

**‘JUST A DIRTY KIND OF DRUG’: YOUNG PEOPLE’S
PERCEPTIONS OF CHROMING**

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In the hierarchy of drug use, it is fair to say that inhalants have never enjoyed much status. What are the implications of this for young people and for policy development?

This paper is part of a much larger study 'Social meanings of inhalant use (IU) in Victoria: implications for the development of policy and intervention'. The purpose of this larger project is to document and critically analyse some of the social meanings surrounding IU in Victoria and to relate this analysis to the development of policy and effective intervention. The core of the study involves exploring and documenting how young people (12-21 years of age) view the practice of chroming (inhalation of aerosol paint), and how it is viewed by those who work with these young people. This information is to be considered in light of an analysis of the public debate surrounding chroming as represented in published research, media coverage of chroming and a sample of submissions to the recently completed Victorian Parliamentary *Inquiry into the Inhalation of Volatile Substances* (Drugs and Crime Prevention Committee, 2002).

While there is a rapidly expanding body of literature which looks at IU as symptomatic of other problems experienced by young people, we know little about how it is perceived by young people themselves, and how social meanings frame the practice of chroming (Beauvais, 1997). My paper today is based on in-depth interviews with eight young people in Victoria who are current or past inhalant users and with eight youth workers who have, between them, many years experience working directly with young people who use inhalants.

This paper will consider three issues emerging from the larger study: young people's experiences of intoxication from IU, to what degree young people consider IU to be a gutter drug, and users' perceptions of risk. I shall conclude with a more general comment about the implications of the stigma associated with IU for the development of policy and intervention. The young people interviewed were aged between 16-21 years and thus were quite a lot older than the age of peak prevalence of use, which appears to be in the early secondary school years (Drug Treatment Services Unit, 1999). All but one of the young people I interviewed used aerosol paint as their inhalant of choice and all but one were contacted via youth agencies, the exception being a young person who rang me after an article appeared in her local paper describing the research. I have of course changed the names of everyone in the study in order to protect confidentiality.

It should be kept in mind that this research is still in its early stages so my conclusions can only be tentative; further interviews that I shall conduct with young people and workers will enable me to refine my conclusions. Moreover there is space here today for only the sketchiest of descriptions of young people's experience.

Intoxication from Inhalants

Young people report a range of experiences from IU. Though some deride it as a cheap drug, others suggest that inhalants can provide a powerful and even meaningful experience.

Some young people, often those who use infrequently, do not rate the experience highly. For Jimmy (21 years) and Rachel (19 years), who I interviewed a few months ago, the experience of chroming was neither pleasant, nor an experience which they would like to feel they are identified with:

Jimmy- It's just not me.

Sarah- What is it about it that's not you?

Jimmy- I dunno, the effects, it just wrecks ya

Sarah- It wrecks you? In what way?

Jimmy- Oh just tingles through your body. It wrecks your lungs. Next day you feel horrible.

Rachel- You're walking around with black paint all over your face.

Jimmy- (interrupting Rachel) Paint all over your face, you can't get it off.

Sarah- It's hard to get off is it? (pause) So is that, like, kind of embarrassing?

Jimmy-It is, yeah

Rachel-Yeah

Ned, (19) was clear that he only used inhalants because they were easy for him to access:

Sarah-If you had other drugs you wouldn't use inhalants? Why not?

Ned- Um, cause they're not as good.

Sarah- Cause they're not as effective?

Ned- They're not as effective. They don't do that much for you. Well for me anyway.

However, for some young people, IU is a powerful way of escaping reality, blotting out sadness and forgetting painful memories. The following comments from younger inhalant users quoted in Berry Street Victoria's submission to the Inquiry into Inhalation of Volatile Substances reflect this view.

'It gets rid of boredom. Time disappears!...what seems like 15 minutes, turns out to be half a day.' Michael, 15 years (Berry Street Victoria, 2001)

'You can straighten out, have a bunch of papers in your pocket of police charges, and not know how you got them.' Judy, 16 years(Berry Street Victoria, 2001)

Katie (21), one of my own interviewees who last chromed when she was 16 used inhalants because they were the only means of escape available to her:

I knew I'd got to the end of the road when I was doing spray paint. I was pretty desperate. I didn't do it because I sort of wanted the particular high it gave me. I just did it 'cause I was desperate to escape at that point.

In contrast to these kinds of statements it appears that some young people who use regularly describe the experience in quite different terms. While they might still prefer to use other drugs if they were available, inhalants offer some young people an alternative and exciting reality (see also Carmody and Honner, 2001). A couple of the people I've spoken with have said that they chrome for the hallucinations the experience provides. For instance, Pedros prefers to chrome alone to maximise his ability to control his hallucinations, which sound extremely vivid. Pedros describes hallucinations in which he blows up cars or cities by throwing 'fireballs', or where he is inside action movies such as 'Lord of the Rings' or 'Harry Potter' playing the hero in the fight scenes. Below, Pedros describes a favourite hallucination where he is inside a computer game.

Pedros- My hallucinations is like martial arts, 'cause I used to do martial arts. And comics or computer games. Like you're in the actual computer game, you're actually playin' it. Like Street fighter. You know Streetfighter? You're actually fightin' against the other people in Streetfighter.

Sarah- So you're a character? Can you see yourself as well or are you in it?

Pedros- You're in it.

Sarah- You're in it and you can see the characters coming [at you]?

Pedros- Yeah, you can see the characters. And up the top you've got your lifeline and stuff. You can see on the play set.

John, (20) who I interviewed a few months ago, has chromed intensively for much of the past couple of years. John described hallucinations where his vision went black except for a tiny figure in one corner with whom he could converse. He feels that chromers are often creative people who choose this drug for its hallucinogenic powers:

You know heroin's a pain killer, cocaine's an upper and there's hallucinogens and that's when the world isn't fuckin' real, it's a dream and I really cling to that sort of shit. Cause I'm quite artistic as well so if something can evolve from nothing that interests me.

Social scientists have noted that many people in contemporary society enjoy extreme sports or other experiences celebrating personal freedom, risk taking and autonomy. Drug use is one way in which young people may experience the pleasures of taking and managing risks (Parker et al., 1998). John described to me an almost religious feeling of straddling life and death while chroming, suggesting that some of the pleasures of this experience are related to its riskiness and intensity:

And, like, I went through stages where I'd fuckin' have it [the paint nozzle] constantly pushed... constantly pushed against my shoe while I suck on it and suck on it, and it's fuckin' dangerous. I got an even more intense buzz out of that, this other thing (laugh). I dunno where I come up with these names, but I call it 'wave of God'. It was, just fuckin', it was somethin' else you know. I always thought I was right on the line; this is living, this is dying, you know. It was fuckin' really intense... It might be a scummy arsed drug you know, but it's a sick buzz. It's plain and simple, it's fuckin' amazing.

Another of my interviewees, Dom (16) does not hallucinate while chroming. However, he agrees that the high he gets from chroming is as effective as that from any other drug: *while you're doin' it man, you just feel like Superman.*

Is it a Gutter Drug?

Kevin McDonald suggests that chroming carries a heavy weight of symbolic significance. He describes how for a group of young people from the Western suburbs of Melbourne, chroming has come to signify social disintegration and self-destruction, and is perceived as an expression of an entirely negative self-identity:

A chromehead is a person who has disengaged from the social world and is beyond its reach... Serge [interviewee] becomes increasingly agitated as he recounts his story, slapping the air about him as he tells how to deal with the 'chromey'. His response is violence towards an experience that for him represents death. His reaction is above all one of fear (McDonald, 1999, 99).

It seems from my initial interviews that users themselves do not always characterise chroming (as opposed to the social identity of 'chromehead') in such nihilistic terms. Indeed, it is most unlikely that all young people consider episodic or one-off use in this way. But what kind of function might engaging in a behaviour which many find profoundly disturbing and distasteful have for young people who use inhalants?

Houghton et al's (1998, 207) research in Western Australia suggests that the 'gutter' status of IU may make it more attractive to regular users, allowing them to reinforce their 'non-conforming' reputation. Some of the Victorian workers I have spoken with have talked about young people (often those who are quite young) chroming in very public places as an expression of resistance and anger against the adult world. Peter is a drug and alcohol worker working with young people in residential care. He argues that young people who are regular users lose the perception that inhalants are gutter drugs when they realise how effective the drug is:

They actually think it's a great drug... Well when someone told me that heroin was a gutter drug and I was taking heroin I thought 'well big deal!' (laugh) and I think they've got the same perception. They're not concerned at all. They'll talk about it to each other and there's this whole hierarchy. Someone who doesn't do it will tell [off] one of the ones that do it. Like I've seen it again and again, the ones that have never done it, and then they do it and they sort of change their tune. They come to see it as a useful drug.

Despite this, the older users that I spoke with were very aware of other people's opinions about IU, and most went to lengths to keep their use hidden. As Pedros told me:

As far as I know chromers are the lowest people on earth, the lowest drug category. The lowest people are the chromers.

This sense of hierarchy is confirmed by Ned (19), who is embarrassed enough about his episodic butane use not to have told the staff at the drug and alcohol centre he is attending in order to deal with his marijuana use. Like the others, he talks about inhalants as 'wrong' and 'dirty':

Ned- ...Like you know that you're doing something that's pretty dirty. It's wrong.

Sarah- So what is it that's dirty about it?

Ned- It's just like a dirty kind of drug. It's not even a drug, it's (pause) yeah (pause) people that weren't into that kind of thing you'd expect them to put that in a class with people that are dirty and people that are on the street and something like that. They arh, put those things together.

Sarah- So you think people who don't know about it would think that?

Ned- Well maybe people that are doing it as well, like they know that they don't want to be in that category. So they might feel bad about that, knowing that other people are looking at you, is a bad thing about it. I don't know (pause) yeah that's something (long pause, looks uncomfortable).

Star (21) is on methadone. She told me that she does not let her friends know about her chroming.

Star-Cause once you let people know somethin' like that your respect is thrown straight out the window. So it's best to keep it to yourself.

Sarah- It's funny how people judge things, isn't it?

Star - But that's life, that's reality.

Dom (16) talks about wiping paint off himself after he has used chrome so that his use is not detected:

I'm not proud of it, you know (wryly). I enjoy it, so to speak, but I don't enjoy the image it puts off.

The regular chromers I spoke with repeated a fear of being taunted or bashed by other drug users if found using chrome. John talked about the need to avoid being noticed as a chromer:

If I look in the mirror and I notice I've got paint on my face I'll get rid of it, cause people get bashed and shit for that.

Mary, a worker I spoke with, suggested that for some young people, the stigma of IU makes it difficult for young people to address their behaviour and that she finds it necessary to normalise chroming for the young people she works with. She described how it was necessary to introduce one young woman she was working with to others who use inhalants in order to normalise the experience and help her see it as a behaviour that could be changed:

The main reason that she [a client] contacted us was that she had a really negative view about chroming and found it really, really dirty. She hated the fact that she did it and was really embarrassed about it, found it really dirty and disgusting and so I suppose it was about also challenging those views and why she thought of it like that and meeting other people in the same situation and realising that there was ways around it.

In light of the comments above, it appears that the stigma and fear around chroming make it more difficult for some inhalant users to address or reduce their use. Further, the construction of chroming as 'dirty' and 'wrong' appears to reinforce users' sense of their own low status and social marginalisation.

Young People's Perceptions of the Health Risks Associated with IU

All the young people I've spoken with have different and frightening views of the dangers of IU and consider inhalants to be much more damaging and dangerous than other drugs such as heroin, marijuana or alcohol. Some of the physical effects they have described are based on personal experience. As Dom (16) put it: *you realise how much self-harm you're doing because of how shit you feel in your lungs.*

Other health risks which they discussed were not based on experiences which they had had themselves, but rather beliefs about the likely consequences of IU. I asked Ned about the risks of using butane gas:

I didn't really know exactly what they were. I knew that you can get like a bubble around the membrane of your brain or something. Like an air bubble that goes around and can effect what you think and what you do.

Jimmy and Rachel believe that chroming kills brain cells:

Sarah-So do you think using chrome paint is better or worse than using drugs like alcohol or heroin?

Jimmy & Rachel together- Worse

Rachel- It's worse for your body, kills brain cells.

Jimmy (interrupting)- Every suck or sip you have, it just wrecks about 30 of them.

Sarah- Brain cells?

Jimmy-Yeah, apparently. And a bong of dope'll only do about 10.

Star, who has chromed occasionally over a period of years, believes that use is generally fatal within six months:

Star- Your lungs can blow within six months.

Sarah- Blow? What do you mean?

Star- Your lungs can explode within six months. You can get permanent nosebleeds and do very bad damage to your nose. All your insides just totally stuff up. This is all within six months.

And later she describes what has happened to people she knows who use inhalants:

One month they're doing fine and next month they're back on the chrome and the next month they've passed away. Just all leads down hill, to be quite honest.

Conclusion – IU: Invisibility, Disgust and Fear

Some early and tentative conclusions can be made from this study. To start with, the experience of IU varies but for some people, inhalants offer an effective 'high' and an entry to an hallucinatory world where they may become authors of their own fantasies. Yet the stigma against IU may make it harder to acknowledge the effectiveness of this drug as an attractive experience. It is crucially important that adults understand this, or we may mistakenly interpret IU as a purely symbolic or self-destructive act. In light of this realisation, interventions may need to include alternative intense, risky and exciting experiences for young people to whom this is an attractive aspect of IU.

IU is a particularly hidden form of drug use. As Phil, one of the workers I spoke with put it, chroming is 'an elusive and shadowy habit'. Young people talked about how poorly understood chroming is. Because many adults know little about IU it is very easy to hide from parents or friends. Participants spoke about the importance of concealing their use and of scrubbing their faces to remove paint from around their mouths. Other than the regular chromers, young people in my

study did not tell anyone other than those who they chromed with about this practice, whereas they felt more comfortable discussing use of other drugs. The silence around IU appears to be protective for young people who have not commenced (Bellhouse et al., 2001). This very silence may, however, also be problematic for those who do use. It may mean that they are less likely to seek information, help or advice, are more easily able to conceal their use, and are more likely to feel ashamed and degraded by their drug use behaviour.

The young people I spoke with were acutely aware of the low status of chroming, and by implication, their own low status as users. This was particularly apparent in their fear of being assaulted by other drug users. Rather than using chroming to make a statement about opposition to the world, the young people I spoke with felt that their chroming signified a range of unpleasant characteristics that encouraged them to conceal their use and resist the label 'chromer'. The stigma around chroming leads young people who use this drug to see themselves as very far outside the norms of society; 'the lowest people on earth'. For at least one young woman, the shame and loss of self-esteem associated with her chroming made it difficult for her to do anything about it. There appears then to be an important role for normalising IU among young people who already use, however problematic that normalisation might appear to the adult world.

Carroll et al (1998) found that knowledge of risks associated with IU is often not sufficient to deter use, and this is obviously often the case in relation to other drug use as well. The small number of young people I spoke with described various graphic and frightening risks associated with IU; some of which do not concur with the scientific literature. It is possible that the stigma associated with IU leads young people to hold more frightening views about the likely consequences. Rather than acting as a deterrent, it may be that these beliefs about catastrophic risks support the construction of chroming for some young people as an extreme experience more dangerous, risky and exciting than other kinds of drug use.

My final point is that the stigma attached to IU has implications not only for the young people who use these drugs, but also for the development of policy responses. Manderson (1995, 802) has suggested that the symbolic significance of drug use makes a purely rational policy or legislative response very difficult. This appears to be particularly the case in relation to IU. For most adults the thought of deliberately sniffing aerosol paints fumes is unknown and frightening. When young people inhale spray paint a familiar industrial and household product has become entirely disassociated from its intended purpose:

Glue and disinfectant have their place in all our houses, but their use as intoxicants threatens, as cocaine use or pill popping do not, the boundary roles between the normal and the deviant, and undermines the safe roles they have been assigned in our world. Certainly it is true that if these drug practices became common, no home would be safe. But our reaction is primarily aesthetic. We are revolted by the ease with which the normal can become abnormal. It challenges our vision of what is natural; it is a threatening example of matter out of place (Manderson, 1995, 802).

There is not the space here to critique the policies that have been implemented during and after the Victorian Parliament's Inquiry into the Inhalation of Volatile Substances. I would, however, suggest that the issue of chroming has been used - by the media and others - as a spectre through which to focus concerns about young people as out of control, irrational and entirely disconnected from the adult world. With attendant images of death and destruction, images that we have seen to be also internalised by young people, the spectre of chroming, along with the silence and fear surrounding it has the capacity to confound the development of purposeful and compassionate policy responses.

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