Republic of Iran is among the countries implementing one of the most comprehensive harm reduction strategies at a global level, as explored in Part Two of this book.

Despite harm reduction's prominence in the public debate around illegal drugs, the most widespread approach to treatment of drug (ab) use remains that of 'therapeutic communities' (TCs), which in the context of Iran, are called addiction rehab camps, or simply *kamp*. Developed in the early 1950s in the United States, this model of treatment reached global diffusion in a matter of decades and today more than sixty-five countries operate TCs. These are centres where people with substance abuse issues refer to kick their habit and find psychological and physiological stability. The spectrum of different activities and philosophies of treatment is great, but detoxification through peer-to-peer support is its defining trait. Based on a democratic, grassroots and participative model of self-help, one of the basic tenets of these communities was the refusal to accept that people with substance-use disorders (addicts – but also, generally, heterodox social categories)

need to be institutionalised in formal, hierarchical centres.²⁹ The TC method is not uncontroversial. Their ideology espouses strict prohibition. At times, TCs appropriated the violence of state prohibition onto their own treatment of drug (ab)use. Their target continues to be marginal and impoverished individuals, the condition of which is never understood in political, social or economic terms, but exclusively through the prism of their medical(ised) condition, addiction. In Chapter 7, I provide an ethnographic analysis of how these centres work and how they reproduce a grassroots government of the drug crisis that is in tune with state interests.

Dealing with Data: Allegories, Disorders, Methods

Apparatuses work on multiple levels, in the micropolitical dimension as much as in the realm of discourse and ideology. The study of the drug assemblage – and its many apparatuses – demands careful methodological consideration. Methods must uncover how the machine of politics intervenes, in praxis, on illegal drugs. To do so means to subordinate the methods to the questions being studied. The hermeneutic approach I adopted instructed that all situations are complex, but complexities can be dissected and re-ordered through an inductive approach, echoing the multi-vocal dimension of politics.³⁰

To start with, I had to make sense of the dissonant statistics, which populated the world of drugs policy. In Iran, statistics as such did not explain the transformation of the drug phenomenon. They remained both static and monolithic, an image of the state itself in its outer mask. After all, it is telling that the official number of drug addicts (*mo'tadan*) since the 1979 Revolution up to 2017 had been, unchangeably, 1.2 million, despite the doubling of the country's population, from roughly forty million to eighty in 2016, and the appearance of new drugs and drug cultures. In 2017, *ex abrupto*, the Drug Control Headquarters (DCHQ), the umbrella organisation on all illicit drug matters, announced that the number of addicts had reached 2.8 million

²⁹ NIDA, 'What Is a Therapeutic Community', retrieved from www.drugabuse.gov/publications/research-reports/therapeutic-communities/what-therapeutic-communitys-approach; and Angela Garcia, *The Pastoral Clinic: Addiction and Dispossession along the Rio Grande* (University of California Press, 2010).

³⁰ White, *The Everyday Life*, vii.

people.³¹ Before then, state officials themselves had repeatedly and insistently declared that the number of drug addicts was ‘going up’ every year.³² It is clear that the numbers do not hold water in this realm.

I situated the statistics and the discourses that emerged from public institutions within a puzzle – the assemblage, one might say – which I then followed throughout my fieldwork. Javier Auyero suggests, ‘scientific objects are conquered in the field’ and often by identifying, tracing and following ‘puzzles, enigmas and paradoxes’.³³ In the case of Iran, the enigma was the political effect of drugs over the process of (trans)formation of the state after the 1979 revolution. Consequently, this generated a *state effect* on the phenomenon of drugs. For instance, how did an Islamic Republic secularise its fight against drugs and drug (ab)use? And how did it legitimate and promote controversial programmes of harm reduction (such as needle exchange in prisons and methadone substitution) on a national scale? How can this paradox be followed in the field, given agency, image and voice? What does drugs politics reveal about government and power?

The paradox as such is not a sufficient metaphor, because it does not explain a ‘situation’. That is why I refer throughout the book to another figure of speech to cast light on the case: the oxymoron. The juxtaposition of otherwise apparently (and allegedly) incongruent elements can be explained by the acceptance that reality has (and perhaps must have) an oxymoronic dimension. I observed and studied the subject in the form of an allegory, ‘the art of meaning something other and more than what is being said’.³⁴ In fact, where information is controlled and confined or distorted – as in Iran and on Iran and, if there was any doubt, in light of recent revelations of media distortion (e.g. Facebook), also in the West – allegory becomes a prime form of expression and materialisation of events that would otherwise not be

³¹ BBC, June 25, 2017, retrieved from www.bbc.co.uk/news/world-middle-east-40397727.

³² For instance, *Hamshabri*, June 23, 2015, retrieved from www.hamshahronline.ir/details/298952/Society/socialnews.

³³ Javier Auyero, ‘Ethnography at the Margins: Warrants, Puzzles and Narrative Strategies’, Latin American Centre Weekly Seminar, St Antony’s College, Oxford, November 27, 2016. George E. Marcus, ‘Ethnography in/of the World System: The Emergence of Multi-Sited Ethnography’ *Annual Review of Anthropology* (1995), 109-10.

³⁴ Law, *After Method*, 88.

coherent.³⁵ In this way, I describe and situate how, for instance, the Iranian state could apply severe punishment towards drug (ab)use but at the same time accept a comprehensive system of welfare and public health support for drug (ab)users. This line of inquiry conducted to the art of *managing disorder*. To understand how to manage disorder instead of disposing order, one needs to tackle a condition that is sharp and foolish at the same – an oxymoron – the image aptly fitting the situation through which the drug war in Iran – and differently elsewhere – is reproduced.

From a practical point of view, I adopted a variety of methodological tools in carrying out this project. One of the most conventional ways of expanding research data is that of interviewing stakeholders. I decided to do so, aware, however, of the limits that the Iranian political context put in front of researchers. Government officials need their superiors' approval before any declaration to a national or foreign researcher. It also did not seem the best strategy on qualitative grounds; public officials and state representatives have a bureaucratic tendency to reproduce the official position of the state, about which I was all too aware given also my rich archive of public declarations in the newspapers. To gain fresh insight from state representatives I needed to be accepted as a member of the drug policy community – an endeavour that fell naturally in my academic profile. My connection with the UNODC proved instrumental. As an intern at the office in Tehran, I participated in meetings with many officials from the various ministries, the DCHQ, NGO workers and medical advisors. As a prohibitionist organisation, the UNODC has enjoyed positive relations, compared to other international agencies, with the Iranian government, a fact that helped my integration into the drug policy community. As an Oxford doctoral student, I was received with respect and my views were taken more seriously than I probably deserved. Between 2013 and 2017, I participated in drug policy conferences in Tehran (Addiction Science Conferences), Beirut (MENAHERA conferences), Bogotá and Rome (ISSDP Conferences) where many of Iran's drug policy scholars and policymakers took part. By that time, I was an active member of this

³⁵ Allegory is a central device in Iranian cinema. See, for instance, Michelle Langford, 'Allegory and the Aesthetics of Becoming-Woman in Marziyeh Meshkini's *The Day I Became a Woman*,' *Camera Obscura* 22, 1 64 (2007); Negar Mottahedeh, *Displaced Allegories: Post-Revolutionary Iranian Cinema* (Duke University Press, 2008).

community, I was included in the selective mailing list and newsletters, including the social media venues (i.e. Telegram app) in which issues where often debated. In other words, I developed a certain familiarity with the people who I wanted to interview, a fact that I believe positively shaped the exchange of information.

The core of my personal archive for this research, however, is represented by a collection of newspaper articles, reports, official documents, unpublished material and images dating between 1978 and 2015. It also includes around three thousand articles in Persian from leading national newspapers (*Iran*, *Kayhan*, *Resalat*, *Jomhuri-ye Eslami*, *Etela'at*, *Jam-e Jam*, *E'temad-e Melli*, *Sharq*, but less systematically also others) published in Iran over that period.³⁶ I capitalised on a peculiarity of the Iranian press: newspapers have a tendency to report direct quotes and declarations of political agents, experts, civil society groups and representatives of the government; at times, a dialogue becomes visible between diverging views that can be read through the press, in different locations. Not only does this feature enable us to *follow the allegory* of the drug phenomenon in the public discourse, it also facilitates the ethnographic use of newspapers, especially when political debates are grounded in state intervention in the field. Content analysis and deconstruction were central in this process.

Familiarity with the UNDOC office put me in a privileged position in finding technical material on drug policy programmes implemented or discussed in Iran between 1999 and 2015. I had the opportunity to read internal reports, unpublished and published statistics, and communications between the Iranian ministries, the DCHQ and the UN office as well as international reports. The publications of the DCHQ also proved an important source for data on policy implementation, as well as a rich and readily available collection of proposals, views and ideas about drug policy.

As I was conducting fieldwork in Iran, I learnt and tuned my skills as an ethnographic observer/participant, educating myself in the arts of

³⁶ *Iran* is the official daily newspaper of the government of Iran and is owned by the Iran News Agency (IRNA), the *Pravda* of the Islamic Republic. Yet it has been closed at least a couple of times in the last fifteen years, due to court rulings. *Kayhan*, *Resalat*, *Etela'at* and *Jomhuri-ye Eslami* are conservative newspapers in decreasing order; *Jam-e Jam*, *E'temad-e Melli* and *Sharq* are reformist-oriented, in increasing order.

immersion, mimesis, and ‘thick description’ in/of the field.³⁷ I convinced myself that I had reached an acceptable level of ethnographic immersion, when, while visiting a drop-in centre (DIC: a centre which provides low-threshold support to drug users) in southern Tehran, the psychologist with whom I had spoken on the phone mistook me for a homeless drug user and started interrogating me with the ordinary questions, in a dismissive tone. I found myself in the position for long enough to be immersed in the role I was mistakenly given – thus gaining original insight in what it means to be a drug user in that part of the city – before taking out my business card with the Oxford logo and handing it to the very embarrassed doctor. Mimesis and immersion can be of great value – and reward – in the field.

In my ethnographic fieldwork, which focused on the presence/latency of the state rather than individual subjects, I visited and worked in multiple sites, as opposed to the traditional ethnographic experience that tends to restrain the research to a community, a village, or a setting. Political ethnographies, in fact, need to be multi-sited for the simple reason that politics has no clear boundaries and the processes that produce the political are often not confined to an office, a ministry, a group of individuals or a certain geographical area. They are uncontained and uncontainable. Conference venues have been a surprisingly telling site of observation and participation of ethnographic narratives. There, given the participation of officials of the state, civil society groups, activists, medical experts and advisors, as well as international guests and organisations, I followed the people and the allegory of ‘drugs/addiction’ in the public display of opinions among speakers.

More narrowly ethnographic was my experience as observer/participant in therapeutic communities (TCs), generally referred to in Persian as *camp*. They number in the thousands and did not allow me a systematic coverage. Nonetheless, I attempted to visit as many as I could, multiple times, and to be attentive to the different type, geographical location and gender. Overall, I personally visited fifteen camps. As for female treatment camps, they represented a harder site of fieldwork as access is often denied or restricted to female visitors. Yet, I had the opportunity to access a female treatment camp half a dozen

³⁷ Clifford Geertz, ‘Thick Description: Toward an Interpretive Theory of Culture’. *The Interpretation of Cultures* (1973), 3–30.

times. Although this represents a single case, I made sure to compare the observations that I had in the female camp with that of other sources, including newspapers, reports, and accounts of women who have been interned in other camps.

Conclusions

This Introduction is an analytical compass to aid in reading the book. Here, I situated interpretative categories such as oxymoron, assemblage, crisis, state formation, drugs, addiction and harm reduction. I also provided a synthetic description of the means I used to carry out fieldwork in Iran and on the ways research was done on the sensitive subject of drugs (ab)use. History and ethnography were two guiding tools in deconstructing drugs politics and its 'crisis' in modern Iran. A set of questions guided the discussion: what is the effect of crisis on the (Iranian) state and its formation? And how does crisis operate throughout different regimes of power and in different political environments? How to study politics in practice rather than on formal grounds?

The book assesses the potential of crisis as an idiom (and time) for reform. Crisis, it seems, produces responses that can be understood and explored in the form of assemblage. By deconstructing the drug phenomenon into its multiple parts – repression, treatment and make-believe worlds – the book discusses the way power and politics went through remarkable and unexpected transformations amidst crises. The case in point is limited, but at the same time, is one that falls at the crossroads of key institutional and societal axes. Drugs as epiphenomenon of state-society unfold the challenges that government and political orders face when the crisis acquires multiple faces – medical, ethical, security and social – in that the drug crisis remains an ultimately political fact, whereby all responses are produced, *in nuce*, through a political scheme.

While countries bolstering a secular, technically oriented paradigm of government, such as the United States, Russia and China, have regularly adopted a moralising – even religious – approach to drug policymaking, the clerical and political establishment in the Islamic Republic of Iran has felt at ease with the scientific, medical and technical lexicon of drug policy. Both can be affiliated to two diverging aspects of contemporary governmentality, often labelled as neoliberal: the increasing religious, moralising approach to social questions (e.g.

Pentecostalism in the United States; Christian Orthodoxy in Russia) and the dominance of technical experts and knowledge on social *problematiques*, as in the case of Iran.³⁸

A fundamental demystification needs to be done regarding the study of drugs politics. Dominated by a highly ideological and distorted debate, drugs are used as a public enemy to discredit opponents or to indicate something standing outside all moral boundaries. Ironically, the subject of drugs shares its status of anathema – especially in the West – with that of the Islamic Republic of Iran. It is telling that both drugs and Iran have been labelled as evils against which the righteous should move in combat. At a time of epochal changes in international drug policy and Iran's place in the world (dis)order, this double demystification, I believe, is a worthwhile endeavour.

The failure of security responses to the drug problem – across the globe – has become an unshakable datum among scholars of drug policy. Toby Seddon points out that 'it is very difficult to study drug policy for any length of time without coming to the conclusion eventually that the prohibition paradigm is fatally flawed'.³⁹ It is with this in mind that one can say the study of politics has become such that no scholar who studies it for any length of time can deny that the discipline craves for an interdisciplinary, fieldwork-oriented engagement, and is in search of *topoi* that have hitherto been regarded as the turf of others, lest it be complacent and complicit with the current *state* of affairs.⁴⁰ It seems that in research, as sometimes in everyday life, trespassing is key to any advancement.⁴¹

³⁸ Cf. Jarrett Zigon, '*HIV Is God's Blessing*': *Rehabilitating Morality in Neoliberal Russia* (University of California Press, 2010).

³⁹ Seddon, *A History*, 102.

⁴⁰ For a philosophical digression on how to reconstruct political understandings, see Gilles Deleuze and Félix Guattari, *Mille Plateaux: Capitalisme et Schizophrénie* (Paris: Minuit, 1980), 5–7.

⁴¹ Cf. Pierre Bourdieu and Loïc Wacquant, *An Invitation to Reflexive Sociology* (University of Chicago Press, 1992).