

Harm reduction hipsters and the gentrification of public health

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Keywords

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Abstract

Background: Spawning an emergent body of critical commentary, the hipster has (re-)emerged to form the reigning global subcultural identity of the twenty-first century. Tracing the relationship between hipsters, harm reduction and the depoliticization of institutional public health policy, this paper critically interrogates the role of 'harm reduction hipsters' and the consequent 'gentrification of public health'.

Methods: Drawing from the author's cumulative ethnographic experience, this article employs theories concerning radical politics and gentrification, contributing to contemporary debates in critical drug studies and critical public health. **Results:** Arguing that harm reduction hipsters are actively implicated in three forms of related (social, spatial and political) displacement, the paper concludes by reaffirming the political origins of harm reduction practice and (re-)asserting the fundamental importance of situating drug users as the central driving force behind the movement. **(132 words)**

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Introduction: The hipster-ization of harm reduction

Field notes, November 2010, National U.S. Harm Reduction Conference:

Attempting to accommodate active injection drug users (IDU), conference organizers established a 'safe room' equipped with injection supplies and a considerable stockpile of the narcotic antagonist naloxone. Given my sociological curiosity regarding in/formal drug consumption sites, I visited the safe room repeatedly throughout the three-day event, and during each visit the space was almost completely devoid of users, its only inhabitants volunteer staff and a rotating cast of what I then termed 'harm reduction hipsters': young, educated, middle class, ex-suburbanite white kids with relative socio-economic privilege who worked in various harm reduction capacities and dressed in accordance with normative late-capitalist hipster style¹. Further demonstrative of this odd imbalance², by any measurement there was orders of magnitude more naloxone present during the conference than any form of opiates, illicit or otherwise. Each time I visited the 'safe room', in other words, instead of users I

¹ i.e. Skinny jeans, plaid shirts, black horn-rimmed glasses, thrift shop t-shirts bearing ironic slogans or working class signifiers, and among men, ironic facial hair (i.e. handle-bar moustaches etc.). For more on contemporary hipster style, see: Grief (2010a), Haddow (2008) and Lanham (2002).

² Anticipating a low number of users in attendance at the conference, I wrote a provocalational refrain into my talk, repeated in different iterations on at least three separate occasions: "*how many institutional harm reduction agencies funded a 'client' or peer to attend this conference?*"

was greeted by a group of leather-jacket clad, tattooed hipsters sitting around trading gossip and 'war stories' from the harm reduction 'front lines'.

Contemporaneous to the widespread adoption of harm reduction as institutionalized public health policy throughout the later 20th and early 21st century, a new – or, rather, old – subculture (re-)emerged to become a ubiquitous global fixture: the 'hipster'. Given that the rebirth of hipster-dom so closely coincided with the rise of institutionalized harm reduction policy, it is perhaps unsurprising that hipsters have assumed a prominent position within the movement in recent years, becoming leading proponents of institutionalized harm reduction practice. In the arguments that follow, however, this essay asserts that hipsters have not served to strengthen or enhance the political trajectory of the harm reduction movement; instead, this work suggests that *harm reduction hipsters* are actively complicit in what is termed the *gentrification of public health*.

The primary argument of this paper is that the 'hipster-ization' of harm reduction and the corresponding gentrification of public health are directly responsible for three forms of (social, spatial and political) displacement. Moreover, these three inter-related displacements un/consciously function to privilege and empower the prevailing pathology or 'brain disease' model of addiction research and treatment, a paradigm that is inseparable from the apolitical agenda of institutionalized public health policy and the depoliticization of harm reduction practice more generally (Hathaway, 2001; Keane, 2003; Miller, 2001; Reinerman, 2005; Roe, 2005; Smith, in press). As this paper asserts, hipsters, in other words, are therefore complicit in the institutional co-optation and

recuperation of harm reduction, in the form of politically sanitized, ‘disease model’-driven public health policy.

Beginning with a background discussion concerning the emergence of modern day hipster subculture, the paper details the radical political origins of harm reduction practice in tandem with the depoliticization of institutional public health policy. After tracing the origin and development of contemporary hipsterdom and its relation to institutionalized harm reduction, the paper then turns to address the complicity of harm reduction hipsters in social, spatial and political forms of displacement within the movement, before turning to a concluding critique of the ‘mainstreaming’ of harm reduction and the *political imperative*³ of situating people who use drugs as the central driving force behind the movement.

Methodology: Ethnographic approaches to addiction, contemporary hipsterdom, and the depoliticization of institutionalized public health policy

In order to place hipster subculture in historical and contemporary context, it is first necessary to situate my own research positioning and identity as a politically engaged academic, activist, and advocate for people who use illicit drugs. Providing

³ By consciously framing user-driven forms of harm reduction as a *political imperative*, I am both borrowing from and critically flagging the central, privileged focus on public health – and consequent deprioritization of human rights – in the Canadian HIV/AIDS Legal Network’s (2008) “*Nothing About Us Without Us*”: *Greater, Meaningful Involvement of People Who Use Illegal Drugs: A Public Health, Ethical, and Human Rights Imperative*.

background to the emergence of what might be termed 'second wave' hipsterdom in the 90s, this section therefore seeks to self-reflexively identify my personal research positioning vis-à-vis harm reduction and hipster subculture, as well as detail the theoretical framework underpinning the social, spatial and political displacements that form the central argumentative structure of this work. Prior to interrogating the emergence of contemporary hipsterdom, however, it is important to briefly discuss the 'place' of qualitative – particularly ethnographic – methods in what Keane (2009) termed 'critical drug studies'.

The vast majority of traditional research regarding drug use/users, and 'addiction' is overwhelmingly characterized by quantitative, epidemiologically-focused approaches absent of social considerations (Martin and Stenner 2004, Bourgois 2002), where the predominance of quantitative methods is evidenced in "funding priorities, research turf battles and hierarchical publication prestige" (Ciccarone 2003, p.115). The field of addiction research has thus been staked out as the disciplinary domain of quantitative public health scientists, where, as Bourgois (2002, p.260) suggests, "epidemiologists are still convinced that it is possible to obtain accurate numbers that are useful for solving urgent social problems". Recent debates in the field of addiction research have suggested the need for increased 'cross-methodological' dialogue and debate (Bourgois 2002), proposing qualitative research as "either the 'antidote' or the necessary complement" to quantitative methods (Martin and Stenner 2004, p.395). Demonstrating this acute imbalance, several recent issues of prominent addiction journals have been

devoted to qualitative – and particularly ethnographic – methods in drug research⁴. The overt focus on ethnography in these publications (Bourgois 2002, Maher 2002, Moore 2002, Power 2002, Sifaneck and Neaigus 2001), as Ciccarone (2003, p.116) notes, “illustrate how epidemiology and ethnography are differently valued within the bio-medical establishment”, where the “hegemony of ‘publish or perish’” serves to privilege “reductionist science over time intensive field research”.

Composed of a series of ethnographic vignettes drawn from cumulative participant-observation fieldwork at harm reduction and addiction treatment sites in Canada (namely Toronto) and the U.S. (namely New York and Philadelphia), observations were collected throughout the author’s doctoral and postdoctoral research, where ethical approval was granted by York University (Toronto, Canada) and the University of Pennsylvania (Philadelphia, U.S.A.) respectively. In discussing the limitations of “traditional epidemiological methods for explaining patterns of infections among hidden populations engaged in illegal or taboo activities”, Bourgois and Bruneau (2000, p. 328) insist that ethnographic participant-observation methods “urgently need to be integrated into substance abuse and HIV prevention studies if we are to understand fully the implications of the numbers we collect and, also, if we are to prevent complex statistical data from being misinterpreted and manipulated politically”. In this article and elsewhere, Bourgois (1998, 2002) employs ethnographic vignettes as a useful tool for critically illustrating the social and structural dimensions of addiction,

⁴ For example, see: *Addiction Research and Theory*, ‘Qualitative Research in the Drugs Field’ (2001, 9.6), and the *International Journal of Drug Policy*, ‘Ethnography and Multidisciplinarity in the Drug Field’ (2002, 13.4) and ‘Social Theory in Drug Research, Drug Policy and Harm Reduction’ (2004, 15.5-6).

harm reduction and treatment policy. Following Bourgois, the self-reflexive ethnographic vignettes that work to structure this investigation can be seen as a counter-balance or complement to the quantitative, epidemiologically-focused orientation of traditional addiction research, providing a grounded, politically informed, and socially engaged analysis of contemporary trends within the harm reduction workforce in North America, as well as the broader global context of the movement. Prior to introducing the ethnographic elements of this work, however, it is necessary to provide further context concerning the origin and development of hipster subculture and its relationship to the explicitly political founding theory and practice of harm reduction, as well as its depoliticized manifestation in the form of present day institutional public health policy (Smith, in press).

Contemporary hipsterdom emerged around the turn of the twenty-first century, undergoing a succession of subtle social and aesthetic permutations over the last decade (Grief, 2010c). In critically considering its present day manifestation, however, it is important to bear in mind that the first use of the term hipster corresponded with new styles of jazz music in the U.S. during the 1950s 'Beat'-era (Mailer 1957). The American off-spring of French existentialism, mid-twentieth century hipsters were dependent on cultural appropriation, borrowing heavily from the aesthetic, vernacular and musical traditions of African Americans, seeking to "exist without roots," and "journey into the rebellious imperatives of the self", thus creating a subculture of "urban adventurers who drifted out at night looking for action with a black man's code to fit their facts" in neighbourhoods such as New York City's Greenwich Village (Mailer 1957, p.3-4).

As opposed to the original 50s-era hipster, however, over and above a series of de-politicized, pastiche aesthetic signifiers (Haddow, 2008; Grief 2010a, 2010c, 2010d), contemporary hipsterdom constitutes a ubiquitous post-globalization subculture inextricably implicated in broader social, political and economic forces (Clayton, 2010). Borrowing from Lanham's (2002, p. 2-3) *11 Clues You Are a Hipster*, twenty-first century hipsterdom can be defined by its relationship to socio-economic privilege, superficial working class signifiers, and ostensible political orientation. The first of Lanham's (2002, p.2) clues suggests that many hipsters "graduated from [...] liberal arts school[s]". Second, Lanham (ibid.) asserts that contemporary hipsters "frequently use the term 'post-modern' (or its commonly used variation 'PoMo') as an adjective, noun, and verb." Perhaps most relevant to the analysis contained within this essay, featuring at number nine on the list of clues, Lanham (2002, p.3) suggests that second wave hipsters "enjoy complaining about gentrification even though [they] are responsible for it" themselves; albeit in some cases unconsciously, hipsters therefore constitute active agents in gentrification, a process intimately related to notions of class displacement (Glass 1964). An additional defining characteristic of modern-day hipster subculture is, as many contemporary cultural critics have argued, a vehement rejection of any form of hipster self-identification. Here, as Grief (2010d) describes, "[n]o one, it seemed, thought of himself as a hipster, and when someone called you a hipster, the term was an insult. Paradoxically, those who used the insult were themselves often said to resemble hipsters". Resisting any form of hipster self-identification is, in other words, perhaps one of the most central tenets of the subculture (Greif 2010a, Grief 2010d, Haddow 2008).

As Haddow (2008) argues, the contemporary hipster aesthetic is constituted from an appropriated mishmash of decontextualized – and thus *depoliticized* – working class and/or revolutionary cultural symbols⁵. Hipsterdom, in other words, is a global sub-cultural movement driven by an ostensible affinity with marginal, lower-class urban populations including people who use drugs, based on an the apolitical bricolage of implicitly political signifiers (Hebdige, 1979), utterly abstracted from their original meaning and context. As an “artificial appropriation of different styles from different eras”, Haddow (2008) further asserts “it is this ironic lack of authenticity that has allowed hipsterdom to grow into a global phenomenon”, representing the “end product of all previous counter-cultures ... stripped of [...] subversion and originality”; this statement might equally apply to the contemporary state of harm reduction and its global infection by the pathology paradigm for addiction research and treatment (Courtwright 2010, Reinerman 2005).

In order to adequately contextualize the three forms of social, spatial and political displacement perpetuated by harm reduction hipsters – and effectively culminating in the gentrification of public health – it is therefore also important to detail both (1) contemporary theories of gentrification, and (2) the radical political origins of harm reduction philosophy, theory and practice. Closely corresponding to the global rise of the pathology paradigm following the AIDS epidemic, Smith (1996) argues that the 1980s witnessed a profound shift in the nature of gentrification. Characterized by ‘*revanchism*’ – an ideology inscribed by race and social class rooted in notions of revenge

⁵ Emblematic working-class symbols employed by North American hipsters include *Pabst Blue Ribbon* and *Labatt 50* beer in the U.S. and Canada respectively (Grief 2010a, 2010c).

– Smith (1996, p.xviii) suggested this emergent pattern of gentrification constituted “a revengeful and reactionary viciousness against various populations accused of ‘stealing’ the city from the white upper classes”. The *revanchist city*, Smith (1996, p. 227) insisted, was thus a “divided city, where the victors [were] increasingly defensive of their privilege ... and increasingly vicious defending it”. Based in part on case studies of Vancouver, Smith (2002) and Smith and Derkson (2002, p. 64-67) have more recently suggested that this increasingly vengeful pattern of gentrification has proliferated to become a ‘global urban strategy’, entailing a “generalization of gentrification in the urban landscape”. Representing a “consummate expression of neo-liberal urbanism” (p.88), Smith and Derkson (2002, p.67) argue that ‘gentrification as global urban strategy’ rests on five core characteristics, each of which directly maps on to what this paper terms the *gentrification of public health*, including “the transformed role of the state, penetration by global finance, changing levels of political opposition, geographical dispersal, and the sectoral generalization of gentrification”.

Drawing from the work of contemporary gentrification theorists, I therefore understand the gentrification of public health as an expression of the global proliferation of the addiction-as-disease model and its ubiquitous stranglehold on international public health policy. Extending this framework, the gentrification of public health is therefore informed by both the increasing interdependency between nation-states and ‘footloose’, ‘hypermobile’ global capital (Harvey 1990; Lees, Slater & Wyly, 2008; Sassen, 1998; Smith, 2002; Smith & Derkson, 2002), and increasingly organized and globalized emergent forms of user-driven organizing and opposition (VANDU, 2010). Having assumed the position of global dominance in public policy, the (globalized) gentrification

of public health therefore maintains vested interests in perpetuating the disease model of addiction – what Granfield (2004) has aptly termed ‘*addiction fetishism*’ – at the same time as oppositional factions – from radical academics to autonomous user groups – simultaneously develop new modes of resistance and critique (Alexander 2000, 2008, Canadian HIV/AIDS Legal Network 2008, Canadian Harm Reduction Network 2008, Cheng & Smith 2009, Granfield 2004, Kerr et al. 2006, Reinerman 2005, Roe 2005, Smith in press, VANDU 2004, 2010).

Demonstrating how the North American harm reduction movement began as a clandestine, grassroots social movement (Reinerman, 2005; Roe, 2005; Stoller, 1998), Smith (in press) has suggested that the founding theory, philosophy and practice of harm reduction was therefore in/directly premised on the anarchist principles of direct action, affinity, mutual aid, distrust of hierarchy, and anti-authoritarianism (Bey 1985, Crimethinc 2002, Day 2004, Graeber 2002). Through tactical affinities with similarly marginalized and stigmatized demographic groups – namely the queer community, people living with HIV/AIDS (PWA), and the radical direct action tactics of the *Aids Coalition to Unleash Power (ACT-UP)* – the dawn of the HIV/AIDS epidemic in the 1980s was widely seen as the primary catalyst for a diverse range of ‘underground’, grassroots harm reduction interventions across North America, which in turn became adopted as de-politicized public health policy, framed and marketed by the disease model of addiction (Maskovsky 2001, Reinerman 2005, Roe 2005, Smith in press, Stoller 1998).

Attributable to the global adoption of the pathology paradigm, the institutionalization of harm reduction therefore directly resulted in the erasure of the movement’s explicitly oppositional political origins, becoming obscured by the ostensibly

'objective' – yet fundamentally ideological – discourse of biomedicine and public health science, particularly epidemiology (Bourois 2002, Hathaway 2001, Hwang, 2007, Keane 2003, Miller 2001, Reinerman 2005, Smith in press). Effectively functioning to abstract addiction from its underlying structural forces of production, the rise of the biomedical model soon led to a dramatic shift in harm reduction discourse away from critiques of the social forces that produce and perpetuate harm by resituating addiction in/as the subject's innate neuro-chemical circuitry (Alexander 2000, 2008, Granfield 2004, Roe 2005).

Throughout, this essay argues that harm reduction hipsters are actively complicit in three interrelated forms of social, spatial and political displacement, effectively contributing to the broader gentrification of public health. Irrespective of their varying degrees of un/conscious and in/direct involvement, the work subsequently suggests that the role of harm reduction hipsters in this process is indisputable. Assumptions regarding social class contained in the analysis are, however, a significant limitation to this research. To date, there exists little or no peer-reviewed academic literature concerning the demographic composition of the various stratified, hierarchical positions that make up the harm reduction workforce in any given regional context⁶. Based on the author's personal experience and research observations, as well as corroboration by international colleagues and collaborators (academic and professional) in the fields of critical drug studies, critical public health, and harm reduction/minimization, the socio-economic demographics of the various disciplines that entail a harm reduction mandate

⁶ For exceptions see Deren et al. (1992) and Rowe (1999), although both of these sources are extremely dated, drawn from data collected in the 1980s.

– from medical staff (physicians, psychiatrists and psychologists, ‘street nurses’, and nurse practitioners etc.), to administrators (Executive Directors, board members, grant writers, front desk personnel etc.) to ‘front line’ employees (outreach workers, ‘client’ support workers, addiction counsellors etc.), to grassroots and institutional/academic researchers – exhibit considerable local and international variation. These contrasts are directly dependant on a host of different factors, including public/private funding, organizational management, differences in regional, state/provincial/territorial policy, governance models, drug use patterns and the socio-spatial character of specific user communities, along with more general prevailing social/public attitudes concerning harm reduction and drug use in any given context (Canadian HIV/AIDS Legal Network 2008, Mason 2006, Toronto Harm Reduction Task Force 2003). As this work goes on to assert, however, in spite of the sometimes stark differences in its various regional manifestations, the phenomena of ‘harm reduction hipsterdom’ is indeed global in scope, and as the ethnographic evidence contained in the following sections demonstrates, the global gentrification of public health is already at an advanced stage, and even in the absence of peer-reviewed literature concerning demographic composition, the successive forms of displacement brought on and perpetuated by harm reduction hipsters have become glaringly apparent throughout the developed world.

Displacement #1: Social class, user space and hipster gentrification

Centred on the notion of gentrification, the paper now turns to interrogate the first form of *spatial* displacement perpetuated by harm reduction hipsters. As a satirical

pop cultural point of departure, featuring at number 73 on the list, the entry for 'gentrification' on the website *Stuff White People Like* reads:

Perhaps the safest bet a white person can make is to buy a house in an up-and-coming neighborhood. White people like to live in these neighborhoods because they get credibility and respect from other white people for living in a more "authentic" neighborhood where they are exposed to "true culture" every day.
[\(http://stuffwhitepeoplelike.com/2008/02/22/73-gentrification/\)](http://stuffwhitepeoplelike.com/2008/02/22/73-gentrification/)

The largely white sub-cultural shades that together compose modern hipsterdom, are often overtly associated with processes of gentrification (Clayton 2010, Cowen 2006, Greif 2010a); as 'neighbourhood pioneers', therefore, hipsters often inhabit – and moreover demarcate – what Smith (1996, p. 190) termed the 'redevelopment frontier', a shifting, socially and spatially contested boundary or border delineating the separation between space of *disinvestment* and those of *reinvestment* in urban planning and redevelopment discourse, as much as the wider public imagination. Before addressing the role of hipsters, however, it is useful to revisit Glass's (1964, p. xvii-xix) founding definition of what is today referred to as 'classic gentrification' in urban studies theories concerning gentrification and redevelopment (Lees, Slater & Wyly, 2008):

One by one, many of the working class quarters of London have been invaded by the middle classes ... Shabby, modest mews and cottages [...] have been taken over, when their leases have expired, and have become elegant, expensive

residences... Once this process of 'gentrification' starts in a district it goes on rapidly until all or most of the original working class occupiers are displaced and the social character of the district is changed.

Fundamental to the founding definition of gentrification therefore is the notion of class displacement. Invocations of hipsterdom, as Clayton (2010: 29) further argues, often represent a cipher for discussions of "gentrification and neighbourhood change", where class displacement is understood as a central element in both historical and contemporary patterns of gentrification (Lees, Slater & Wyly, 2008, Glass 1965, Slater 2004, Smith 1996). Not unlike the art community they are commonly associated and involved with, hipsters thus can be seen as representing a particular form of gentrification 'shock troops', a group that often boasts of its tolerance for ethnic, cultural and class-based 'difference' (Blackwell 2006, Caulfield 1989, 1994, Clayton, 2010, Slater 2004). In much the same manner as hipster style is constituted from a bit-piece pastiche assemblage of decontextualized – and thereby *depoliticized* – 'marginal' signifiers, Greif (2010a, p. 10) argues, "the 'white hipster' fetishize[s] the violence, instinctiveness, and rebelliousness of lower-middle-class [neighborhoods]" yet with "the ethnicities scrubbed off", "recolonizing urban neighborhoods with a new aesthetic".

Gentrification is always already seduced by the 'sketchiness' of disordered post-industrial, immigrant working class urban landscapes (Smith 2010, 2011), where Smith's (1996) *new urban frontier* is the space where hipsters and junkies, artists and winos, sex

trade workers and yuppie DINKs⁷ intermingle and (at least for a time) co-exist. Such marginal areas of the capitalist cityscape, furthermore, have often been associated with the ‘disorder of drugs’ (Smith 2010, 2011), becoming the space of brothels and ‘crack houses’ or ‘shooting galleries’⁸, ‘alkie’ bars and ‘junky’ parks. From this vantage point, it is therefore perhaps unsurprising that our global cities’ most notorious ‘ghetto’ neighbourhoods—East London’s *Docklands* and *Canary Wharf*, New York’s *Harlem*, Toronto’s *Corktown* and Vancouver’s *Downtown Eastside*—now arguably exist at varying stages of (post-)gentrification, retaining only faint traces of the ‘gritty-ness’ that once gave them their heterogeneous ‘character’ (Caulfield, 1989).

The community conflict surrounding the relocation of a methadone maintenance treatment (MMT) clinic into the rapidly gentrifying peripheral downtown Toronto neighbourhood of Corktown (formerly home to Toronto’s industrial immigrant working class) provides a telling example of the role of hipsters in spatial displacement. In discussing the dramatic demographic shift the neighbourhood was witnessing, one local resident explained the working class origins of the area, describing its ‘radically’ changing socio-economic characteristics with reference to ‘BMW’s. Lawyers and professors’. Framed as a product of ‘creative class’ urban planning strategies (Florida 2002), other community opponents focused explicitly on the impact of art and artists in the redevelopment of the neighbourhood, attributed in large part to a neighbouring

⁷ Both demographic acronyms, *yuppie* is an adapted abbreviation of ‘young urban / upwardly-mobile professional’, while DINK stands for ‘dual-income no kids’.

⁸ For an ethnographic account of shooting galleries – and corresponding critique – see Bourgois (1998) and Vitellone (2010).

industrial complex that was transformed into a 'hub' of creative class culture, complete with artist studios, theatre groups and other 'creative' amenities. Noting the arrival of 'trendy, cool' businesses in the immediate area, other local business owners predicted that the methadone clinic and its service user population would eventually be displaced by the growing concentration of up-market businesses, citing Starbucks as being emblematic of this trend (see Smith 2010, 2011).

In the first instance, therefore, hipsters are implicated in the displacement of urban spaces once the stigmatized, neglected domain of people who use illicit drugs. Because it has become a pejorative term that is seldom – if ever – deployed as a tool of self-identification (Greif, 2010; Haddow, 2008), however, the hipster is often invoked to absolve oneself from processes and phenomena associated with gentrification. Drawing from Bourdieu (1984), Grief (2010d, p. 3) summarizes hipster sub-types according to their relative social class positioning, social mobility and role in gentrification, revealing a diverse demographic range that may, by extension, mirror and reflect that of the harm reduction workforce. Here, while upper-middle class hipsters (along with their artist 'shock troop' counterparts) largely represent active agents, financially precarious lower-middle class hipsters often simultaneously act as both catalyst *and* victim of gentrification, who are themselves displaced once the process is complete (Grief 2010d, Ley 2003). The appropriating sub-cultural force of hipsterdom – and its recuperation by real estate speculators hot on their heels – however, is inextricably implicated in the displacement of (street-based) users, user neighbourhoods and user space more generally. Elucidating the seemingly anomalous relationship between artists,

gentrification and 'hipness' in Vancouver's Downtown Eastside (DTES), Shier (2002, p. 15) writes:

The image of artists fleeing this dilapidated urban area like rats from a ship is ironic given their reputation as the shock troops of gentrification. Typically, artists from the vanguard of urban colonization. Cheap studio and gallery spaces in a city's 'problem' area brings occupancy, and raises the perception of safety and hipness. In a few years, so the story goes, an influx of tertiary shops, boutiques, restaurants, renters and loft owners follow. An area's vices, its drug dealing and petty crime, are bullied out by an influx of capital.

Despite every effort by municipal planners, private sectors developers, and real estate speculators, Vancouver's DTES has not followed this model, and as Shier (2002, p.15) concludes, "it appears to work in reverse". Citing organized opposition by a large population of low-income residents and aggressive expansion of the hyper-capitalist 'black market' drug economy as the primary deterrents to redevelopment, contrary to Shier's (2002, p. 16) projections, the DTES shows increasing signs of encroaching gentrification on all sides. Here, in spite of arguments suggesting impediments to inner-city gentrification in Vancouver (Ley & Dobson 2008), anecdotal evidence suggests that a plethora of galleries have (re-)opened in the DTES over the last two years (Ann Livingston, VANDU co-founder, personal communication).

Displacement #2: The displacement of direct user involvement in harm reduction practice

Symptomatic of what I term the gentrification of public health, the second form of displacement perpetuated by harm reduction hipsters concerns the relative positioning of drug/service users (Smith in press), ‘peers’ or ‘people with lived experience’ (Cheng & Smith, 2009). Here, a plethora of recent research suggests users can and do play a critical role in the development and delivery of a diverse range of harm reduction interventions (Allman et al., 2006; Canadian HIV/AIDS Legal Network, 2008; Canadian Harm Reduction Network, 2008; Cheng & Smith, 2009; City of Toronto, 2005; Coyle, Needle & Normand, 1998; Friedman et al., 2004; Friedman et al., 2007; Kerr et al., 2004; Latkin, 1998; Mason, 2006; Orme & Starkey, 1999; Ruefli & Rogers, 2004; Toronto Harm Reduction Task Force, 2003; VANDU, 2004, 2010). “At this point in history”, proclaims a manifesto produced by the *Vancouver Area network of Drug Users* (VANDU 2010, p.1), “the question of how drug users are organized and represented [...] is decisive”. Masking their relative positions of socio-economic mobility and privilege, many hipsters’ ostensible affinity with marginalized, socially vulnerable lower class populations such as people who use drugs merely constitutes a superficial alliance. Conveyed through the deception of aesthetics, this supposed affinity constitutes little more than new source material for a pastiche of unmoored signifiers of socio-economic marginality divorced from political context: “symbols and icons of working or revolutionary classes” that have been “appropriated by hipsterdom and drained of meaning” (Haddon, 2008).

Harm reduction's recent hipster cache and the corresponding deluge of hipster involvement in institutionalized public health, in other words, in/directly functions to displace users and peers as the central engine of harm reduction policy development and service delivery, relegating people who use drugs to passive research subjects and other stigmatizing, tokenistic positions (Canadian HIV/AIDS Legal Network, 2008; VANDU, 2010). An anecdote from a recent visit to Vancouver's DTES provides a telling case in point. Walking down East Hastings, I serendipitously arrived in front of *InSite*, the first and only legally sanctioned supervised injection facility (SIF) in North America. Established as a 'scientific trial' in 2003, the contested fate of *InSite* was recently tried by the conservative federal government in the Supreme Court of Canada, who ruled in favor of institutionalizing the facility. Having conducted a SIF literature review and served as co-investigator for a SIF needs assessment elsewhere in Canada, I spontaneously decided to conduct a self-guided tour of the site⁹.

Glancing at the facility's interior space while awaiting registration, I noticed the injection stalls were designed in a hose-shoe surrounding an elevated monitoring post that Fischer et al. (2004, p. 361) have referred to as the '*injec-ticon*'¹⁰. Behind the *injec-ticon* stood two young *InSite* employees, one engrossed in checking her Facebook

⁹ My tour of *InSite* took place while the facility's fate was still being decided by the federal Supreme Court of Canada, immediately preceding the *InSite* benefit event described in the following section.

¹⁰ In their investigation of SIFs as 'governmentality' (Foucault, 1991), Fischer et al.'s (2004) reference to the 'injecticon' points back to Foucault's (1977, 1980) writings on the *panopticon*, drawn from Jeremy Bentham's theoretical model of prison architecture, where the ever-present threat of surveillance by prison authorities resulted in behavioural self-regulation and self-disciplining among the inmates.

account on the computer terminal on the desk, while the other stood simultaneously stroking his handle-bar moustache while casually fiddling with his iPhone. *Why wasn't there a paid user or peer on site?*, I wondered. Standing for another few moments drinking in the scene, the answer became immediately apparent: hipsters have come to occupy most of the central positions of power within harm reduction, effectively displacing the direct involvement of people who use drugs, and at best engaging in superficial, tokenistic and in some cases exploitive forms of sub-contracted user consultation (Canadian HIV/AIDS Legal Network, 2008; Vandu, 2010). Arriving at this revelation, I caught myself unconsciously muttering the words '*harm reduction hipsters*' under my breath; looking up from her Facebook page, the young woman stopped typing and immediately responded: "I'm not a hipster", a proclamation essentially connoting complicity not unlike running from the police is taken as a sign of guilt (Grief, 2010d).

Given the increasingly strong impetus for what is generally termed 'consumer involvement' in mental health and HIV/AIDS policy discourse, this problematic directly speaks and calls back to the Canadian HIV/AIDS Legal Network (2008) position paper turned global drug user activist mantra, '*nothing about us without us*'. Even in the DTES, Canada's most infamous drug scene and home to what is arguably the most accomplished and militant autonomous user-driven organization in North America (Kerr et al. 2001, Kerr et al. 2006, VANDU 2004, 2010) however, users been – and continue to be – displaced from positions of power by hipsters who espouse a social, spatial and ideological affinity with all things 'marginal', while also actively propagating the institutionalized public health model of harm reduction as a 'rational', 'pragmatic', 'amoral' response to the depoliticized biomedical vision of addiction-as-'disease'

(Courtwright 2010, Keane 2003, Miller 2001, Reinerman 2005, Roe 2005, Smith in press).

Displacement #3: The gentrification of public health

Produced by the cumulative impact of the preceding hipster-driven forms of (socio-spatial) displacement, we therefore arrive at what has been termed the *gentrification of public health*, entailing the displacement and subsequent erasure of radical and/or oppositional politics from harm reduction discourse and policy, resulting from the global epidemic infection of the pathology paradigm for addiction research and treatment. As a culmination of drug/service users' successive *socio-spatial* displacements, the gentrification of public health is thus catalysed, enabled, or facilitated by hipsters' un/conscious role in promoting sanitized, depoliticized forms of what we might call *harm reduction 'lite'* following from the movement's institutionalization (and consequent depoliticization) as public health policy (Roe 2005, Smith in press). In order to adequately unpack this final – and arguably most significant – form of hipster-implicated displacement, I therefore make reference to one final ethnographic vignette.

While attending a conference in Vancouver in May 2011, I attended an event entitled *Health, Harm Reduction and the Law*. A benefit for the *InSite* Supreme Court challenge, the event was held at the recently completed Woodward's redevelopment, the symbolic heart of gentrification in Vancouver's DTES (Sommers 1998, Sommers &

Blomley 2002). Arguably one of the most contested redevelopment projects in Vancouver's history, the former Woodward's department store was built in 1903, serving as both a preeminent shopping destination and the focus of several large-scale labour riots during the early twentieth century (Sommers, 1998)¹¹. Site of one of the most militant housing squats in Canadian history in 2002 ('*Woodsquat*'), the recently completed redevelopment of the site was based on mixed-use and mixed-income planning principles, incorporating social housing, market rent condominiums, and academic facilities for Simon Fraser University (SFU) and the University of British Columbia (UBC).

Sitting in the Woodward's courtyard as the crowd gathered for the event, I glanced up at the ornate glass and steel structure and was immediately struck by a large public art piece adorning the interior wall of the courtyard, depicting what appeared to be a riot. An unlikely site for a public symbol of the political violence that has intermittently erupted in the DTES throughout the last century, I later learned the work was completed by internationally renowned Vancouver artist Stan Douglas, representing a curious concession to the SFU School for Contemporary Arts. Depicting the Gastown riots of 1971, Douglas's (2008) *Abbott & Cordova, 7 August 1971* is, however, not the only project to take up the rapidly transitional and highly contested political geography of the DTES.

A photograph literally depicting *Every building on 100 West Hastings Street*, the title of Douglas's 2001 photographic work is both self-descriptive and evocative of the

¹¹ For a more detailed history of the symbolic significance of Woodward's as a central site of organized protest and resistance in Vancouver throughout the twentieth century see Sommers (1998).

relentless creative-destructive redevelopment of the 'addicted city' of 'our narcotic modernity' (Berman, 1982; Derrida, 1993; Wild, 2002). Detailing the place of the DTES in the increasingly acute socio-spatial polarization of Vancouver's DTES, Shier (2002, p.10) writes "[w]ithin this enfolding sphere of civic entitlement and reimagination, the 100 block stands out in stunning relief", demarcating a 'shifting border' between 'ruin and renovation' that "waxes and wanes across a number of social boundaries". Deriving similar inspiration from Douglas's (2001) work, and grounded in the social impact of political-economic forces, in slightly more stark terms Sommers and Blomley (2002, p.19-20) suggest:

The evident changes in the 100 block of West Hastings are inseparable from the deindustrialization of the downtown waterfront and the reorientation of the downtown economy toward tourism, information, and producer and consumer services. Nor can they be understood without taking into account the widespread gentrification and redevelopment of the old working-class residential neighbourhoods in and around the urban core, which, in turn, is bound up with new forms of inequality that come with the post-industrial economy.

The first public event held at Woodward's since the redevelopment was completed, *Health, Harm Reduction and the Law* drew a larger than expected crowd, and with a suggested \$10 (CDN) suggested donation, the auditorium quickly filled to capacity, forcing organizers to turn away the remaining line-up of progressive looking, hip, and mostly young people stretching out the door. Settling into my seat as the stage

was prepared I scanned the crowd, noting an unusually high prevalence of horn-rimmed glasses and vintage screen-printed t-shirts among the attendees. As the evening's speakers were introduced, a leaflet was distributed throughout the crowd by members of VANDU. Bearing the title *Manifesto for a Drug User Liberation Movement* (VANDU 2010, p.1), the opening paragraph read: "Our liberation will come when we have real power in decisions that affect us starting with, but not limited to, laws and policies having to do with drugs and drug use". Detailing VANDU's major principles and aims, the document further asserted that overcoming the "oppressive drug regime and realiz[ing] liberation for drug users" was fundamentally contingent upon the formation of local, national and international "organizations of people who use drugs that are grassroots, democratic, relevant and effective"; in order to "ensure real self-representation", the manifesto continued, such groups must clearly insist "that people who use drugs are the one's to define the participation of people who do not" within the organization (VANDU 2010, p.2). As the presentation got underway, my adjacent UK colleague leaned over with a genuinely perplexed look on her face and whispered, '*who are all these people in the crowd?*' '*Harm reduction hipsters*', I quietly replied before the auditorium fell to a hush, yet my response only seemed to add to her confusion.

Discussing my initial ideas for this essay with several major international harm reduction advocates, from activists to academics, drug users to policy actors, a number of individuals presented the counter-argument that the 'mainstreaming' of harm reduction, irrespective of the demographics who were mobilized and involved, could only be seen in positive terms. If harm reduction was becoming 'hip', cool or culturally cache, several colleagues vehemently insisted, it mattered little *who* composed the

critical mass behind its growing momentum. The mainstream acceptance of harm reduction, I responded, was taking place at the expense of a series of mutually constituting social, spatial and political displacements that were not only fundamentally antithetical to – but also responsible for – the systematic displacement and erasure of the oppositional origins and founding anarchist spirit of the movement. If hipsterdom had become the reigning recycled subcultural identity of the early twenty-first century, I argued, the colonization of the movement by the apolitical/depoliticizing phenomena of contemporary hipsterdom signalled the end of the movement as an overtly political force. Implicated in not only the spatial displacement of users through the process of gentrification and the social exclusion of people with lived experience (Cheng and Smith, 2009) from the policies, research and treatment / harm reduction interventions ostensibly conducted in their interests, hipsters and hipster culture are moreover actively complicit in the erosion of harm reduction's historical import as an explicitly political, user-driven force (Hunt & Stevens 2004, Smith in press, Stoller 1998, Roe 2005).

Conclusion: Questioning research motives/alliances and (re)mapping unequal distributions of power

“This is a challenge to academics, policy experts and service providers,” proclaims the *VANDU Manifesto for a Drug User Liberation Movement*: “we do not want to be used as cheap labour, we do not want to be studied while we die, or be turned into clients while resources are given to ‘service’ agencies. We will not tolerate actions that

exploit the labour, activist work, or experiences of people who use drugs” (2010, p. 2).

As we witness the disappearance of user space, the displacement of direct user involvement in harm reduction policy development, service delivery, research and evaluation, and the consequent final depoliticization of the movement I urge all researchers, policy actors, and front-line workers to heed these words. With a tone of militancy that might represent the antithesis of hipster irony, the manifesto concludes with this plea: “[f]inally, we expect responsible researchers, experts and academics to support us” (VANDU, 2010, p. 2). Borrowing from VANDU, the question of how to critically engage and support such a radical liberation movement without displacing, dissolving, diluting or destroying the very people, places and politics at its core, is the challenge that this essay has provocatively posed.

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