

Book Reviews

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Boeri, Miriam. 2017. Hurt: Chronicles of the Drug War Generation. Oakland, CA. University of California. 26 pp. \$29.95. ISBN: 9780520293472.

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Since the launch of the American "War on Drugs" in 1971 by President Richard Nixon, drug trends and epidemics came and went, drug enforcement militarized, incarceration industrialized to monstrous proportions and illicit drug use continued unabated. The constant in this equation is the Baby Boomer generation who lived through it all. *Hurt: Chronicles of the Drug War Generation* by Miriam Boeri sets out to examine the lives of Boomers or "the drug war generation" and the impact of the drug war in deep qualitative, textured rigor.

Boeri draws on years of ethnography, mainly in the Atlanta area, 100 in-depth life course interviews and retrospective survey data. For the book, Boeri focuses on the stories of 38 people who vary in race, gender and class backgrounds but are all from the Boomer generation, born between 1946 and 1964. The book is driven by personal stories and each chapter features the lives of four to five individuals, with some life histories continuing to develop as the book progresses. Thematically organized, each chapters' narratives are woven together and punctuated by sections of analysis and sociological interpretation. Comparing the war on drugs to a civil war, Boeri shows the disruptive and often life-rupturing effects of incarceration and its destabilizing after effects in terms of housing access and job prospects.

The life course analysis uncovers what Boeri identifies as distinct phases of drug use: controlled, dependent and uncontrolled (p. 49). She finds long-term drug users go through varying phases of use and even long stretches of abstinence. What often sends them back into dependent or uncontrolled use are the scars of incarceration that impede access to mobility or stability. In most cases, multiple bouts of incarceration broke relationships, forestalled or stymied meaningful education or job training, led to impoverishment and homelessness, and often set people on a path into deeper throws of uncontrolled illicit drug use. Her research demonstrates the "maturing out" thesis, that most cease drug use after the age of 35, did not apply to Boomers because of the drug war. Rather, all research subjects revealed

discontinuous drug use stretching into their 50s and 60s. Almost all were traumatized somehow during their childhood. Unfortunately, they were met with little societal salve, as growing criminalization of drug use only compounded their hurt.

To offer a unique sense of continuity throughout the book, all chapters feature pieces of the story of Boeri's older brother, Harry. His story unfolds in rough chronological order and reveals a life characterized by early trauma, incarceration, heavy drug and alcohol use and general instability. There are moments of reprieve, as well, where he finds "social recovery" through stable housing, work and study. Boeri's efforts to care for her brother are demonstrated in long drives, late night phone calls, going to bat for his wellbeing with parole officers and landlords as well as tender times together at bars. Though couched in sociological analysis, this aspect of the book takes on a memoir style tone and evinces the familial toll of the drug war firsthand.

The text covers the lives of drug-using Boomers from a wide range of perspectives, the life course approach yielding a deep well of data for exploration. Chapter 1 lays out the social, political and historical context. Chapter 2 focuses on life course theory and introduces the phases of drug use approach. Chapter 3 deals with relationships and Chapter 4 covers the expansion of the carceral system and some of its more controversial practices like solitary confinement and the use of confidential informants. Chapter 5 and 6 examine race and gender, respectively. Chapter 7 shows the structural challenges faced by aged drug users. Chapter 8 highlights the merging of the treatment industrial complex and the prison industrial complex into a new form of social control. Chapter 9 presents the concept of social recovery as a way to heal from the scars of the drug war and reimagines society's approach to drug use overall.

Boeri endorses ending the drug war and shifting efforts to "social recovery" that reintegrate the marginalized and provide opportunities for building social capital and networks in "conventional society" (p. 183). For policymakers, she suggests they find ways to "disentangle treatment from law enforcement; (2) shift funding from law enforcement *back* to public housing and other social services, including comprehensive treatment; and (3) support and allow controlled moderate drug use as well as abstinence" (p. 174). In relation to drug abuse treatment, she found that methadone maintenance therapy (MMT), a controlled substance and narcotic that requires most patients to visit a medical setting daily to receive their medication, was only available to the most privileged in her cohort. Those with MMT access were significantly more successful in their recovery and maintained stability longer than their peers.

As I read this book in the summer of 2020, I am also mindful of the shifting social and political economic contexts that add new considerations for implementing Boeri's proposals. First, in light of the clinical challenges Covid-19 presents, MMT and other medically assisted treatment (MAT) plans have been revised to allow many more individuals to take their medication at home. These changes should be made permanent and access to these life-saving medications universalized. Boeri's suggestions to shift funding are in concert with growing social outcry to "defund the

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police" and to end the "new Jim Crow." Still, the racism of the drug war and its disparate concentrated impacts on Black communities and communities of color could be addressed in greater depth throughout the discussion. Even so, her book provides invaluable insights into the long-term human costs of the drug war and advances calls for a new way forward.

Not for the faint of heart, the text describes private childhood traumas, rape and interpersonal violence in detail. Boeri brings a compassionate and somehow optimistic tone to these confidential accounts, if for nothing else, to communicate her faith in and respect for the people she studies. Written in accessible prose that is jargon-averse, the book is suitable for undergraduates; it triangulates extensive narrative case studies with broader thematic arguments, historical and political context. Within the social sciences, courses on drugs, inequality and the life course will find the text useful. Practitioners in the more applied fields of public health, social work, criminology and those in drug treatment fields would be well served from the insights this book offers.

Raudenbush, Danielle T. 2020. Health Care Off the Books: Poverty, Illness, and Strategies for Survival in Urban America. Oakland, CA: University of California Press. 208 pp. \$29.95. ISBN-13: 978-0520305625

Reviewed by: Kate Cartwright, University of New Mexico, Albuquerque, NM, USA DOI: 10.1177/0160597620982741

While this book was researched and written before the Covid-19 pandemic, the focus and the insights could not be more timely. Reading this book in the summer of 2020 felt particularly telling, as many of the cracks in the US health care system have become more painfully obvious. The American system's reliance on employerbased health care proves even more questionable as people have lost their jobs at a time where health care coverage is a life or death benefit. The pandemic came at a time when, as a country, we are losing ground in the mission to get all citizens access to insurance following the current administration's strategic political efforts to undermine the Affordable Care Act. Finally, the pandemic also brought greater attention to the racial and ethnic disparities in health access and health outcomes, most of which lead back to systemic racism. This book highlights the health care experiences of people from Jackson Homes, which is a public housing development in a low-income majority Black community in a large US city. This extensive qualitative study mixes participant observation with in-depth interviews conducted from 2010–2013 and follow ups in 2014–2015 (which captures behaviors before and after the implementation of the ACA). She talks with both the community members of Jackson Homes and physicians who provide health care to this community. The