
Drug Prevention Clubs in France

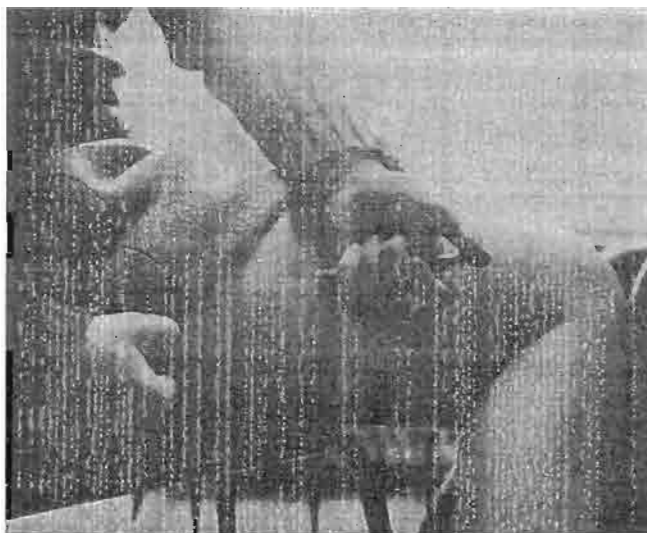
Jacques Ellul

In France, a prevention club is a private organization which seeks, by a variety of means, to enter into relationships with so-called maladjusted young people, hippies, juvenile delinquents, *blousons noirs*, particularly from the working class. The purpose is to enable these young people to find adult relationships in a milieu which does not judge them. These clubs are of two sorts, one which aims to adjust the young people to society, the other, in which we are involved, to provide the young person with the means of expressing his personality in a positive way in order to help him overcome his despair, stabilize, and discover his own personal road of development.

Our observations of drug-takers were made in the prevention club at Pessac, of which I am the director. During vacations and holidays our instructors met young people, 15 to 18, on the beach, smoking hashish. Through the year 1969 a group of about 35 of these hippies came to the club to pursue their usual habits there and through them we met young people on drugs. After our experience with these young people, we began to oppose the government's ill-conceived and improperly oriented hygienic movement against drugs and we refused to be associated with the campaign against drugs.

There are three new characteristics of drug-taking in France. First, drug-taking is no longer confined to the traditional groups—artists, writers, film people and students. There have always been groups that used drugs—in 1930, mainly opium; after 1945, mainly cocaine—but it was a very small circle, made up as much of adults as of youths, and oriented primarily toward activities connected with intellectual creation. They constituted a tiny fraction of the middle class and were centered chiefly in Paris. The new fact now is the apparent spread of drugs in the past three years among members of the working class. Of the young people we contacted, about nine

percent came from bourgeois backgrounds, students and the like, but the rest were apprentices, young laborers, clerks, the sons of small shopkeepers or low-ranking civil servants. Of the total population in our small city we estimate some two percent of the young people use drugs. A survey conducted in the upper grades of a *lycée* gave a slightly higher four percent.



The second new characteristic, which derives from the first, is that the "classic" drugs are hardly taken at all. Opium is completely unknown; heroin and cocaine are very rare (we encountered only two cases); hashish (and other derivatives of cannabis) are somewhat more frequent, but are reserved, it seems, to communal meetings, at which "one smokes" in a kind of sacral relationship with one's fellow-communicants. LSD is known but little used. One young man told us it was a "drug for intellectuals." The great obstacle to their use is that in France all these drugs are expensive (these young people are poor) and relatively hard to procure (you have to look for them, make an effort, whereas these young

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people all belong in the category of those who don't want to make any effort). Besides, the young people have realized that similar results can be obtained from patent medicines or products made with drugs which are inexpensive and sold without prescription. So they make their experiments, concoct their "cocktails," and multiply the means by utilizing what comes to hand. A great many of these products turn out to be toxic so that their mixtures are sometimes very dangerous.



The third new drug-taking characteristic is that the objective sought is no longer, as it used to be, a liberation, a poetic trance, the "trip" so often said to result from LSD. The phrase used in the groups with which we are familiar is "caving in," meaning, to a very large extent, being shattered, making oneself "explode," and, in extreme cases, destroying oneself. Consequently, the motivation is no longer at all the same as the one which existed in bourgeois and intellectual circles. Instead, it has become a motivation of despair, of internal collapse, of nervous breakdown. It should not be supposed, as it often is, that drugs are a means of escaping from or forgetting reality; on the contrary, they plunge the user still deeper into a state of radical negativity while simultaneously making him lose sight of the tragic concrete situation.

We were obliged to investigate the problem of imitation. Had contagions occurred? Had student groups, for example, infected working-class groups, or young Americans traveling in France "turned on" young French people? A small factor of such propagation certainly exists. For example, we traced the spread of hashish to the beach and to contact with some young Americans who had some hashish with them. Likewise, many participate in the big hippie rallies (30 of our young hippies went to the Isle of Wight rally) where they find the drugs or

are confirmed in their use. But the problem is not simply one of outward imitation, of a fad. In reality, the problem is if young people from these working-class backgrounds adopt the drug-using posture as a model they have been brought to it by motivations more profound than the desire to imitate. There is a previously existing craving, a diffuse, unspoken desire: drugs correspond to a more profound psychic reality, a basic need. It is, therefore, no use attacking the question on its superficial level—by repression, for example. One must try to understand what the young drug-user is searching for and also ask what he is trying to express by his act.

The basis of this desire for drugs seems to be the tendency to "evasion-communion," the constituent particulars of which are related to the way the young person sees and feels the total society into which he is being prepared to enter. This society frightens him because it is too insensitive, too brutal, too demanding, too efficient. He is afraid he is not up to what is going to be asked of him. He is afraid of the standardized type of man that society offers, which he rejects as a model. He is afraid of committing himself to that society, of being "lost" in it. It seems to him that he is being asked to pay too high a price to enter a society which promises him, in return, only minor gratifications. On the "instinctual" level the young person rejects the total conditioning that society demands. He wants to assert himself as an independent, unique person. Because this technicians' society appears to demand everything, the young person is forced to an equally radical position: he doesn't want to give up *anything*, yield up anything of himself; therefore, he will lead a life of total evasion. As this society manufactures depersonalized human relationships, made all-enveloping by organization, the young person who refuses them seeks to create for himself a radically different type of relationship, the communal relationship that "connivance" in drugs provides, which is not integrated into society. It is obvious that drugs are a religious substitute.





The use of drugs is an effort to arrive at communication. The young person is more sensitive than the adult to the contradictory situation we are in. On the one hand, we live in a universe of multiplicity of communications and information; on the other hand, real communication seems impossible. All studies in modern linguistics bear witness to this breakdown. The difficulty of sustaining friendships in our society is well-known. And young people all complain about the impossibility of "getting close to" adults. Students make the same complaint about professors, children about parents, and so on. Drugs are a means of resolving this contradiction. They make one tolerably indifferent to the "universe of communications"; and they facilitate a sense of ecstatic communication and the most profound communal relationship.

In addition, by taking drugs, the young person is trying to say something. Using drugs and leading an "excessive" existence is a cry for help to the people around one, a way of attracting attention so that, at last, someone will enter into a relationship with you. It is not a matter of communicating pre-

cise things, intellectually defined, but an appeal to other people to recognize that "I exist." Clearly, such behavior results from the lack of good emotional relationships with *one's fellows*, and, on a broader scale, the absence of proper relationships with the entire society. That this double failure should be most intensely felt by weaker, less balanced individuals is inevitable, for it is they who are most beset by their lack of connection with social realities and real authority; it is they who lack the requisite moral or ideological frameworks.

The young person beginning to take drugs is also demonstrating a suicidal urge. Not that he wishes explicitly to kill himself, but he does want to destroy the *social personality* within himself; he wants to annihilate his social face, to destroy *in himself* and *for others* the personality of that group to which he belongs, which "the others" have made and imposed on him like a mask, or held up to him as an ideal, the personality which others imagine he is. In this wishing to destroy this "social face" lies aggression against society, but against society as embodied in oneself. One's aggression is, therefore, directed against oneself in order to violate group symbols and taboos. This desire for destruction of the social personality comes from the fact that adults of the group do not furnish attractive models and are not good "objects for identification," and the fact that society does not provide the promised satisfactions in encounters and exchanges. Consequently, this social personality is pure falsification and must be destroyed. Such destruction is the first stage in the evolution of a suicidal course of conduct which leads to annihilation of the entire personality, what some psychiatrists now call subconscious suicide.

Such therapy as is available is a question of substituting another relationship for the communication denied by society and for the unacceptable social personality. This implies reconstruction of a frame of reference in which the individual can orient and discover himself, thus becoming capable of making sense of the nonsense he has heretofore experienced. It is also necessary to provide adult models to whom the young can relate and who are desirable objects for identification. In short, only fruitful interpersonal relations will suffice.

But the effectiveness of such a method can only work with those who are slightly addicted and to relatively less habit-forming drugs. Hardened heroin addicts, for example, must necessarily undergo medical treatment. Moreover, this method also leads to creating stabilized, privileged relationships within a micro-group and still shuts the individual off, perhaps as firmly as before, from society as a whole. Yet the method does afford the young person the opportunity of accepting some social personality, of accepting himself, and of creating a more balanced mode of relating to other people which will help him to adulthood.