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Author(s)	Tsang, Oi Chi (曾靄慈); Wong, Lai Ching (黃麗晴)
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City University of Hong Kong

Associations between Illicit Drug Use and Criminal Behaviors

TSANG Oi Chi

WONG Lai Ching

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Introduction

Illicit drugs are defined as substances that stimulate or inhibit the central nervous system or cause hallucinogenic effects and are prohibited to use globally (Uutela, 2001). Criminality represents deviance that violates the law, whilst deviance varies across nations, it is an attitude or action that violates norms, values, or beliefs of the mainstream in a specific society (Coomber et al., 2017). Drug abuse is considered as deviance and criminality in most regions, yet, not all kinds of drugs are being classified as criminality in the world, for instance, legality or decriminalization of cannabis can be found in Canada and the Netherlands.

Reports have shown that drug abuse remains a serious issue in Hong Kong and over the globe. Population expansion on drug abuse was spotted globally over the past decade. The World Drug Report 2020 of the United Nations Office of Drugs and Crime (2020) estimated that drug abusers aged 15-64 have increased by 0.5 percent, meaning a total of 269 million drug abusers in 2018 worldwide. Particularly, cannabis is the most used drug worldwide, with 192 million people consumed in 2018, while opioids are the most harmful drug that has accounted for 66 percent of deaths related to drug abuse in 2017. Peak levels of drug abusers in most regions and drug types are mainly composed of adolescents between 18 and 25 years old, the report has indicated that there were about 13 million students aged 15-16 who have abused drugs in 2017.

For the local context, according to the Census and Statistics Department in Hong Kong (2019), the overall drug abuse in Hong Kong has decreased in 2018 by 4% compared to 2017, with a total of 6611 drug abusers being reported. However, the number of reported adolescents drug abusers have increased and young adults drug abusers continued to take up a high proportion among those newly reported, with more than half of them had an average of 4.7 years of drug

history, implying that the drug abuse situation in Hong Kong is, in fact, still serious. In terms of the type of drug abuse, increases in both cannabis and cocaine are spotted, while heroin is the most common followed by methamphetamine. Major reasons for drug abuse include avoiding the discomfort of the drug's absence, relieving emotions or stress, boredom, and peer influences.

The consumption of illicit drugs has long been linked with criminal acts. Although there is little evidence that drug abuse can directly cause aggressiveness, a raw correlation between drug use and other criminal behavior has been established by many past studies, and drugs play a particularly important causal role in violent and property crime. The linkage between drug use and crime is contingent, that it can vary over periods, across individuals, over time within an individual's development, and across situations (MacCoun et al., 2003). According to the Arrestee Drug Abuse Monitoring (ADAM) Program in 1998, between 40 and 80 percent of male offenders across 35 cities were tested positive for at least one drug (Arrestee Drug Abuse Monitoring Program, 1999). It is also found that drugs and alcohol were important causes for a large percentage of all homicides among the sample (Goldstein et al., 1989). They sorted 53 percent among the 414 homicide cases as drug or alcohol-related, indicating that drugs can lead to serious offenses and that attention should be paid to their associations. Thus, it is worthwhile to further explore the correlations between drugs and crimes, and more research on this topic is desirable to further understand the considerable heterogeneity of effects across different drug users.

This study focuses on understanding the associations of drug use and criminality among Hong Kong ex-drug abusers and ex-offenders. Hence, it further examines the role of social control theory in drug abuse and criminal behaviors, as it is an important theoretical framework in the

study of deviance which has gained large support since its development. Since previous research studies on the same topic are not abundant, it may lack justification and foundation to build on. Our study might thus provide more insights to help understanding the relationships between drug abuse and criminal activities under the Hong Kong context, as well as the processes by which individuals become involved in these behaviors.

Literature Review

Previous Studies on Relationship Between Drug Use and Criminality

Illicit drug use and criminality are found to be directly or indirectly related. A high degree of correlation between drug use and criminal behavior is demonstrated (Nurco et al., 1989).

Narcotic addicts and heavy cocaine users are discovered to be frequently engaged in criminal offenses. An early report with 250 narcotic addicts in Baltimore and New York (Nurco, Shaffer, Ball, 1986), investigated the relationship between criminal activities and addiction status in the community by comparing the crime rates for combined periods of addiction with those for combined periods of non-addiction. Findings suggesting significantly more criminal offenses committed during addiction periods than during non-addiction periods. Regarding the study investigating the relationship between crime and substance abuse in a sample of 133 consecutively evaluated male prisoners in the United States (Kouri et al., 1997), 95% of 133 interviewed state prison inmates reported at least one form of substance abuse or dependence by DSM-111-R criteria. The extremely high prevalence of DSM-111-R substance abuse dependence in this population raises the attention on whether there was a relationship between their substance dependence and their criminal behaviors. From the interview, 53% (72 individuals) reported that their drug use played a significant role in their committing the crime for which they were incarcerated. In Hong Kong, 72.5% of all reported drug users had been convicted at least once in

their lifetime (Narcotics Division Security Bureau, 2018). According to the statistics from the Correctional Services Department (CSD) in Hong Kong, substance abusers counted for 48.3% of the entire offender population who had 2 or more convictions (CSD report, 2018).

Relationships between Drug Use and Violence

Studies suggested that drug uses are highly related to violent behavior and crimes, especially leading to homicides and sexual offending. A connection was found between drug abuse and impulsivity of humans under the aspects of impulsive choices and impaired inhibition, in which deficits are observed in impulsive choice and impaired inhibition among drug abusers (Perry & Carroll, 2008). In terms of drug-led homicides, Zahn and Bencivengo reported that about one-third of the homicides in Philadelphia was caused by drugs (Goldstein, 1985); Monforte and Spitz (1975) concluded that drug uses have in fact established a stronger relation to homicides than property crime; the report of New York City Police Department (NYPD) in 1981 claimed that about 24% of known homicides were drug-related (Goldstein, 1985); Goldstein and Hunt estimated that there could be more than 460,000 assaults in 1980 in the United States that were drug-related which the victims suffered from physical injuries and hospitalization treatments were needed (Goldstein, 1985).

In addition, it is found that lifetime prevalence rates of substance use disorders were up to 50% for sexual murderers with one and multiple victims (Hill et al., 2007). Davis (2010) suggested that cognitive myopia caused by substance use further increases the propensity of individuals to commit sexually aggressive acts as it leads the attention of sexual offenders to focus on immediate and salient cues, in this case, their sexual arousal, indicating that with drug use, the probability of a violent sexual offense is more likely to occur. While Abby and colleagues (2004)

opposed the argument above by proposing that drug use may not exert a strong influence on sexual offending as the effects of substance use are likely to be mediated by cognitive myopia and substance expectancies.

However, some scholars argued that drug-related crimes are more likely to be acquisitive crimes rather than violent ones. Goldstein (1985) adopted a tripartite conceptual framework to analyze the relation of drug use in resulting crimes, which are (1) psychopharmacological violence, (2) economic compulsive violence, (3) systematic violence. Only the third model, systematic violence agreed that drug use resulted in violent crimes due to disputes over rival drug dealers, elimination of informers, and punishments for selling phony drugs. The findings of the psychopharmacological violence model claimed that intoxication of drugs is unlikely to cause violence, but what causes violence of an individual is the irritability led from withdrawal syndrome from drugs (Goldstein, 1985). While the economic compulsive violence model argued that most heroin users in the study tended to avoid violent crimes in order to prevent being caught and sent to prisons (Goldstein, 1985). Together with another result presenting that most of the crimes committed by most drug users are non-violent, for instance, shoplifting, prostitution, or drug selling since their primary motivation is to obtain money to sustain their drug use habits.

Scholars have also mentioned that it is difficult to clearly establish which types of crimes, violent or non-violent, are more prevalent in drug-related crimes in the United States. Goldstein (1985) indicated there were various limitations from the official reports as a result no conclusion could be generated, such as the Uniform Crime Report (UCR), without a coded data set for quantitative presentation; and the National Crime Survey (NCS), only included household yet the majority of drug users in the United States were found to be street drug users whose were not counted as

household, meaning being excluded from the data collected, so it remains a question that whether drug use does more likely to result in violent crimes.

Common Risk Factors for Drug Use, Relapse, and Crimes

Relapse is a common phenomenon among drug abusers who have attempted quitting drugs. It compromises the result of psychotic disorders and is related to considerable risks and costs (Weiden and Olfson 1995). The response of symptoms to treatment is found to account for approximately 50% longer and is increasingly difficult to re-establish each time the drug users relapse (Lieberman et al., 1996). In other words, it is harder for an individual to get rid of the influence of drugs, leading to more undesirable consequences such as health issues and criminal acts.

Some major reasons for drug-abusing and committing crimes are overlapping. Family cohesion acts as a large risk factor for drug use as well as criminal activities. As suggested by previous studies, adults who form quality bonds with significant others may desist from crime due to unofficial social controls (Devers, 2011). Having children incentivized imprisoned women to stop engaging in criminal behaviors (Enos, 2001). In another study, female offenders with drug-abusing histories who are expected to live with their minor children following release from custody have a higher likelihood to enter a therapeutic community (Robbins, Martin, & Surratt, 2009). In fact, an inverse relationship is found between both recidivism and having children, and recidivism and having a non-criminal romantic partner, concluding that women are intrinsically protected by various social and familial arrangements. When paying effort in reintegrating into society, parental role dynamics and/or intimate partner relationships appear to be essential predictors for successful and sustained reintegration within communities (Benda, 2005).

In addition, family cohesion and parental monitoring were both negatively associated with the risk of exposure to serious violence as well as with drug use. These factors exerted a “protective-stabilizing” effect (Luthar, Cicchetti, & Becker, 2000) on the amount of drugs used. In highly cohesive families, parents and guardians may convey a sense of concern for their children - a sense that they matter. This sense of someone is invested in them may make people think twice before engaging in activities that are not desirable. A sense of mattering to someone is a consistently identified protective factor in existing research and research on the effects of community violence (Garbarino, 1999). Higher levels of family cohesion tend to increase an individual's needs for safety and security more than those with less of a sense of family cohesion. Needs for safety and security could be challenged by violence exposure. Family members, due to their status in drug users' lives, are particularly effective at lessening their fears about possible future threats, therefore lowering the demand for stress reduction through substance involvement or criminal acts, or curtailing the negative effects that drug abuse may bring.

Association with deviant friends has shown significant importance in predicting an individual's tendency of using drugs and engaging in delinquency (Elliott and Huizinga, 1984). According to the qualitative study of returning to drug use and overdose after release from prison (Binswanger et al., 2012), a participant who had used drugs after prior releases identified the most significant challenge he faced was staying away from individuals with whom he had previously used drugs. The biggest difficulty identified is not going back to the same lifestyle that brought them to prison, suggesting that the environments to which substance users return immediately following prison make it hard to avoid activities that they have engaged in and drugs due to ubiquitous triggers to use. However, it is extremely difficult for them to completely stay away from

individuals with whom they had previously used drugs together. Despite these risks, former inmates also described protective factors and responses such as strengthening family relationships, changing social networks, and avoiding former lifestyles to mitigate the risks of relapse and return to prison. Drug use often occurs in a context of poor social support and inadequate economic resources to support integration into the community. Social isolation was a particular problem for former inmates who were trying to stay away from drugs (Binswanger et al., 2012).

It is common that former inmates and drug abusers are struggling with financial problems. Poor finance is described as contributing to drug use and relapse as it creates stress. Higher levels of stress account for a greater chance of drug use and relapse as they have no other choice that can make them forget about the stresses. Most major theories of addiction postulate that acute and chronic stress could greatly motivate the abuse of addictive substances (Tomkins, 1966). Furthermore, the experience of being overwhelmed with actual challenges and barriers to transition could easily lead to drug abuse and relapse (Phillips & Lindsay, 2011). Additionally, drug trafficking in the environment where former inmates returned was considered a crucial problem. Selling drugs might be their only familiar way to earn a living. Challenges they face during re-entry have a strong influence on the return to drugs after release from prison.

Theoretical Background

Social Control Theory

It is undeniable that Social Control Theory receives much empirical support and has become significantly dominant among research in the criminological field, especially in delinquency (Gottfredson, 2011; Agnew, 1985). The publication of Hirschi's *Causes of Delinquency* in 1969

was regarded as a turning point of criminology (Laub, 2004), in which social control theory was developed. The family variable was brought into the picture which was largely ignored by most of the theorists during the period of 1960s and 1970s. Akers (1994) highly praised the theory's construction and conceptualization, saying that it was unique and could stand as a model today. Thus, the social control theory can certainly act as an effective framework to study delinquency. According to Hirschi's social control theory, it is asserted that ties to family, school, and other aspects of society are essential in diminishing individuals' propensity for engaging in deviant behavior and integrating them into society. As such, the theory emphasizes that crime occurs when such bonds are weakened or are not well established (Hirschi, 1969). Conformity is attained through socialization. The stronger these bonds are, the higher the chance of committing conventional norms and the less likely it that non-conforming behaviors would be demonstrated. The bonds consist of 4 major elements, including attachment, commitment, involvement, and belief.

Attachment refers to the affective ties and respect that individual forms to significant others such as parents, teachers, and peers. The environment of the family is perceived as the source of attachment, for parents act as role models and socially acceptable behaviors are taught.

Individuals with high affection and respect have a lower likelihood of engaging in delinquency since they are not willing to harm or incur the disapproval of people whom they care about which might destroy their relationships. Commitment is related to the individual's actual or anticipated investment in conventional activities, such as the aspiration of going to college, building up a business, or getting a high-status job and acquiring a reputation for virtue. These activities are investments in conventional behavior that increase the cost and risk for an individual to become delinquent. Hence, individuals who have invested much in these

conventional activities are less likely to engage in delinquency. Involvement corresponds to the participation and amount of time spent in conventional activities that potentially bring individuals socially valued success and status objectives. The quality of activities that a youth join and their relationship to future aims and goals are important in preventing deviance. Time spent on homework, for example, is viewed as crucial in attaining educational goals which are prerequisites to high-status occupations. Spending much time in such activities results in having less time for delinquency. Belief refers to the acceptance of the moral validity of the central social-value system. The variation in the level of acceptance of the rules of society is central to social control theory since the less rule-bound individuals feel, the more likely they are to break rules. Hirschi (1969) posits that there is one dominant set of values and that even delinquents may recognize the validity of those values, although they might not believe they should obey the rules because of weakened ties to the dominant social order.

Social Control Theory in Drug Use and Criminality

Previous studies have proved the pivotal role of social influences in terms of drug abuse. Tam et al. (2018) proposed a five-stage drug-taking hypothesis. Identifying stage 1 as the exposure to drugs at a social event; stage 2 as the increased social usage of drug has widened the particular drug-taking social circle; stage 3 as the access to drug supply; stage 4 as the side effects caused by drug abuse; lastly stage 5 as the emergence of hidden drug use, suggesting that the onset of drug abuse mostly caused by social settings. Moreover, social exclusion is discussed to be linked with drug abuse and drug-related crime since the processes of exclusion from participating in ordinary social activities prone people to actively seek alternatives to fulfill their needs (Seddon, 2006).

Numerous studies focusing on juvenile delinquency, in general, have been supporting the Social Control Theory (Agnew, 1985; Wiatrowski, Griswold, & Roberts, 1981; Matsueda, 1982).

Adolescent substance use has also shown significant association with social control theory (Elliott & Huizinga, 1984; Marcos et al., 1986). Social Control Theory suggests that individuals with poorer bonding to the conventional society have a higher chance of using drugs, and consequently seeking out drug-using peers (Hirschi, 1974). The theory further points out the hypothesis that a person who has strengthened and increased the bonds to society, for example, through marriage or getting a new job, decreases their association with drug-using friends.

Concerning audiotapes the study conducted by Marcos, Bahr, and Johnson (1986), it is indicated that affective attachment to parents, religion, education, and conventional values accounts for 42% of lifetime marijuana use and 50% in overall lifetime drug use among 2,626 adolescents from the southwestern United States. Another study on social bonding in adolescent substance use also supports that social bonding is negatively associated with the use of other illicit drugs (Akers & Lee, 1999). Previous research had put much attention on parents' effect on drug use from the social control perspective. For instance, studies have found out that teenagers who maintain close relationships with their parents are less likely to take drugs (Bahr et al., 1998; Hoffmann, 1995; Resnick et al., 1997), and parental monitoring is also a significant factor in controlling drug use among adolescents (Simons, Whitbeck, Conger, & Conger, 1991).

Moreover, prior studies also pointed out that schools act as an essential source of social bonding that is possible to deter adolescent drug use since schools offer myriads of opportunities to form bonds with teachers, administrative staff, and coaches; develop conformity, and participate in different extracurricular activities. It is suggested that adolescents with strong bonds to school are less likely to use drugs (Bryant & Zimmerman, 2002).

Similarly, criminal and deviant behaviors are likely to be the outcomes of people with weak social bonding as they are freer to violate the legal and moral norms under the common value system. Thomas and Zanaiecki have proved that individuals with more distal social bonds are more vulnerable than others to demoralize and follow unconventional values presented to them, thus leading to criminality (Orcutt, 2007). Together with the research of Cardeli et al. (2020), Somali refugee young adults had a social disconnection due to discrimination and distrust faced their new neighborhood after their resettlement in North America, deviant attitudes (antisocial), and behavior (radicalization of violence) are observed from them. Alarid et al. (2000) also identified that the likelihood of individuals with a close attachment with their partner, parents to participate in criminal and antisocial activities is lower, while those who are attached to their peers are more likely to encounter criminal involvement. Furthermore, influences of parental attachment were discovered to be more significant towards women than men in the aspect of violent crime participation, but similar in both genders on the property and statutory crimes, while lack of involvement in social activities has a strong relationship with drug crimes, women's violent crime and men's property crime (Alarid et al., 2000). However, past researches had different conclusions over the relationship of criminality and involvement, with Hirschi (1969) claimed that involvement has a relatively weak influence on criminality, and Lasley (1988) and Alard et al. (2000) supported involvement has a strong effect on white-collar and felony offending respectively.

The Present Study

Objectives of the research

The objectives of the present research are (i) explore the relations between people with drug abuse history and criminal behavior in the Hong Kong context; (ii) identify the factors leading to drug use and criminal activities; (iii) examine the importance of social bonding in terms of drug-abusing and criminality, and how it affects deviance directly and indirectly. Since Hong Kong lacks related studies in finding out the relationship between drug abuse and criminality, it is expected that identifying the factors leading to these two dominant deviant behaviors can add to our knowledge in drug-crime research, which would be beneficial in preventing adolescent deviance and improving offender rehabilitation.

Hypothesis 1 There is a close relationship between drug use and criminal behavior.

Hypothesis 2 People with weak social bondings are prone to both drug use and criminality.

Hypothesis 3 Drug-related crimes are more likely to be non-violent than violent crimes.

Methodology

Participants and Procedure

The study is primarily designed to find out the association between drug abuse and criminal activities. A qualitative method is adopted and the data would be collected through in-depth interviews. Interviews would be carried out among drug abusers with a criminal background and without a criminal background. The researcher will explain the objectives and relevance of the study, assure the respondents of anonymity and give them the option of not participating in the study if they wish. A consent form will be distributed and the researcher will make sure that the

consent is reached before the interview commences. The results of this study will be based on the primary qualitative data collected. Participants have the right to decide to call for an end to the interview whenever they feel uncomfortable without the need for explanation.

10 adult participants are recruited and purposive sampling techniques are adopted. Participants are referred by the Society of Rehabilitation and Crime Prevention (SRACP). The inclusion criteria of the participant are (i) Hong Kong residents, (ii) age above 18, who are (iii) current or ex-drug abusers with criminal records. There is no requirement on gender and ethnicity, participants are recruited as long as they fulfill both criteria in the overall sample.

Interview Protocol

Qualitative research instead of quantitative research will be used since it examines the personal meanings of individuals' experiences and actions (Polgar & Thomas, 2000). This is among all the most appropriate methodology, for it focuses on personal meaning, occurs in a natural setting, and is descriptive, which will provide more in-depth and accurate results. Besides, qualitative methods are particularly appropriate to explore social processes and conduct research with vulnerable groups, as participants are allowed to have a voice and they have inherent flexibility which is conducive for ethical research practice (Liamputtong, 2007). An in-depth interview instead of a focus group interview, audiotapes is used as it can encourage participants to talk more in open-ended questions. This is because some of the questions are rather personal, that they might not want to disclose their information and feelings if other participants appear in the same setting. A qualitative study aims to go in for the research that investigates deeper understanding rather than merely examining surface features (Johnson, 1995). In this regard, in-depth interviews would be the best choice to achieve this aim.

In-depth interviewing is suitable for finding out about an individual's everyday lives because individuals themselves can provide the deepest, most comprehensive insight. The in-depth interviews conducted would be in semi-structured nature, as it can provide the interviewer and the interviewee with some format and will help direct the responses; while there is still room for the participant to elaborate. Semi-structured interviews facilitate a more detailed understanding of participants' perceptions, motivations, and emotions and are able to generate commonality among the sample group. Unstructured questions relating to the participants' experiences prior to the deviant behavior, including both drug use and other deviant behavior (eg. "Tell me something about your childhood?"); the deviant behavior itself (eg. "Tell me about what had dragged you into drug-taking?"); during the deviant behavior (eg. "Tell me what had led you to commit other criminal behavior"); and post-offense perceptions (eg. "Tell me what do you think is the biggest change after your release and the past?"). Structured questions will be related to participants' background, (eg. gender, age started drug abuse). Please see the appendix for the detailed proposed interview questions. The in-depth interviews are expected to last around 20 minutes per participant.

Data Collection

The recruitment and interviews were conducted from January through March 2021. Each interview will be audio-recorded to ensure the validity and reliability of the later analysis. It is anticipated that each setting will first gain permission from the participant before audio recording. The expected length of each interview would be approximately 20 minutes.

Unstructured text data will be obtained by transcribing audiotapes of interviews, while the transcripts later will be de-identified due to confidentiality and protect the identities mentioned

by the participants and themselves. An in-depth interview has an analytical approach to data collection and analysis which are considered as possible to make inferences about the experience from verbal accounts (Payne, 2007). The transcribed interviews will be studied in detail to identify whether there are common themes shared among the participants and particular themes expressed by individuals.

Ethical Issues

Interviews were carried out in a private setting. Participants were reassured that they could stop the interview whenever they would like to, or refuse to answer any questions without consequence. The informed consent forms were signed by all participants before the start of the interview. This study involves the personal history and privacy of participants (eg. criminal records, drug abuse patterns). If the observations on the participants are disclosed, the participant's financial standing, employability, or reputation might be damaged or being placed at the risk of criminal or civil liability. Hence, particular attention will be paid to the confidentiality of the study. Only recordings or other materials agreed by all parties will eventually be retained. Participants are assured that they will not be named in subsequent write-ups and materials submitted.

Also, there is a potential risk of invasion of privacy of the participants, they are free to decline to answer any questions that would make them feel uncomfortable. The duty of confidentiality might cause conflict. Hence, where possible, researchers may change some of the identifying details in the report (eg. adopting nicknames instead of real names when needed). In addition, in order to prevent conflicts, researchers will inform participants about the boundaries of confidentiality, such as what will and will not be held as confidential. Since some questions are

personal and may recall their unpleasant memories, hence if the participant feels distressed or agitated, interviewers can also determine whether or not to interrupt or stop the interview.

Data Analysis

The data analysis will be conducted in both content analysis and thematic analysis approach based on the language used, recorded audio of interviews, and textual data of the transcribed audiotapes by the use of MAXQDA 2020, a qualitative analysis software. Content analysis is adopted as it could analyse the textual data, determine the trends and patterns from interviewees through systematic coding and categorising of the use of languages, frequency of words (Vaismoradi, Turunen, & Bondas, 2013). The aim is to discover the characteristics of described life events and experiences from interviewees individually. Besides, thematic analysis is used to analyse and identify patterns in the data set (Vaismoradi, Turunen, & Bondas, 2013) to see whether any of the themes spotted are related to the 4 elements of Social Control Theory (ie. attachment, commitment, involvement, belief) since it is necessary to explore whether there will be commonalities identified among the participants to generate a more persuasive outcome. In vivo coding will also be used to create codes from the text to make sure that the concepts identified stay as close as possible to research participants' own terms and wordings (King, 2008). The perceptions, beliefs, experiences of the participants will be identified and categorized into themes relating to social control theory, drug abuse pattern, and other deviant behaviors.

Results and Discussions

Themes are found regarding participants' perceptions of their experiences of pre-drug abuse and criminality, during drug abuse and criminality, post-drug abuse, and criminality as well as their perceptions towards rehabilitation services in the society. From these interviews, it is known that

participants' experiences are highly related to the context of social, psychological, and environmental influences, while childhood experience plays an essential role in influencing one's behavior (see Appendix A).

TABLE 1 - Descriptive Information of Participants (n = 10).

	Gender	Age First Took Drug	Drug History	Criminal Records	Education Level
Participant 1	Female	13	32	More than one	Form 1
Participant 2	Male	20	30	More than one	Primary
Participant 3	Male	18	40	More than one	Form 3
Participant 4	Male	14	30	More than one	Form 1
Participant 5	Male	15	45	More than one	Primary
Participant 6	Male	15	40	More than one	Primary
Participant 7	Male	20	20	More than one	Primary
Participant 8	Male	20	30	More than one	Form 2
Participant 9	Male	13	30	More than one	Primary
Participant 10	Male	10	20	More than one	Form 3

This study is important in preventing adolescent deviance as well as improving offender rehabilitation, for it adds knowledge to an under-researched population, i.e. ex-drug users and offenders. It examined the motivational factors that prone participants to engage in criminal and deviant behaviors and the connections between illicit drug uses and criminality among 10 drug abusers within the context of Hong Kong. Participants were interviewed about their livelihood prior to drug abuse, particularly childhood experiences; the abuse and other criminal behaviors; and their lifestyles following the abuse and criminality. They have described personal circumstances that dragged them into drug abuse and other criminal behaviors, challenges faced in reintegration, and also the protective factors that strengthen their bonds with the society which help them to withdraw from the abuse and other illegal behaviors successfully.

Positive Relationships between Drug Use and Criminal Behaviors

All 10 interviewees with drug abuse backgrounds mentioned that they participated in criminal activities. The major reason was to economically support their drug-taking routine. Some of them even narrated that a number of criminal activities were committed under an unconscious state of mind, their behaviors were driven by the influences of drugs, so they were unclear about the crimes they committed.

“If I do not take drugs, I do not have to rob.” (Participant 9)

“I don’t have money to buy drugs, so I choose to sell drugs.” (Participant 1)

The interviewees admitted that obtaining money through illegal means are effective ways to safeguard their drug abuse routines, regardless of whether they were facing any economic difficulties since they viewed crimes as the most efficient way to earn a large amount of money quickly within a short period of time., which shows a clear positive relationship that drug use and criminalities are highly correlated.

Attachments with Family Members and Prosocial Peers

Weak Attachments Results show that all participants demonstrated weak social bonds since their childhoods. 7 out of 10 participants reported having loose relationships with their family members since childhood. Every participant has relatively alienated or bad parental-child relationships, and most of them only obtained an educational level up to the primary. Parents were absent most of the time in their childhood to go out for work; siblings have formed their own families at an early stage, so interviewees spent most of the time alone, which shifted them to get to know friends within the public estates and the neighborhood.

“My mother was addicted to gambling, she often lost money and we had no money to eat. I hate my family, especially my mother” (Participant 1)

“My parents ran a shop, so they didn’t usually look after me, I was always left alone” (Participant 10)

With reference to the Social Control Theory, it emphasizes the roles of attachment, commitment, involvement, and belief in the inhibition of deviant activities. Previous research has shown that affective ties with parents as well as the sense of belongingness acquired by the adolescent when joining conventional activities are the major traits linked with the absence of drug consumption (Lopez et al., 2009). The results of this study justify this assumption. Parents act as the locus of social control for youths’ socialization (Mason & Windel, 2002). A secure parent-child attachment is an essential element which serves the role of protecting adolescents from engaging in delinquency. However, our participants demonstrated loose relationships with their family members and did not spend much time together. Parental neglect is a serious issue in the sense that it is a risk factor for forming insecure attachment. In addition, participants have shown weak attachment to their prosocial peers, school life, and the society, further reflecting a weak social bond to their families and social systems, resulting in them shifting their daily activities to gang or triad society members to further involved in drug addictions and criminal activities, showing people with weak social bonds have a higher vulnerability in both drug abuse and criminal activities.

Strengthened Attachments Furthermore, half of the participants (5 out of 10) indicated family responsibilities as the major driving force for quitting drugs and criminal activities, and that they wanted to offer a stable living environment for their spouse and children. Marriage and children

made them realize that they should take up the responsibilities and adopt a normal life so that they could live a stable life. They did not want their children to have a drug addict mother or father.

“I don't want to hurt my son, nor let him have an unfortunate childhood.” (Participant 1)

“First of all, because of the children, they started to grow up and knew that their father was taking drugs.” (Participant 10)

This result is a justification of the importance of fostering secure attachment in putting a stop to deviance. After realizing the family responsibilities, participants determined on withdrawals of drug abuse and adopted normal lives for the benefits of their family members. The lack of affective ties with significant others might prompt them to engage in certain deviant behaviors, hence strengthening these ties would be an effective way to intervene in drug abuse and their participation in criminal activities.

Acceptances of Social Rules & Norms

Failed Acquisitions Most participants in our study demonstrated failure in accepting social rules. Some of them described their state of mind when committing crimes as not being afraid and did not care if they would be arrested. Additionally, they engage in criminal activities most often when they are lacking money. Instead of using traditional methods such as working as a money source, they chose to violate the law.

Besides, nearly half of the participants mentioned that they engaged in drug abuse out of curiosity. They admitted that they have acknowledged the drawbacks of drugs, and understood the risk of addiction, but they were still curious about whether similar situations would happen to

them or people surrounding them were drug addicts as well, so they were eager to find out what drugs actually are and wonder about the feeling of taking drugs.

“There would be no reasons for having difficulties in quitting drugs.” (Participant 2)

“Most gang members are drug addicts, so I wonder what it is, I saved the money I gained and used it to buy drugs.” (Participant 5)

Similarly, four participants shared the drug-taking experiences that they regarded substance abuse as a symbol of power and status. Not only people with higher status in their social circles often engaged in drug abuse but also they considered themselves capable of exerting control over drugs.

“All bosses in the gang engaged in drug abuse.” (Participant 5)

“I would seem to be weak if I did not take drugs.” (Participant 9)

Additionally, a total of 4 participants took drugs to escape from reality or because of boredom. Some participants became addicted to drugs because they were dissatisfied with life circumstances, they made use of drugs as a channel to violate the social norms and to escape from the realities, while some of them believed drugs were able to reduce boredom and viewed drug abuse as a new hobby to them.

“Drugs distracts me from reality, I don’t have to recall unpleasant memories” (Participant 4)

“I don’t know what to do in leisure times, so I just stay at home and take drugs.” (Participant 10)

In accordance with the Social Control Theory, belief refers to the acceptance of the moral values that are generally accepted by the central social-value system (Hirschi, 1969). The results show that these values and norms are not internalized by our participants, thus it is easy for them to violate the rules. They could actually recognize the validity of the rules and laws set by the society but did not bother to break them and only experienced a little degree of guilt while carrying out the deviant behaviors. This implies that they are less rule-bound than other normal people, having weak social ties to the social orders in which the majority of people support, and thus have a higher likelihood to break the rules. The findings are consistent with the theory, for participants possessed twisted values and beliefs when conducting the deviant behaviors, which hindered their abilities on validating the values and norms set by mainstream society.

Socialized Beliefs 4 participants claimed that one of the reasons for choosing to quit drugs was the desire to adopt a new life. Despite the increasing risks of being arrested and the costs of committing crimes, participants thought that choices they could make become fewer and fewer in such a meaningless life. They discovered the lifestyles they spent were hopeless and tedious.

“If I don't take drugs anymore, I don't have to run around like that. There are many ways to make money in the gangs, but the cost is also much higher.” (Participant 6)

“All I know is that I felt so hopeless, everyone was desperate, we always hid and didn't want to see people. Sometimes I become unconscious after eating, even if I didn't avoid others, they didn't want to be with you.” (Participant 7)

They could no longer bear repeating the same thing every day, their desires to obtain a “normal” life then emerged and started to internalize the social and moral values. With having connections

with prosocial peers, the interviewees acquired more socialized beliefs, and then realized their willingness to adopt healthy and normal lifestyles. Quitting drugs was a way for them to stay away from crimes as they no longer needed to make a large amount of money to buy drugs, and they did not need to live under pressure every day anymore.

Commitment and Involvement in Conventional Social Activities

The time investment in conventional social activities and the socialization process affects the vulnerability of an individual to commit deviant and criminal activities. With half of the participants having an educational level till primary and Form 3 (junior secondary) education as the highest level among the participants. Some of them quitted school as they considered going to school as meaningless while some of them dropped out due to behavioral problems, they ended up spending their spare time with youth gangs met in the neighborhood. Correspondingly, participants barely had occupational goals as their main goals were to obtain profitable gains for their drug uses, they engaged in deviant occupations such as selling pirates CDs, sex worker or participating in triad society, indicating they were relatively less socialized in both educational and work perspectives and are more prone to deviant and illegal behaviors as people with beingless likely to risk and to commit crimes when they hold conventional goals such as educational or occupational goals for their futures (Cullen & Wilcox, 2010).

On the contrary, all interviewees claimed that non-governmental organizations (NGOs) changed their lifestyles in various means, for instance, voluntary works, new bondings with social workers and volunteers.

“I will visit the centre whenever I am free, I actively join the activities here like picnics or other outdoor activities, so I don’t have spare time to think of my past, to think about drugs, not anymore.” (Participant 2)

*“The role of being a volunteer is more than just a sustenance, to me, it is my new job.”
(Participant 4)*

Interviewees found a sense of mission particularly from voluntary work; they treated the role of a volunteer as an identity to remind themselves not to return to the previous lifestyle. Furthermore, NGOs support participants to start up a new lifestyle with a wide range of activities to prevent them from being dragged back to drug-taking behaviors.

Through establishing connections with prosocial organizations, including NGOs and churches after successful detoxification, participants themselves regarded their roles in these organizations as important and meaningful towards themselves, some of the participants viewed those voluntary work as missions that they could contribute to society. This finding echoed the research of Briar and Piliavin, and Matza's that having more stakes in conformity, are more likely to avoid involvement in deviant behavior (Jenkins, 1995), proving the idea of commitment in Social Control Theory as valid.

Peer Influence

Peer Deviance Another noteworthy finding is that the effect of peer influence on drug use and criminality is significant. Most of our participants have engaged with delinquent peers such as members of triad gangs since adolescence, and they claimed that those were their only friends during their addiction period as they had no ways of meeting new friends. 8 out of 10 participants mentioned that they grew up in public estates where they could access people with a

triad society background effortlessly, proning them to become one of the gang members, thus taking drugs and engaging in criminal behaviors in their later lives.

“ I lived in an old estate, there were many triad gang members. People living nearby were all these members so I only knew these people.” (Participant 9)

“At the age of 14, I started to meet people with triad gang background, they lived nearby and we grew up together.” (Participant 7)

Most of their time was spent with these delinquent peers which further inhibited them from forming affective ties with the significant others. This high degree of peer deviance also leads to the result of spending less time in conventional activities that could potentially allow them to achieve successful goals that are generally accepted by the public, corresponding to a weak social tie with involvement in pro-social activities. One of the participants recalled that when he needed money urgently, the only way was to approach his friends in the triad gangs and to help them in drug trafficking in order to make a living, as he had no other peers that could help him with the situation.

Peer delinquency has been suggested as a significant factor in explaining adolescents' participation in crime (Schreck et al., 2004). Associating with delinquent peers is a risk factor of teenager's involvement in delinquent activities. According to Erikson's (1963) Stages of Psychosocial Development, adolescents between the age of 12-18 are in a critical period of identity formation by examining beliefs, goals, and values. Since most of the participants' delinquent peers were met during this period, they were hence easily affected by their peers and learned deviant behaviors from them, thus developing twisted and deviant attitudes. It is also reported that engaging in the deviant activities as their friends do was a way to stay in that social

circle, so that they would not lose all of their friends, as well as being treated as abnormal or even bullied, such attitudes and influences continue into adulthood.

Correspondingly, peer influence is spotted to be the most common reason among the participants explaining why they engaged in drug addiction in the present study. All participants claimed that peers were definitely related to their drug addict behavior. They were usually invited by friends, treated drug abuse as a common interest and as a kind of leisure activity when hanging out.

“I would be left out if I did not follow them and take drugs together.” (Participant 6)

“Everyone is taking drugs, it does not make any sense if I am not doing it.” (Participant 9)

Moreover, peer influence constitutes a huge risk factor in relapse. 8 out of 10 interviewees agreed that whenever they re-established connections with the people in the old social circles after being released from any rehabilitation services, they were easily dragged back to the previous lifestyles again such as engaging in crimes and drug-taking behavior as they are tempted by their peers and to fit in that particular social circle. A participant recalled his experience in peer temptation, in which he was affected and relapsed immediately after release:

“I relapsed again after I hung out with my old friends following the release from the rehabilitation service.” (Participant 2)

Since participants often had difficulties meeting new peers, there was not much difference in their social circle, they still needed to face the same people even if they wanted to quit drugs.

“It is not easy to get to know friends outside my own social circle. If you are lucky enough to get to know friends in another circle, you have a better chance of successful abstinence.”

(Participant 2)

Not being able to stop these connections with the deviant peers makes the process of quitting drugs much more difficult, as they could be easily tempted once they saw them taking drugs in front of them. Staying in the same social circle with similar lifestyles inhibits them from abstinence.

Prosocial Peers 50% of the participants mentioned establishing a new, healthy hobby, habit, or a daily routine helped keeping them away from drugs. Moreover, they claimed they no longer maintain intimate relationships, or hang out with people in their old social circles, but they would run into their old friends during voluntary work.

“During pandemics, I stay at home most of the time, may go hiking with friends sometimes, and usually do healthy activities.” (Participant 8)

“I am currently working as a part-time minibus driver. I feel so relieved with this new style of living. I will also go fishing with my friends in my leisure times.” (Participant 10)

The participants enjoyed the quality time they had with their significant others, such as friends that were newly met, families, or even worked in legal businesses, and preferred the brand new way of living a lot more than the previous one.

Besides, two participants also specifically attributed the help of social workers, who did not give them up and offered help consistently and their kindness motivated them to adopt a new life.

“I met some social workers who were willing to help me. I didn't think I would be able to quit it. It's all due to the help of social workers around me.” (Participant 8)

“The social worker was worried that it would be dangerous for me to quit drugs on my own in the mainland, so she told me to go back to Hong Kong and accompany me to see the doctor. She waited for me for several hours at the train station the next day.” (Participant 10)

Since most of their friends were also drug addicts and they had poor relationships with family members, they had never received care and encouragement from others during their addiction period. After meeting the social workers, they felt that the social workers cared and truly wanted to help them. Thus, they could see hope and did not want to disappoint them. These results further proved that affective ties with significant others are of paramount importance in preventing drug use and other deviant behaviors, showing that support from social workers was one of the motivations in facilitating participants in quitting drugs.

Challenges faced in Quitting Drugs

Drugs bring tremendous health issues to drug addicts and these symptoms often become more and more obvious as age increases.

“After being released from prisons, I was thinking, I am 60 years old already. If I took drugs again, my body can no longer bear it. I have three drug addictions, Midazolam, Heroin, and Methadone. If I continue to eat, I will eat till I die.” (Participant 6)

Dealing with health issues is a major driving force for quitting drugs, but withdrawal symptoms make their body conditions even worse, acting as the first challenge participants need to face when trying to quit drugs. All participants reported that craving was the biggest challenge during

the process of abstinence. As an individual becomes dependent on drugs, the body gradually adapts to the presence of drugs in the system. Hence, quitting drugs abruptly after long-term use can cause a series of withdrawal symptoms, including tearing eyes, runny nose, insomnia, vomiting, etc.

“Quitting drugs is a difficult process, and it is necessary to endure intense physical pain to stop from taking heroin.” (Participant 4)

Since physical withdrawal symptoms can be gradually reduced after several weeks, and even faster for young people, dealing with the mental addiction was the next thing they needed to overcome. Some participants reported that they were arrested and forced to join the Compulsory Placement Programme in the correctional service centre due to the inability to control themselves to stay away from drugs.

“It is actually very difficult. Few people can quit suddenly like me. You must face your demons by your own will.” (Participant 1)

“I knew it was a blind alley. I often told myself that I would not eat again tomorrow. But as soon as I woke up, I went out to search for heroin. I was always fooling myself.” (Participant 7)

Furthermore, about one-third of the interviewees also mentioned that the reason behind relapse is an immature mindset.

*“Because I am still young at that moment, I could not bear the boredom in daily life.”
(Participant 3)*

“I think if I just take it once more, I won’t be addicted to it.” (Participant 10)

The interviewees perceived themselves as very young individuals whose health conditions could support their drug abuse habits and they were capable of controlling themselves to take or quit drug-taking. Moreover, most of the withdrawal symptoms would disappear after joining the compulsory placement program, so the psychological dependence of participants towards drugs became the major difficulty, as a result, it is much easier for them to re-engage in drug-taking.

Effectiveness of Rehabilitation Services

Half of the participants considered those addiction treatment centres and prisons as ineffective. Since these services are compulsory in nature, the act of withdrawal drug abuse is against their wills, they are either reluctant to quit drug abuse or did not find the necessity to quit.

“I know I must relapse after release. You want me to quit, I must do the opposite. Once I am released from prison, the first thing I will do is to take drugs.” (Participant 1)

“Cannot help even a bit” (Participant 4)

On the other hand, more than half of the participants regarded the help of NGOs as an effective medium in drug abuse withdrawal and re-integrating into society after they had successfully quitted drug-taking.

“Can provide a pathway, a hope to people with drug abuse.” (Participant 4)

“There are a lot of activities like visiting the elderly homes, going barbecues and yum cha with other volunteers and the social workers here.” (Participant 7)

There are voluntary works to promote anti-drug messages near methadone centres, participants indicated that such outreach campaigns were useful because positive messages were spread to

current drug addicts from those who have successfully quitted drugs and re-integrated back into society, it is much more convincing than other measures. In addition, NGOs are effective as they provide rehabilitated offenders with more diversified daily activities and thus a wider social circle with those who had similar life experiences.

Types of Crimes Committed by Drug Users

Previous research studying institutional misconducts among state prisoners (Flanagan, 1983) has suggested that pre-prison experience, such as a history of drug abuse, has a prevalent influence on institutional behavior, particularly violent behaviors. On the other hand, our study reflects a different result from the third hypothesis, that no clear relationship could be found in accordance with the frequency of non-violent and violent drug-related crimes. One of the possible reasons for generating such results is the limitation faced during the in-depth interviews. Most participants could not explicitly recall both the total number of criminal records they had and the type of offenses regarding that particular record, hence, the data collected is only confined to those the participants remembered. It is discovered that every participant had engaged in drug trafficking in order to earn a great profit to sustain their drug abuse routines. Although all of the participants reported they had engaged in non-violent drug-related crimes, no evidence was found to prove that taking drugs prevents them from engaging in violent crimes. A participant revealed the reason for participating in violent crimes such as fighting in a public place was to strive for the benefit for the triad gang, not because of drug abuse, and mentioning that when other triad gangs members participated in violent crimes such as robbery and assault were under conscious control, further suggesting that the relationship between drug use and specific types of crimes have no clear relationship.

Gender Differences in Deviances

In general, the findings of the study indicate that drug use and criminal activities are closely related, and that weak social bonding is an important contributing factor for deviance. Gender differences are spotted in accordance with the motivations for drug addiction and criminal behaviors and the utilization of social control. Studies have found that relationships with families and peers exert a stronger influence over delinquency on females than in males, particularly in the stage of adolescence (Giordano & Cernkovich, 1997), and emotional bonds to parents could protect young females more than young males from both drug-related and alcohol-related offenses (Booth et al, 2008). Similar results can be found in our findings despite only 1 female sample being available. The female participant narrated that the major motivation for her to engage in drug abuse was the unsatisfied romantic relationship with her husband, followed by the inharmonious parental child relationship with her mother, that is totally different from those motivations obtained from the male samples, which the majority claimed to be peer influences. In addition, studies indicated that male adolescents have significantly higher degrees of violent, non-violent, and general delinquency than female adolescents (Chan, 2019), our interviews in fact support this argument in terms of gender in which a 9:1 ratio is found in the number of male participants to female participants randomly recruited.

To have a little sum up, the results of the current research are consistent with the assertion of the Social Control Theory, that individuals with weak social bondings are prone to both drug use and criminality. Our study has also found that weak social bondings of individuals can cause shared risk factors for both drug use and criminality by examining how the Social Control Theory affects an individual to commit deviant and criminal behaviors, contributing to the close relationship of drug use and criminality and implying that drug use could lead to other criminal

activities or vice versa. It is crucial to recognize the common risk factors among the two activities so as to further consolidate the understanding of the coexistent behaviors of drug abuse and criminality from ex-drug addicts and ex-offenders as well as how these shared risk factors increase the probability for them to engage in both illicit drug abuse and criminal behavior.

Implications of the Findings

According to our findings, it is suggested that the roles of rehabilitation services and social workers are important in helping ex-drug abusers and ex-offenders to reintegrate into the society. Most of the participants in this study are regular volunteers at the SRACP, they are motivated to stay there and become regular volunteers due to the fact that they found the services and social workers there had acted as protective factors by improving their livelihoods after their release from prisons and helped them a lot during the road to abstinence and reintegration. A participant revealed that when the social worker accompanied him to the hospital, he felt that he was being cared for and it served as a great motivation to quit drugs. In addition, it is claimed that services provided by the organization nowadays are much more effective than they were in the past according to the participants' past experience. This is due to the participation of ex-drug abusers and ex-offenders as volunteers, which facilitates the exchange of information between the social workers and service users which offers a better channel of communication for the two groups of people, as sometimes it is hard for the social workers to understand their circumstances completely without concrete experience in taking drugs or participating in criminal activities. Their knowledge and past experience in the triad gangs and taking drugs can help the social workers to formulate better approaches that are more on point, as well as narrowing the gap between service providers and users. Therefore, inviting more people with drug abuse or

criminal backgrounds to become volunteers for future practice could be an effective method in enhancing the quality of services in these organizations.

Using methadone as a harm reduction treatment has been widely adopted by many countries.

Organizations like the United Nations Office on Drugs and Crime (UNODC) claimed the Methadone Treatment Programme (MTP) in Hong Kong as an effective alternative for drug use and encourage detoxification in various aspects, which are preventing the spread of Human Immunodeficiency Virus (HIV); providing a channel for drug abusers to remain as a productive member in the society; and reducing the likelihood of drug abusers to commit crimes to obtain drugs. Figures from UNODC showed that crime rates of drug abusers before and after participating in the MTP dropped by 22%, while over 70% of the participants in the programme were employed (UNODC, 2009), that has created a much safer condition for both the society and the drug abusers themselves. Yet, this study generated an interesting result. Most of the participants had an opposing view that they regarded methadone as an ineffective detoxification method. As the methadone clinic is operated by the government, it is provided to the drug abusers at a very low cost, together with the harm reduction effect of methadone, it could reduce the tendency of drug consumption of drug abusers and prevent drug abusers from committing crimes to obtain drugs. In spite of the effect of harm reduction and the use of methadone is monitored by the government, the harms and problems it brought could not be overlooked. Narrating from the outreach campaign experience from the participants, they had come across many current drug abusers who have shifted the drug dependence from other forms of illicit drugs to methadone, in other words, they are addicted to methadone. Moreover, methadone has a long-lasting effect, which is even stronger than traditional illicit drugs, thus making drug abusers more likely to rely on it and easily be addicted. Similarly, participants also recalled some of the

drug abusers they knew would take both methadone and heroin at the same time to maximize the feelings of euphoria. On the whole, methadone to a large extent has failed in facilitating drug addicts from drug withdrawal unless the drug abuser is very determined to withdraw drug addiction voluntarily.

Interestingly, most of our participants recruited had triad gangs backgrounds, in which they claimed to have entered naturally due to the fact that they grew up in public estates where many gang members lived nearby. Meeting normal friends and prosocial peers that seem to be deservedly for normal children were particularly difficult for them. The living environment is not something they can choose, implying that they were in fact engaged with delinquent peers in a passive manner. Hence, it is crucial to identify this at-risk population in an earlier stage, before they were driven to a deviant or even criminal pathway.

Limitations and Suggestions for Further Research

The present study has several notable limitations. Firstly, the results may not be representative of all ex-drug users and ex-offenders in Hong Kong due to the limited data source available. The present study has only recruited 10 participants, future research could adopt a larger sample size which might be able to generate a more accurate result. Besides, in terms of gender distribution, since all participants recruited are male, the gender influence of social bonding effects on drug use and criminality was not able to be examined. Statistics presented that women had a lower tendency to be found having drug abuse problems (Census and Statistics Department, 2016). Similarly, in current research, male participants dominate the results of the research, only 1 female is available in the sample, and provides an inconsistent pattern in the response for drug abuse compared to the male participants. Thus, it is suggested

that further studies regarding drug abuse and criminality can recruit more female participants or specifically conduct research on female ex-drug abusers and ex-offenders to discover different perceptions and patterns of drug-taking of women drug abusers.

In addition, a further limitation of the present study is that the background of the participants may not provide a result that is aligned with the current Hong Kong society. The recruited participants are all aged over 50 years old, implying that they were born in the 1960s and 1970s while the first time they encountered drugs was actually in the 1980s or 1990s. The structure and norms of the society of Hong Kong have changed and developed a lot, the environment growing up and drug abuse habits could be completely different from those born in the 1980s onwards. According to our participants, the quality of drugs has also changed a lot which might also alter people's drug abuse patterns. For instance, in recent decades hidden drug abuse has become the mainstream of drug addicts, so that the reasons for participating in illicit drug abuse may vary. More studies could be done on obtaining samples from a younger generation to examine impacts on drug addicts born after the 1980s so as to compare and contrast the results of different generations.

Furthermore, the data collected is confined to the Hong Kong context only, hence, it is uncertain whether people who engaged in drug abuse in other regions will also provide a similar result. Future studies may include non-local participants such as ethnic groups to obtain multiple perspectives and to examine whether there are cultural differences in the influences of social bondings. Comparisons between Hong Kong and other regions can be drawn in such a way.

Additionally, more studies focusing on the relationship between illicit drug use and specific crime types could be carried out in the future. Although we could not obtain a significant

relationship between drug use with violent crimes and non-violent crimes in the current study, we were able to bring to the light that participants tend to commit crimes that can generate huge economic rewards in order to sustain their drug patterns. Violent crimes such as robbery and fighting in a public space were also committed sometimes by drug abusers, therefore the linkage between different crime types and drug abuse could also be consolidated in future studies so as to better relate drug abuse and criminality.

Conclusion

This study is conducted as ex-drug users and offenders are under-researched populations. To examine the relationship between drug abuse and criminal behaviors would be effective in preventing adolescent deviance as well as improving offender rehabilitation. The overall finding of the present study has indicated that there is a positive relationship between drug use and criminal activities, and those weak social bondings can greatly contribute to both drug abuse and criminality. All participants involved have demonstrated co-occurrence of drug use and criminal behaviors, with weak social bondings since their childhood, which is consistent with the Social Control Theory. The study has examined the perceptions of ex-drug abusers and ex-offenders on their motivations to commit and withdraw from certain deviant acts, consequences of their offenses, evaluations over the services of compulsory drug treatment correctional centers and NGOs. Linkages between drug abuse and criminality as well as common risk factors contributing to both drug abuse and criminal behavior are able to be identified. Results indicated that most of the ex-drug users had weak affective ties with both parents and prosocial peers, failed to accept social rules, and uninvolved in conventional activities. Peer influence served as a huge contributing factor for engaging in both drug-taking as well as criminal activities, while it is also essential in helping them to quit drugs. The major reasons for quitting drugs and criminal

activities include family responsibilities and the encouragement and support from prosocial peers such as social workers. These findings have proposed some implications for future studies relating to the associations between illicit drug use and criminality, more research could be done especially on the linkage of specific crime types and drug abuse behavior, as it remains unclear, as well as evaluating the effectiveness of reintegration of ex-drug abusers and ex-offenders of rehabilitation and detoxification services.

References

Abbey A., Zawacki T., Buck P.O., Clinton A.M., & McAuslan P. (2004). Sexual assault and alcohol consumption: What do we know about their relationship and what types of research are still needed? *Aggression and Violent Behavior, 9*(3), 271-303. doi:10.1016/S1359-1789(03)00011-9

Agnew, R. (1985). Social Control Theory And Delinquency: A Longitudinal Test. *Criminology, 23*(1), 47-61. <https://doi.org/10.1111/j.1745-9125.1985.tb00325.x>

Akers, R. L., & Lee, G. (1999). Age, social learning, and social bonding in adolescent substance use. *Deviant Behavior, 20*(1), 1–25. <https://doi.org/10.1080/016396299266579>

Alarid L.F., Burton J.V.S., & Cullen F.T. (2000). Gender and Crime among Felony Offenders: Assessing the Generality of Social Control and Differential Association Theories. *Journal of Research in Crime and Delinquency, 37*(2), 171-199. <https://doi-org.ezproxy.cityu.edu.hk/10.1177/0022427800037002002>.

Binswanger, I. A., Nowels, C., Corsi, K. F., Glanz, J., Long, J., Booth, R. E., & Steiner, J. F. (2012). Return to drug use and overdose after release from prison: a qualitative study of risk and protective factors. *Addiction science & clinical practice, 7*(1), 3. <https://doi.org/10.1186/1940-0640-7-3>

Binswanger, I. A., Stern, M. F., Deyo, R. A., Heagerty, P. J., Cheadle, A., Elmore, J. G., & Koepsell, T. D. (2007). Release from prison—a high risk of death for former inmates. *New England Journal of Medicine*, *356*(2), 157-165. DOI: 10.1056/NEJMsa064115

Blanc, M. L. (1994). Family, school, delinquency and criminality, the predictive power of an elaborated social control theory for males. *Criminal Behaviour and Mental Health*, *4*(2), 101–117. <https://doi.org/10.1002/cbm.1994.4.2.101>

Booth J.A., Farrell A., & Varano S.P. (2008). Social Control, Serious Delinquency, and Risky Behavior: A Gendered Analysis. *Crime & Delinquency*, *54*(3), 423-456. <https://doi-org.ezproxy.cityu.edu.hk/10.1177/0011128707306121>

Brown, C., & Lowis, M. J. (2003). Psychosocial development in the elderly: An investigation into Erikson's ninth stage. *Journal of Aging Studies*, *17*(4), 415–426. [https://doi.org/10.1016/s0890-4065\(03\)00061-6](https://doi.org/10.1016/s0890-4065(03)00061-6)

Cardeli E., Sideridis G., Lincoln A.K., Abdi S.M., & Ellis B.H. (2020). Social bonds in the diaspora: The application of social control theory to Somali refugee young adults in resettlement. *Psychology of Violence*, *10*(1), 18-29.

[doi:http://dx.doi.org.ezproxy.cityu.edu.hk/10.1037/vio0000259](http://dx.doi.org.ezproxy.cityu.edu.hk/10.1037/vio0000259).

Census and Statistics Department of Hong Kong (2019), Drug Situation in Hong Kong. <https://www.censtatd.gov.hk/hkstat/sub/sp400.jsp?productCode=FA100030>.

Census and Statistics Department of Hong Kong (2016). Drug abuse situation in Hong Kong in 2015. *Hong Kong Monthly Digest of Statistics*.

<https://www.statistics.gov.hk/pub/B71608FC2016XXXXB0100.pdf>

Chan H.C (2019). Violent Offending, Nonviolent Offending, and General Delinquency: Exploring the Criminogenic Risk Factors of Hong Kong Male and Female Adolescents.

International Journal of Offender Therapy and Comparative Criminology, 306624, 1-24.

<https://doi.org/10.1177/0306624X19881917>

Coomber R., Donnermeyer F.J., McElrath K., Scott J. (2017). Crime in Definition of. In *Key Concepts in Crime and Society*. SAGE Publications Ltd.

<http://dx.doi.org.ezproxy.cityu.edu.hk/10.4135/9781473919693>.

Costelloo, B. J., & Laub, J. H. (2019). *Social Control Theory: The Legacy of Travis Hirschi's Causes of Delinquency*, 3:21-41. <https://doi.org/https://doi.org/10.1146/annurev-criminol-011419-041527>

Cullen F.T. & Wilcox P. (2010). Hirschi, Travis: Social Control Theory. In *Encyclopedia of Criminological Theory*, (pp 452-459). SAGE Publications, Inc.

<http://dx.doi.org/10.4135/9781412959193.n124>

Davis K.C. (2010). The Influence of Alcohol Expectancies and Intoxication on Men's Aggressive Unprotected Sexual Intentions. *Experimental and Clinical Psychopharmacology*, 18(5), 418-428.

DOI: 10.1037/a0020510

Erikson, E. H., & Erikson, K. T. (1957). The Confirmation of the Delinquent. *Chicago Review*, 10(4), 15. <https://doi.org/10.2307/25293266>

Giordano, P. C., & Cernkovich, S. A. (1997). Gender and antisocial behavior. In D. M. Stoff, J. Breiling, & J. D. Maser (Eds.), *Handbook of Antisocial Behavior* (p. 496–510). John Wiley.

Gottfredson M.R. (2011) The Empirical Status of Control Theory in Criminology. In Cullen F.T., Wright J., Blevins K. (Eds.), *Taking Stock: The Status of Criminological Theory*, (3rd edition, pp77-101). Transaction Publishers.

https://books.google.com.hk/books?id=_ojaQpx60uUC&printsec=frontcover&hl=zh-TW#v=onepage&q&f=false

Golafshani, N. (2015). Understanding Reliability and Validity in Qualitative Research. *The Qualitative Report*. <https://doi.org/10.46743/2160-3715/2003.1870>

Goldstein, P. J. (1985). The Drugs/Violence Nexus: A Tripartite Conceptual Framework. *Journal of Drug Issues*, 15(4), 493–506. <https://doi.org/10.1177/002204268501500406>

Hill A., Habermann N., Berner W., & Briken P. (2006). Psychiatric Disorders in Single and Multiple Sexual Murderers. *Psychopathology*, *40*(1), 22-28. DOI: 10.1159/000096386

Jenkins P.H. (1995). School Delinquency and School Commitment. *Sociology of Education*, *68* (3), 221-239. <https://doi.org/10.2307/2112686>

Kabiri, S., Willits, D. W., Shadmanfaat, S. M. S. (2019). A Multitheoretical Framework for Assessing Performance-Enhancing Drug Use: Examining the Utility of Self-Control, Social Learning, and Control Balance Theories. *Journal of Drug Issues*, *49*(3), 512–530. <https://doi.org/10.1177/0022042619839935>

King, A. (2008). In vivo coding. In L. M. Given (Ed.), *The SAGE Encyclopedia of Qualitative Research Methods*, pp.473. Thousand Oaks; SAGE Publications, Inc. doi: 10.4135/9781412963909.n240.

Kouri, E. M., Pope, H. G., Powell, K. F., Oliva, P. S., & Campbell, C. (1997). Drug Use History and Criminal Behavior among 133 Incarcerated Men. *The American Journal of Drug and Alcohol Abuse*, *23*(3), 413–419. <https://doi.org/10.3109/00952999709016886>

Lasley J.R. (1988). Toward a control theory of white-collar offending. *Journal of Quantitative Criminology*, *4*(4), 347-362. <https://doi-org.ezproxy.cityu.edu.hk/10.1007/BF01065344>.

Liamputtong, P. (2007). *Researching the Vulnerable*. <https://doi.org/10.4135/9781849209861>

MacCoun, R., Kilmer, B., & Reuter, P. (2003). Research on drugs-crime linkages: The next generation. *Toward a drugs and crime research agenda for the 21st century*, 65-95.

MacDonald, J. M. (1999). Violence and drug use in juvenile institutions. *Journal of Criminal Justice*, 27(1), 33–44. [https://doi.org/10.1016/s0047-2352\(98\)00033-6](https://doi.org/10.1016/s0047-2352(98)00033-6)

Marcos, A. C., & Bahr, S. J. (1988). Control Theory and Adolescent Drug Use. *Youth&Society*, 19(4), 395–425. <https://doi.org/10.1177/0044118x88019004003>

Monforte, J. and Spitz, W., (1975). Narcotic Abuse Among Homicide Victims in Detroit, *Journal of Forensic Sciences*, 20(1), 186-190, <https://doi.org/10.1520/JFS10257J>.

Orcutt, J.D. (2007). Crime, Social Control Theory of. In *The Blackwell Encyclopedia of Sociology (1-4)*. Oxford. <https://doi-org.ezproxy.cityu.edu.hk/10.1002/9781405165518.wbeosc156>.

Payne, S. (2007). Qualitative methods of data collection and analysis. *Research Methods in Palliative Care*, 139–162. <https://doi.org/10.1093/acprof:oso/9780198530251.003.0009>

Perry J.L., Carroll M.E. (2008). The role of impulsive behavior in drug abuse. *Psychopharmacology*, 200, 1-26. DOI 10.1007/s00213-008-1173-0.

Polakowski, M. (1994). Linking self-and social control with deviance: Illuminating the structure underlying a general theory of crime and its relation to deviant activity. *Journal of Quantitative Criminology*, *10(1)*, 41–78. <https://doi.org/10.1007/bf02221008>

Nagasawa, R., Qian, Z., & Wong, P. (2000). Social Control Theory as a Theory of Conformity: The Case of Asian/Pacific Drug and Alcohol Nonuse. *Sociological Perspectives*, *43(4)*, 581–603. <https://doi.org/10.2307/1389549>

Schinke, S., Schwinn, T., Hopkins, J., & Wahlstrom, L. (2016). Drug abuse risk and protective factors among Hispanic adolescents. *Preventive medicine reports*, *3*, 185-188. <https://doi.org/10.1016/j.pmedr.2016.01.012>

Schreck, C. J., Fisher, B. S., & Miller, J. M. (2004). The social context of violent victimization: A study of the delinquent peer effect. *Justice Quarterly*, *21(1)*, 23–47. <https://doi.org/10.1080/07418820400095731>

Seddon T. (2006). Drugs, Crime and Social Exclusion: Social Context and Social Theory in British Drugs -- Crime Research. *British Journal of Criminology*, *46(4)*, 680-703. [doi:10.1093/bjc/azi079](https://doi.org/10.1093/bjc/azi079).

Smye, V., Browne, A. J., Varcoe, C., & Josewski, V. (2011). Harm reduction, methadone maintenance treatment and the root causes of health and social inequities: An intersectional lens

in the Canadian context. *Harm Reduction Journal*, 8(1), 17. <https://doi.org/10.1186/1477-7517-8-17>

Tam C.H., Kwok S.I., Lo T.W., Lam S.H., & Lee G.K. (2018) Hidden Drug Abuse in Hong Kong: From Social Acquaintance to Social Isolation. *Frontiers in Psychiatry*, 9, 457- 457. <https://doi.org/10.3389/fpsyt.2018.00457>.

Thompson, E. A., Smith-Dijulio, K., & Matthews, T. (1982). Social control theory: Evaluating a model for the study of adolescent alcohol and drug use. *Youth & Society*, 13(3), 303–326. <https://doi.org/10.1177/0044118x82013003004>

United Nations Office of Drugs and Crime (2009). Methadone Treatment in Hong Kong: History, Strategy and Results. https://www.unodc.org/documents/southeastasiaandpacific/china/MMT_in_Hongkong.pdf

United Nations Office of Drugs and Crime (2020). World Drug Report Booklet 1&2. <https://wdr.unodc.org/wdr2020/index.html####>.

Uutela, A. (2001). Drugs: Illicit Use and Prevention. *International Encyclopedia of the Social & Behavioral Sciences*, 3877-3881. <https://doi.org/10.1016/B0-08-043076-7/03886-9>.

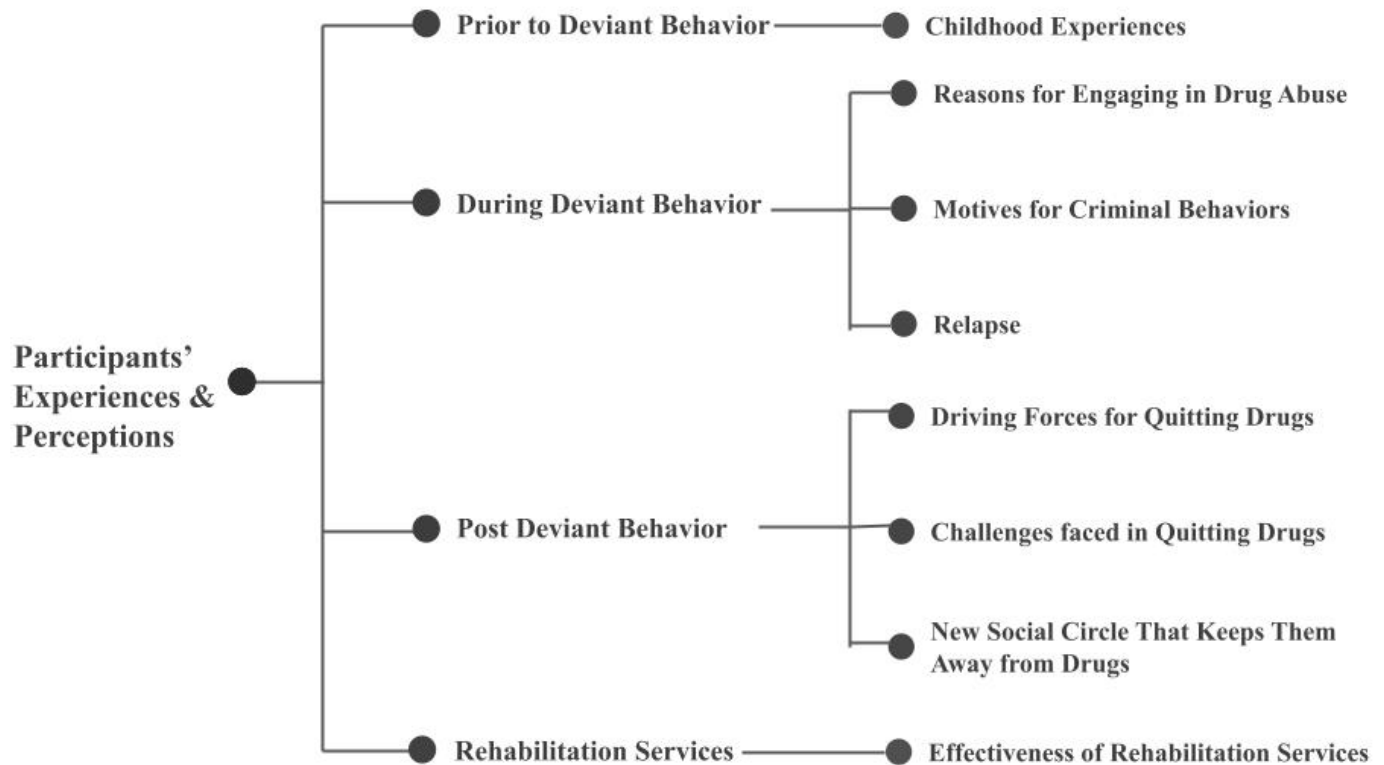
Vaismoradi M., Turunen H., & Bondas T. (2013). Content analysis and thematic analysis: Implications for conducting a qualitative descriptive study. *Nursing & Health Sciences, 15*(3), 398–405. <https://doi.org/10.1111/nhs.12048>

Weiden, P. J., & Olfson, M. (1995). Cost of relapse in schizophrenia. *Schizophrenia Bulletin, 21*(3), 419-429. <https://doi.org/10.1093/schbul/21.3.419>

Wiatrowski, M. D., Griswold, D. B., & Roberts, M. K. (1981). Social Control Theory and Delinquency. *American Sociological Review, 46*(5), 525. <https://doi.org/10.2307/2094936>

Appendix A

Figure 1 Conceptual Model of Drug Use and Criminality



Appendix B

Proposed Interview Questions

Structured questions will be related to participants' background, (eg. gender, age started drug abuse)

Unstructured questions to be asked are divided into (i) relating to the participants' experiences prior to the deviant behavior, including both drug use and other deviant behavior; (ii) the deviant behavior itself; (iii) during the deviant behavior; (iv) post-offense perceptions.

(i) relating to participants' experiences prior to the deviant behavior, including both drug use and other deviant behavior

- Tell me something about your childhood?
- Where did you usually make friends?
- What do you usually do in your leisure time?

(ii) the deviant behavior itself

- What is your drug-taking habit/pattern?
- How long is your drug history?
- What offenses did you commit?
- How often did you commit that behavior?

(iii) during the deviant behavior

- What had dragged you into drug-taking?
- How was your "first bite" of the drug?

- What makes you continue using drugs? What was its effect on you?
- What had led you to commit other criminal behavior?
- Do you think drug-taking has caused you to commit that behavior?
- What were you thinking at that moment?
- What had caused you to continue the criminal activities?
- What drove you and how did you quit using drugs/ committing offenses? Did you relapse?
- What have you gained from those deviant behaviors?

(iv) post-offense perceptions

- What do you think is the biggest change after your release and the past?
- Did your social circle change a lot?
- How did your lifestyle change?
- How do you feel when you look back at yourself when committing the offenses?
- Any improvements you found in rehabilitation?
- What difficulties did you encounter during rehabilitation?

建議的面試問題

結構性問題將與參與者的背景有關（例如性別，開始吸毒的年齡）

要提出的非結構性問題分為（i）與參與者出現偏差行為之前的經歷有關，包括吸毒和其他偏差行為；（ii）偏差行為本身；（iii）偏差行為期間；（iv）犯罪後的看法。

（i）與參與者發生偏差行為之前的經歷有關，包括吸毒和其他偏差行為

- 可以告訴我一些有關您的童年的事嗎？
- 你通常在哪裡交朋友？
- 您通常在閒暇時間做什麼？

（ii）異常行為本身

- 您的吸毒習慣/模式是什麼？
- 您的吸毒史有多久了？
- 您犯了哪些罪行？
- 您多久犯一次該行為？

（iii）偏差行為期間

- 是什麼讓您沉迷於吸毒？
- 您的“第一口”毒品怎麼樣？
- 是什麼讓您繼續使用毒品？它對您有什麼影響？
- 是什麼導致您實施其他犯罪行為？

- 您認為吸毒是否導致您犯下了該行為？
- 那時候你在想什麼？
- 是什麼原因導致您繼續犯罪活動？
- 是什麼驅使您，您是如何戒毒/停止犯罪的？你/重新吸食/重犯了嗎？
- 您從這些偏差行為中學到了什麼？

(iv) 犯罪後的看法

- 您認為完成刑期後和過去最大的變化是什麼？
- 您的社交圈發生了很大變化嗎？
- 您的生活方式如何改變？
- 現在回首自己犯罪時感覺如何？
- 您在更生計劃有得到什麼改善嗎？
- 康復期間遇到什麼困難？

Appendix C

Transcript

Participant 1

問：首先想問一些背景資料，請問過往有犯罪紀錄及被判入獄的經歷嗎？

答：兩者都有。

問：可否告訴我們一些有關你童年成長的經歷？

答：我的成長環境是好的，但有一位嗜賭的媽媽，因經常輸錢而令我們沒錢吃飯，從小就要捱。所以，我非常之不喜歡我的家，特別是媽媽。爸爸從事行船，媽媽負責管理家事，令我想離開這個家。為了離開家裡，認識了一些朋友，亦已經開始工作，還未濫藥時已經在工作。透過工作認識了朋友，喜歡了朋友的弟弟，算不上很喜歡，但為了離開家，便決定與他一起。與他結婚後並沒有很開心，因為對他只有一點喜歡，加上家裡的媽媽，覺得自己好慘，不快樂。不快樂的情況下受到朋友的慫恿，吸食第一口白粉。吸食途中金錢不足，因此去賣白粉。其後因賣白粉而被捕，被判去戒毒所。出來以後沒有錢買白粉，所以投身做性工作者來賺取金錢。

問：明白。哪裡童年時有上學嗎？

答：我只讀到中一。

問：你剛才提到你不太喜歡回家，哪你平時會和朋友去哪？做甚麼？

答：我經常去朋友家，在我家對面。我朋友的家，即我現在老公的家，比較複雜，有很多陌生人。媽媽經常要我回家，扯着我的衣服帶我回家，所以我非常憎恨我媽媽，直到現在依然一樣。雖然現在我已沒有吸食白粉 18 年，但我與家人的關係依然很差，我認為我要十分努力才能修補與家人的關係。如何才能夠修補關係呢？就是要由我自己做好，即要循規蹈矩，好像戒毒般。為何我要戒毒？就是因為我不想被捕。我不犯法，不吸毒，我便不會被捕。

問：明白，你第一次接觸毒品時的年齡是？

答：13。

問：13 歲那時，是朋友帶你去吸食毒品。即你的朋友主要都是在家附近認識的嗎？

答：是呀，樓上樓下也有。第一次吸食的感覺十分興奮，後來就算你不找毒品，毒品也會來找你。

問：即是你覺得第一次吸食白粉是一個開心的經歷？

答：是呀，可以逃避現實，不用想太多，可以沉醉在這個世界，不用思考。

問：哪你在第一次吸食白粉時知道毒品的禍害嗎？知道是不好的東西嗎？

答：知道呀，第一口白粉便注定一生悔恨，對這句話很深刻。很矛盾，我覺得自己不會，但我亦看到很多人也戒不到。不過顧不了那麼多，我只顧可以逃避現實，可以沉醉在自己的世界，不用思考。

問：你記得你是怎樣發現自己上了癮嗎？

答：上了癮很久了，因為我當時有錢吃白粉，但出獄後便沒有錢吃了。當時感到很空虛，我們這些吸毒的沒有朋友，其他人都害怕我們，唯一的朋友就是一起吸毒那些，所以很自然便會重回那個圈子。你可不可以重覆一次你的問題？

問：你是怎樣發現自己上了癮，離不開毒品？因為許多人在第一次吸食白粉時都認為自己不會上癮。

答：有一次，在沒有錢，沒吸食毒品的時候，整個人又很辛苦，不停流鼻水，那我就知道自己已經上了癮。

問：即是出現一些身體狀況時便知道上了癮。

答：對呀，有一些很強的生理反應。

問：那你是為了抑制這些生理反應而繼續吸食毒品嗎？

答：你必須要繼續吸食白粉，要不然便會繼續不停流鼻水，經常打呵欠，感到疲累，總之不吸食白粉便沒有精神和氣力。

問：你剛才都有提到自己有犯罪記錄和被判入獄，可否講一下是甚麼原因導致的？

答：皆因是毒品。兩次都因藏毒被判入戒毒所。

問：你第一次被捕的心情是如何？

答：非常害怕，不知道監獄是如何。不過女子監獄真的很差，比我想像更差。

問：是怎樣的環境？

答：整群女囚犯在一起，懲教署的姑娘要求我們做甚麼，我們便要做甚麼，沒有自由。而且如果你人際關係差，不懂與其他囚犯溝通，她們會欺負你。

問：都是一個小型社會。判入戒毒所，其實是強制戒毒的一種，你認為那時最難是甚麼？
心理還是生理比較困難？

答：其實我當時並未準備戒毒，是他們強迫我的，我告訴我自己，你這刻要我戒我便戒，但出獄後我一定會繼續吸食毒品。

問：即當其時你並不想戒毒？

答：是呀，不想。當我第二次坐牢時，我便成功戒毒了。

問：意思是第二次出獄後便沒有再吸食及毒品？

答：可以這樣說。我一開始出獄時是有再吸食毒品的，因始終是強制戒毒，不是自願的。但因為我家庭的環境因素，我的老公也是吸食毒品的，而我的兒子就經常逃學，因為我們經常沉醉在自己的世界中而沒空理會兒子。我出獄回家第一個看見的畫面是，老公因吸食藍精靈躺在地上，兒子在床上躺，沒有上學。看見這樣的情景，我突然不再想吸食毒品，思考了很多東西。如果我在吸食的話，就是3人一起躺在家，很糟糕。當時40多歲，如果繼續吸食，那就不會翻身了。突然”叮”一聲，放棄毒品。但我知道停止吸食的話，有很多東西要處理，例如老公的毒品，兒子缺席上學的問題，要他做一個正常的學生。面對面前這麼多的問題，我告訴我自己不要緊，一個一個解決。我沒有強迫我老公戒毒，我跟他

說若你被捕，我也不會勸你戒毒，因為強迫是沒有用的，我只希望你出獄後不要再吸食。

不久後，他真的被捕了，出獄後便跟我一樣沒有再吸食毒品。現在我的家庭很正常。

問：你覺得影響你最深的是身邊的人嗎？如果你身邊的人都吸食毒品，也會令你繼續吸食，非常難避免。

答：其實是很難的。很少人可以將我一樣突然停止。必須靠自己的意志戰勝自己的心魔。

問：突然決定停止吸食毒品，有沒有一些嚴重的生理反應需要克服？

答：沒有，因那時剛從戒毒所出來，無論心理或是生理都沒有。我從 13 歲開始吸食，44 歲才戒毒，這麼長時間，其實已存在了許多問題。我現在清醒過來，很感恩，真的要去處理那些問題。

問：是甚麼時候開始接觸善導會？

答：我沒吸食白粉已有 18 年，是 2016 年才接觸善導會。本來是青鳥的，青鳥是支援性工作者的機構。當初青鳥也有人協助我。

問：即是先接觸青鳥，再因其他機會而接觸善導會？

答：之前在青鳥做支援員，做得挺開心，但沒有錢，所以做回義工。透過其他義工，認識到在善導會籌備活動的義工，而加入宣揚戒毒的工作，因我認為自己有說服力，之後成為了職員，現在另一個中心工作。

問：對你來說，現在也算得上是一個新的生活圈，那你有沒有與以前一起吸毒的朋友聯絡？

答：有啊，因戒毒活動，在美沙酮診所附近找他們，看他們有甚麼需要。我住在觀塘，以前在觀塘的美沙酮診所吸食美沙酮，所以認識了很多其他吸食美沙酮的人。他們看見我的改變，亦認為自己也能夠作出同樣的改變。現在有些會有都是在外展時招攬入會的。我認為勸他們戒毒並沒有意義，應該要慢慢地影響他們，向滲透這個改變才有意義。

問：你認為現在的生活模式比以前的好嗎？

答：比以前好很多，起碼我是一個正常人。

問：回望過著以前那種生活的自己，你有甚麼感受？

答：我很感恩，幸好自己沒有陷入更深，沒有像某些人不能自拔那麼慘。其實是非常靠自己的，不要被身邊的人所影響，尤其是朋友。所以，我經常以朋輩的身份做外展來影響他人，當然有成功的，也有不成功的，一些真的十分不願意戒毒。甚至乎有人看見我這麼軟弱的人也能成功戒毒，他們又想戒毒。他們認為自己很強，一定可以成功戒毒。但他們戒了一會又重新吸食白粉時沒有控制份量，因而喪命，已有 2 人也是如此。其實他們已經在改變，戒毒的途中有很多試探，未便能夠控制自己。

問：的確未必每一位都能像你一樣有這樣堅定的意志。

答：我不想傷害我的兒子，不想令他擁有一個不可的童年。我因他偷食物被捕而打他，他告訴我因為肚餓沒有錢買食物，而且你沒有理我，我才會去偷。當時我感到很心痛，跟自己說如果有機會成功戒毒便多為家人着想，為孩子着想，他是無辜的，不應該這樣對他。

問：你作為一位過來人，你覺得更生人士或曾吸毒人士在康復過程，重新踏入社會中最困難的是甚麼？

答：沒有朋友和寂寞。吸食白粉的會形容白粉是他們的老婆和老公，很難擺脫自己的自卑感，當其他人自己我曾吸食白粉就不會和我做朋友。我覺得如果你自己不接受自己，他人也不會接受你。我在居住的大廈，很多人知道我曾吸食白粉，我亦因為吸食白粉而借錢，他們也很怕我，看見我掉頭走。但由我決定不再吸食白粉，我決定要過安穩的生活，做個普通的人，做一位好媽媽，但不是做一位孝順的女兒，我經常認為是我媽媽連累我的。我會走正軌，有人告訴我搬家，不然會很難站起來，重新開始，但我偏不，決定在那倒下就在那站起來。那時，鄰居不願與我乘坐同一部升降機，現在不一樣了，他們願意等我，一起乘坐同一部升降機。我認為需要時間，一開始頭幾年是很難接受，會有閒言閒語。

問：即這種有色眼鏡並不是一時三刻就能擺脫。

答：十分困難。通常戒毒人士都是非常介意。戒毒真的一點也不簡單，不然為何有人吸食到現在還在吸食。

問：你擔心做義工接觸吸毒人士時自己被再次動搖，引誘嗎？

答：沒有，當時我老公還未戒毒時，是我在旁替他打針，當時也沒有想重新吸食的念頭，想吸食毒品的心已經死了。

問：但也是一件花費時間的事。

答：是呀，戒毒真的一點也不簡單。有人問我令到多少人戒毒？我回答 1 位。他們認為很少，其實一個也不容易。我成功影響一位少年，他是我朋友的兒子，已經成功戒毒，我經常找他聊天。他問我戒毒有甚麼好，我告訴他自己感受一下便知，起碼你的心靈不會再被束縛，不會因沒有錢吸食毒品時去借錢和打劫。我也看過有吸毒人士沒錢而踢孕婦，所以我也挺害怕毒癮發作的他們。

問：所以真的有很大的決心，才能再次接觸與毒品相關的活動，而又不會再被毒品引誘。希望你能夠繼續感染他人，很感謝你今天願意接受我們的訪問。

Participant 2

問：開始前都想了解一下你的背景資料，請問你有沒有犯罪記錄？

答：有。

問：被判入獄的經歷呢？

答：都有。

問：那我們先問一下有關你兒時的問題，你的成長環境是怎樣的？

答：學歷比較低，是小學畢業，未曾就讀中學。在屋邨長大，小時候看見他人賺錢好像是一件很容易的事，於是也想賺快錢。後來認識到一些不正當的人，經常與他們交流，其後亦曾販毒，再後來自己也有吸食毒品。小時候的自己貪心，一心希望容易賺錢而融入他們，所以離不開那個圈子。亦有犯過事，坐過牢，因此與家人的關係並沒有很好。

問：那你只讀到小學，你還記得那時的朋友通常在那裡認識的嗎？

答：朋友大多數在屋邨，和附近的街道上認識。小時候喜歡四處亂逛，因而認識了很多那個圈子的人。

問：你那時四處逛逛，或空閒時會做甚麼？

答：空間是的話，都是想辦法賺快錢，於是接觸他們，後來有協助他們運毒，大致上是這樣。

問：明白，那你記得你第一次接觸毒品是甚麼時候？大概幾歲？

答：80年代，大概20多歲。

問：即你是販毒後才吸食毒品的？

答：是

問：即你並不是一開始便吸食毒品再開始販毒？

答：對，不是。

問：那當時是基於甚麼原因開始吸食毒品？

答：一方面的好奇心，另一方面是好勝，認為沒理由會難戒，所以就去試下嘗試吸食毒品，發現原來真的沒辦法戒。不是真的不能戒，但是有心魔。戒其實沒有很難，但一定要克服心魔。現在才知道這樣，當時沒有想到會變成這樣。

問：你認為主要是自身原因，好奇心和好勝，有沒有他人因素，例如受他人影響，引誘

答：我認為沒有那麼容易受人引誘，都是自己的好奇，自己的問題，與他人無關。

問：明白。那你整個吸毒歷史有多長？

答：大概30年。

問：當時你一開始認為不會上癮，到甚麼時候發現自己對毒品上了癮？

答：被捕之後。

問：那次是因為甚麼原因被捕？

答：因為販毒。那時並不知道自己上了癮，被捕後扣留期間感到很辛苦，從他人口中才知道自己已經上了癮。

問：即是可能扣留期間不能接觸毒品，之後身體出現了一些反應。

答：是，沒錯。

問：明白，你可否說一下你的犯罪紀錄有哪些？

答：毒品，行劫那些，沒有甚麼特別，都是與毒品有關。

問：主要都是為了錢？

答：是，為了賺快錢。

問：明白，你的犯罪模式是怎樣？如沒有被捕你就會持續犯罪？還是有時候才犯？

答：稍為年長的時候想法有轉變，便已經不再販毒，但還是無法離開這個圈子。

問：你剛才提到你販毒比吸毒早開始，是開設販毒後多久開始吸毒的呢？

答：應該是販毒後 2，3 年左右。

問：你沒有讀書後，你有工作嗎？

答：後來有，沒有再販毒後便自己找工作。大概是 7，8 年後的事，因當時販毒判刑重，想法因而有了改變，當時應該 30 歲。

問：由那時開始就再沒有販過毒？

答：是。

問：30 歲後連其他犯罪行為都沒有？

答：都有，30 歲後有藏有毒品的罪名。

問：你記得第一次吸食毒品時的感覺嗎？

答：沒有甚麼感覺，都是出於好奇。幾人一起一邊吸食毒品一邊聊天，個人認為沒甚麼感覺，只是很苦，而且吸食後不想外出。

問：為甚麼持續吸食毒品？

答：我也想知道。

問：即使沒有特別原因？純粹吸食了第一次，認為第二次無所謂？

答：當時經常接觸到，沒有想太多。只是到後來人大了思考，就外出學習其他技能。

問：明白，你覺得你的犯罪紀錄全部都與毒品有關係？

答：多數。

問：通常是在清醒狀態下犯罪？還是在吸食毒品後興奮的狀態下犯罪？

答：都有過。整個人都模模糊糊。例如到超市偷東西，自己也不知道，回家才發現，不知道偷來做甚麼。曾試過不知道為甚麼外出後褲袋有兩枝已溶掉的雪條，我自己也不知道目的是什麼，應該是不清醒的狀態。

問：明白，即可以分為兩類。一類是為了金錢，另一類是受了毒品的影響，神智不清而忘記自己做了甚麼。

答：對。

問：那在清醒狀態下犯罪，當時的感覺是怎樣？會否感到害怕？還是麻木？因為作出犯罪行為是有一定的風險。

答：都會感到害怕，所以幾年後又沒有再販毒，因始終有風險，代價有很大。雖然沒有販毒，但已經有了毒癮。

問：即你認為是因為風險太大，希望過一些安穩一點的生活？

答：對，所以後來決定外出工作。但是工作賺回來的錢全都花在毒品上。

問：在整個吸毒歷史中，又曾經嘗試過戒毒嗎？

答：都有。戒毒出來並與以前的朋友聯絡，就很快重新吸毒。曾試過堅持一個多月，但他們經常在旁吸毒，便失敗，認為吸食一點不要緊，再次重蹈覆轍。

問：主要都是身邊的人所影響？

答：應該是，很大的影響。但要認識另一個圈子的朋友並不容易，始終朋友都是來自那個圈子。如果有幸可以認識到另一個圈子的朋友，那成功戒毒的機會就大一點。

問：你提到有嘗試過戒毒？是屬於自願還是強制？

答：自願也有，被逼的也有。

問：有甚麼原因令你自願戒毒？

答：是來自家庭的壓力，所以去自願戒毒，但沒過多久又再次吸食毒品，我也不知道為甚麼會這樣。

問：是受到他人影響？

答：是呀。

問：你認為戒毒的過程最困難是？生理還是心理？

答：應該是心理比較困難。因為戒毒後應該沒有了毒癮，若不是心理，後來不會再次吸食。

問：是怎樣的心理困難？

答：可能是空餘時間較多，獨自一人無所事事，找朋友聊天，便變成吸食毒品。

問：什麼時候開始接觸善導會？

答：接觸了大概 5 個月。

問：即是去年下半年左右。

答：對。

問：是因為什麼原因？

答：收到朋友的邀請，來參與善導會的活動。

問：現在是善導會的義工？

答：是。

問：那你接觸善導會後你的生活模式有什麼變化？空餘時間會做什麼？

答：空閒時便來中心，參加戶外活動，好像旅行，便不用經常回想起以前的事，要不然無聊時便會想起毒品。

問：你現在還有與以前一起吸毒的朋友聯絡？

答：很少，但在街上遇到會閒談幾句。

問：明白。你比較喜歡現在這種生活方式嗎？

答：當然是現在比較好。以前過着提心吊膽的生活，現在就不會了。

問：你覺得社區中心的活動或者戒毒所提供的戒毒治療服務有沒有幫助？還是主要是與靠自己？

答：我想社區中心和戒毒所都是輔助，最終都是要靠自己。這些服務幫不了多少，不能24小時監察你，所以都是靠自己。

問：多謝你願意接受我們的訪問，希望你往後的生活多姿多采。

Participant 3

問：首先多謝你願意接受我們的訪問，開始前想知道一些你的背景資料。你又沒有犯罪記錄和被判入獄的經歷？

答：兩者都有。

問：可否說一下你的成長環境？

答：我的成長環境是非常好的。我爸爸是做生意的，我讀書只讀到中三。讀不成書後便與損友來往，影響了自己。

問：那些朋友是怎樣認識的？

答：居住的社區中認識，有相同嗜好，透過他們認識了其他人。

問：你與這些朋友在一起時會做什麼？

答：沒有什麼特別，都是一些不好的東西。

問：記得第一次接觸毒品的經歷嗎？

答：81年，約18歲。到麻雀館等朋友，朋友帶我到公寓吸食毒品，他們有準備一些水果和甜品來吸毒。

問：即是受到朋友影響？

答：一定是。

問：記得第一次吸食毒品的經歷嗎？

答：嘔。

問：什麼時候發現自己上了癮？

答：一開始食了幾次也沒有上癮。一個多月後就發現自己上癮，即吸食 5，6 次後。發現自己不吸食就變得沒有精神，感到疲累。可能因為當時自己還年輕，而且空閒時間多，把持不住。

問：中三後有工作嗎？

答：正式來說是沒有的，以前放學後也有回家幫忙。之後有一段時間在親戚的店幫忙，需要錢便問他們，沒有特定的薪金。

問：那你沒有讀書後的收入來源主要來自？

答：未上癮前，我們經營一樓一鳳；上癮後，沒有心管理，轉做地盤，清拆，地板，清潔。

問：明白，那你的犯罪記錄有哪些？

答：吸毒，聚賭，行劫，藏毒。

問：都是與社團有關的嗎？

答：不是。

問：即全部都與毒品有關係？

答：使毒品令我犯罪，需要錢吸毒所以犯罪。

問：你整個吸毒歷史有多長？

答：40年。

問：你現在還有繼續吸食毒品嗎？還是已經戒毒？

答：前一陣子，兩個月前，開始根據社工所提供的計劃在戒毒。不過其實08年後已經沒有吸毒。

問：在08年以前，有沒有嘗試過戒毒？

答：自願和強迫戒毒也嘗試過很多次，但不成功。可能因為年紀思想未夠成熟，不能忍受沉悶的生活。出獄後受到他人影響再次吸食毒品。

問：強迫和自願戒毒共經歷了多少次？

答：合共都有9，10次。自願戒毒只有3次。

問：除了朋友的引誘，有沒有自己的因素，例如心癮而重新吸毒？

答：自己心死便不再想吸食。

問：即當時是因為自己的心未死，所以容易受到朋友的引誘？

答：是啊，很容易。

問：剛才提到有 3 次自願戒毒，是因為什麼原因呢？

答：其實都不是自願。是因為家人，女朋友，手足，都不能夠確定自己是否也希望戒毒。口說希望戒毒，但心實質不是。何況自願戒毒都要花費一千多元。08 年那一次是因為我媽媽去世驅使我去自願戒毒。人需要年紀大了才會想通，成熟一點。

問：你所提到的犯罪紀錄是在清醒狀態下犯罪？還是受到藥物的影響？

答：視乎情況。行劫就一定是清醒的，但若說聚賭，藏毒，打架多數都是不清醒。

問：明白。清醒狀態下犯罪時你在想什麼？

答：錢。

問：會否害怕被捕？

答：不可以害怕。家庭環境不是很富裕，不可以向家人借錢，必須靠自己。那個年代沒有監控和太多警力，打劫是十分容易的事。

問：你是什麼時候停止犯罪呢？

答：應該是 06 年。不想經常出入監獄。就算坐牢有薪，也是要工作得很辛苦才有三百多元，十分少，買不到東西。

問：是想過一些安穩的生活？

答：誰到了我的年紀也想，足夠過活便可。

問：你是什麼時候開始接觸善導會？

答：很早就已經接觸善導會，因有伙食計劃。後來認識了其他會友，參加了義工的活動。

問：你現在有與以前的朋友聯絡嗎？

答：以前的手足有試過碰到，他們不是吸毒的，吸毒的朋友在新蒲崗有見過，但沒有交集。

問：那你現在的生活圈子與以前都有很大的分別？

答：現在認識賭徒比較多。參加義工活動是希望可以認識新的人，找到新的寄託。也算不得上是健康，因為都有賭的生活，但我已經戒了酒，只有吸煙。

問：你現在的空餘時間會做什麼？

答：參加善導會的活動，下棋，沒有什麼特別。

問：接受康復計劃有沒有遇到什麼困難？

答：我覺得康復是靠自己。出來後工作，找一些寄託，會較容易戒毒。那些服務幫助不大。

問：再一次感謝你願意接受我們的訪問。

Participant 4

問：多謝你願意接受我們的訪問。首先想問一下有關你童年的事。

答：60年代出生，與父母分開住，共8兄弟姊妹，主要由兄長照顧，但他們都有自己的生活，關係沒有很密切。住在蘇屋邨，都是比較複雜的環境，自己都無心向學。9歲開始有跟隨母親做小販，感覺很容易賺錢，所以覺得沒有繼續讀書的需要，只讀到中一。14歲是我第一次吸毒，當時是在朋友的派對，大概一年吸食1,2次。只是感到苦，一點暈，所以沒有再吸食。後來21歲時在工作上碰到以前的同學，一星期吸食一次毒品，維持了一年，認為不會上癮。最後知道這個想法很愚拙。

問：在哪兒認識一起吸毒的朋友？

答：全部都住在蘇屋邨。始終沒有父母在身邊，兄弟姊妹都很早結婚，離開家中。

問：什麼時候發現自己上癮了？

答：後來開始感到享受，明白吸毒的樂趣。自己眼見許多人吸毒被捕坐牢後出來也是繼續吸毒。當時戒毒的服務資訊比較貧瘠，最多人知道的是坐牢。但仍然認為自己不會上癮，認為自己一不想吸食就能停止。那年代吸毒是很普遍的。

問：你整個吸毒歷程有多久？

答：很久了，起碼8年，10年都沒有想過戒毒，認為自己年輕，可以凌駕毒品。

問：可否分享一下你的犯罪經歷？

答：經濟狀況不太理想時曾賣盜版，偷錢，聽說若被捕都只是入獄幾個月而已，亦認為出獄後便不會再吸食毒品。戒毒是很痛苦，停止吸食 3 號海洛英要忍受強烈的肢體痛苦。出獄後 3 天就已經重新吸毒，肢體上已經脫癮，但心理沒有，我亦慶幸自己沒有飲用美沙酮。

問：即是你沒有利用過美沙酮來協助戒毒？

答：沒有。美沙酮的藥效很強，我認為這是失敗的方法，都是會導致他人上癮，不能入睡，根本不能協助戒毒。我認為透過信仰，改善心情來戒毒比較有效。

問：你認為你離不開毒品的原因是因為心癮？還是生理？

答：毒品對我來說是可以逃避，不用回想不快的經歷。生理的話，肢體上的痛苦是很難忍受的。再加上當時自己還未真正經歷吸毒帶來的人生悲劇。

問：當時是因為什麼原因令自己下決心戒毒？

答：一方面是後來的毒品的質素轉差，亦不想再重覆吸毒戒毒，沒有意義的生活，覺得沒有前景和出路。我是在聖史提芬會成功戒毒的。以前曾嘗試過強迫和自願戒毒，但只是持續了一段時間，沒有很持久。很少人思想和行為能夠一致，真正完全脫離毒品。一開始戒毒後其實是感到害怕的，擔心自己會重新吸食毒品。後來重返工作，認識了善導會的社工，認為自己找到了一條新的出路。本身都知道善導會，但並沒有參加它的活動。加入善導會後首先都是學習做義工，我認為可以為過來人帶出一些信息，和提供出路。我不知道

是不是一定會成功，但我希望先下決定把它做好。善導會可以作為後盾協助戒毒人士重投社會。

問：即你在認識善導會的社工及參加了善導會的活動後，生活模式都有很大的變化？

答：對，我認為善導會扭轉了我的生活。因為我覺得我以前的生活，各種被捕，坐牢的經歷都是既有的事實，沒辦法消失，反而是要帶著這些經歷向出路走，不要再重回以前的生活。

問：現在距離你成功戒毒已有多少時間？

答：5年。

問：你認為犯罪行為與吸毒習慣有沒有一個直接的關聯？

答：絕對有。肯定很多吸毒的人都有犯罪，只是沒有被捕。

問：你是在清醒狀態下犯罪？還是受了毒品影響後犯罪？

答：如果一覺醒來毒癮發作，但沒有錢，會比較瘋狂地犯罪。但如果是知道自己即將沒有足夠的金錢，便會做一些較低危險性或代價的犯罪行為，例如打劫，偷東西。以我從外展的經驗所知，有一半的人我在邊工作邊吸毒。我認為這些人能夠平衡工作與吸毒，證明了他們的意志和規律，他們的外表亦不像在吸毒，因此現時出現了隱蔽吸毒的問題。但困難的地方是，因他們需要工作，未必有空餘時間與我們交流，我認為社工可以針對這方面做更多。而且我相信這些隱蔽吸毒的人士，基本上沒有萌生過戒毒的念頭。我認為義工這身

份對我來說不是一個新的寄託，而是一份職業，對人生十分有意義，給予他人盼望，提供正面的訊息。

問：你戒毒後還有與以前的朋友聯絡嗎？

答：沒有，如果還有與他們聯絡的話，就肯定堅持不了多久便會重新吸食毒品。需要放下，接受以前的自己才能真正邁向新的開始。需要適應現在的生活並不容易，以前過著提心吊膽的生活，現在要學會放鬆。而且因為做外展工作的情形必定會令自己回想過去的自己，所以必須要學會接受自己的過去，有很多人都不願意放下過去，因此很難成功戒毒。

問：很高興聽到你的故事，感謝你願意接受我們的訪問。

Participant 5

問：首先多謝你接受我們的訪問，先問一下你的童年經歷？例如空閒時間做什麼，在哪裡認識朋友？

答：我 3 歲時爸爸去世，在慈雲山長大，慈雲山比較複雜，大概 10 歲時認識了黑社會人士，開始了同黨生活，之後便加入了黑社會。

問：你那時有繼續上學嗎？

答：沒有了。那時媽媽一早就上班，工作到很晚才回家。家裡只有兩兄弟，因此經常逃學，外出玩耍，被趕出校。因私校學費貴，而超齡投考公立學校，所以沒有讀書。

問：白天與朋友外出時多數做什麼？

答：10 多位 12，13 歲的青年一起偷東西，開車門，搶東西，經常不回家。

問：那你是什麼時候第一次接觸毒品？

答：大約 14，15 歲。

問：第一次接觸的契機是？

答：當時九龍城還有賣白粉，黑社會輩份較高的叫我們幫他們買些白粉回慈雲山。我們當時好奇，便將他們給我們的錢儲起來買白粉。因輩份較高全都有吸食白粉，所以認為吸食白粉也是地位，權力象徵。

問：第一次吸食白粉的感覺是？

答：吸食了少量的白粉，有一點暈，少少興奮的感覺。

問：什麼原因令你後來離不開毒品？

答：賣白粉。賣白粉令賺取金錢變得容易，空餘時間和金錢充足，開始吸食更多白粉而上癮。

問：直至什麼時候成功戒毒？

答：斷斷續續，20多歲時被捕，80年代搬到牛頭角，與二哥一起住，到工廠工作學習，那幾年也沒有吸食。

問：後來為什麼再次吸食毒品？

答：朋友影響。當時認識了在北角的有勢力人士，社團又有在鑽石山賣白粉，我負責了中間人的角色，將白粉從鑽石山拿到北角做交易。工作所賺的錢是足夠生活，但沒有很多，加上我嗜賭，於是再次賣白粉。

問：明白，那你有哪些犯罪紀錄？

答：數是藏毒，襲警也有。大部分與毒品有關。為了賺錢而藏毒，襲警是因為反抗。

問：你是在清醒狀態下還是受毒品影響的情況下犯罪？

答：醒的狀態下。

問：有沒有與毒品沒有關係的犯罪紀錄？

答：本上全部都與毒品有關。

問：第一次藏毒的心態時怎樣？害怕還是平靜？

答：一次被捕當然是害怕，那時 15 歲因毒品被捕。

問：就藏毒而言，你多久會犯一次？

答：很難說。通常從戒毒所出來後的幾年都會經常被捕。

問：那你認為戒毒最困難的是什麼？是忍受生理反應還是心理？

答：該是思想，意志和心理。戒毒其實算不上辛苦，現在的毒品不能與以前的相比，主要因為做法不同引致，比較容易戒毒。所以很多人選擇混合不同毒品一起吸食。我認為戒毒不應該強迫。

問：有什麼原因令你決心戒毒？

答：體因素。年齡增長，都知道身體都不能支撐自己太久。不希望自己年老需要人照顧。

問：什麼時候成功戒毒？

答：是近年的事。我認為不能夠叫作成功戒毒，因為許多人戒了十多年都有機會重新吸食毒品。

問：那你上一次接觸毒品是什麼時候？

答：數個月以前。

問：明白。你是如何接觸善導會的？

答：7年因販毒坐牢，當時善導會有都監獄宣傳一些計劃，由08年開始接觸善導會。

問：那你是接觸善導會後立即成為義工的嗎？

答：不是，隔了一段時間才成為了義工。那時認識後都是有事才聯絡的。

問：你認為你在認識善導會後的生活與以前相比有什麼變化？

答：都有挺大的變化。屋因入獄被收回，其後受到善導會的幫助拿回公屋。

問：現在還有與以前有社團背景的朋友聯絡嗎？

答：有一點。

問：現在你會花多一點的時間與在善導會所認識的朋友相處嗎？

答：會呀，大家都有吸毒的經歷。現在我沒工作，空餘時間都會到善導會參加義工活動，找一些寄託。

問：你認為社區中心，戒毒治療對你有幫助嗎？

答：有很大的幫助。因為這些機構能降低社會的犯罪率。有很多人沒有錢買毒品時都會去犯罪，可以利用這些機構幫助自己，特別是健康。

問：最後想問現在回望過去的自己有什麼感受？

答：身不由己。出生於那個年代並沒有很幸福。

問：我們今天的訪問到此完結，再次多謝你願意抽空出席。

Participant 6

問：多謝你願意抽時間來接受訪問，首先想知道關於你童年的經歷，可否說一下你的成長環境？

答：我小時候在上海出生，我父親被拘捕了要去勞改，所以我是跟着母親，還有三個姐姐來了香港。在聯合道那邊長大，那是 60 年代很雜，有很多來自不同地方的人，又有客家人又有潮州人。後來到了 70 年代，我長大了一些開始讀小學的時候在天台學校讀書。

問：所以那時的朋友都是在屋附近認識的嗎？

答：多數都是，我們在那一區周圍玩，那時候城寨龍蛇混集，黃賭毒都有，是三不管地帶。我們就住在那個環境周邊。

問：所以主要空閒時候都是在那些地方流連嗎？

答：你知道那時城寨裏面很好玩嗎，不是只吸毒那方面的玩，因為有很多小朋友一起住在哪裏，普通人走進去不懂得怎樣走出來，所以我們好像在哪裏捉迷藏，非常好玩。所以我們經常在哪裏玩，經常接觸那些人，明知道毒品會上癮。當在長大一點後，加入了黑社會，其中一個吸了毒，而我又很嘴饞，毒品很苦，所以那時會人在煙仔裏吃，或是用錫紙「追龍」，還有打針。我一學便學了追龍。看到他們在吸毒時，是有一點好奇，但是我知道毒品是不好的，會上癮。雖然以前的政府出來的資訊不是很多，但我有記得很深刻的海報，所以是明知道不好依然嘗試了。但當朋友都在吃，我自己有嘴饞，便很容易受影響。

問：還記得第一次吸毒時候是多少歲嗎？

答：我那時是已經參加了黑社會逗號剛開始沒有吃，後來我被拘捕了去了懲教所，出來以後那段時間便和朋友一起吃了。15 歲左右。我很年輕的時候叫入了黑社會，因為在家裏是年紀最小的那個，在家裏被欺負，出來也被欺負，沒有人保護。後來看到曾經和我一起被欺負的人狀況好了很多，便問了他原因，原來他入了黑社會跟了大佬。我才知道原來入黑社會這麼好，可以被保護，然後便說我也要加入，讓他介紹給我，就這樣加入了。

問：所以都是因為身邊的朋友影響？

答：是有影響。

問：第一次食毒品的時候感覺如何？

答：感覺不好，第一次接觸毒品之前從來沒有食過，當然會不舒服。我們會食到嘔吐。但是那時好勝心很強，受不起別人挑釁，硬着頭皮也要繼續吃。和同輩在一起很容易互相影響，不想落後他人。那時候什麼事好，什麼事壞不懂得分辨。

問：第一次的經歷感覺不良好，為什麼後來會繼續吃？

答：你在那個環境和同伴在一起，他們吸毒，你不參加他們，要離開的話，便沒有了群體生活，可以說打架的話便不能互相照顧，所以你要有群體生活，便要投其所好，他們做什麼你也要嘗試做什麼。

問：所以這可說是一個先決條件。

答：對。

問：那麼心理上的原因呢？有心癮嗎？

答：剛開始是沒有，那時候自信心很強，覺得快要上癮的時候我便會不吃了，我沒有他們那麼笨，那種心態。殊不知還是上癮了也不知道，直至一朝早起床，不知道為何整個人沒有心情，聊天也不願意，見到朋友後去食白粉，一食完便立刻龍精虎猛。那時候才知道已經上癮了，已經被綁着了。要指導那時候六、七十年代白粉的純度很高，很多人都等不到。

問：是犯了什麼罪令你被判了入獄？

答：第一次是吸毒之前，和黑社會打架。那時我年紀還年輕，便負責帶工具、武器。後來開始吸毒後，因為要賺錢食毒品，那時候便出去找對象偷竊、打劫。到真的被拘捕後，更慘，入到去後龍蛇混雜，學得更壞了。

問：所以和毒品有關的犯罪紀錄通常都是為了錢？

答：通常都是。那時候大家賺錢不多，買毒品的份量也不多。

問：那時候為了求財而去犯罪，心態是什麼？會害怕嗎？

答：剛開始沒被拘捕的時候不害怕，被拘捕過後膽死更大了。原來也不外乎那回事，最多被打，監獄裏面也有得買毒品，裏面也是一個小型社會。

問：那時候有曾經想過戒毒嗎？

答：我吃到差不多 30 歲的時候很想戒，因為很厭倦，但也知道有什麼途徑可以戒。80 年代毒品是最氾濫的，屋村樓上樓下都可能有毒品，很容易便拿得到。最重要有錢。

問：反反覆覆戒毒有多少次？

答：很多次，我也不記得了。那時候就算很辛苦，也想着從戒毒所出去以後就不吃了，但始終我們的圈子很狹窄，由細到大都是黑社會圈子，無法走出來。我們一生人的人際關係就在哪裏，不知道怎樣走出來。就算自己想認識新朋友，別人也不會願意理睬我，因為我們那時候吸毒的人到處問人借錢，誰會願意和我們做朋友呢？人是需要群體生活的，一個人很沉悶，需要有朋友，但我的所有朋友就在這個黑社會圈子，回到這個圈子便會重吸。那時候也有幫忙販毒。

問：是什麼時候開始認識善導會？

答：認識很久了，那時候是叫釋囚協會，但是那個時候是幫不到我們的。因為他們不了解我們，資訊不夠，不像現在有我們這些曾經吸過毒、入過黑社會的義工來幫忙。那時候我們說一句術語他們也聽不懂，那麼怎樣看到我們呢？現在我為何會願意參加這裏的義工計劃，因為我們是一個橋樑，兩邊的事情我都知道一些，所以會令到社工們做的東西到位很多。我不敢求多，百中有一被我們影響到便足夠了，因為那一個人會影響其他人。

問：你在這裏做義工多少年了？

答：我由一四年開始在這裏做。

問：你戒毒多久了？

答：六年多，一四年到現在，那時已經 60 歲了。

問：是什麼原因令你下定決心不再接觸毒品？

答：最大的決心是，我一直以來都想戒，但不知道途徑。一四年最後一次被拘捕，看了兩個月，出來以後我在想，我已經 60 歲了，如果我再吃，已經沒有資格去石鼓洲，因為身體已經支持不到。我有三個毒癮，藍精靈、白粉、美沙酮。服完刑出來再繼續吃的話，便會吃到死了。如果不再吃的話，我不用那麼奔波。做黑社會，賺錢的方法很多，但代價也高了很多。我們以前打劫、傷人，法庭最多判九個月至三年。在監獄裏不停話，才要坐三年。現在不同了，一單案已經有機會落地院，落地院有機會判七年，代價不同了。我們以前有時間，年輕，很多本錢。到了現在 60 歲，想法又成熟了。30 歲的時候已經想離開那個圈子了，但是不知道用什麼途徑，服刑後出來的確實不吃，但能堅持嗎，怕不怕悶？滿變要重新回去那個群體。今次我斬釘截鐵，完全離開那個群體，不再找黑社會那些人，連他們的電話都剷除，斷了所有聯絡。我扔掉所有毒品，不留自己後路。直至遇到這類的義工，他們說我這樣不行，每天在士多門口看着別人交收毒品，撐不了多少天。他們便介紹我來善導會，我那時也不知道應不應該來，但唯有見步行步，想改變一定要願意踏出這一步，不是只是嘴上說，要作出嘗試，不嘗試怎麼知道不行。我就是憑着這個意念，便一直前進。他們舉辦很多活動，都先參加了再算，因為不參加不知道適不適合自己，參加了後再篩選，哪個適合自己。

問：你喜歡現在這種生活嗎？

答：當然喜歡，睡醒便不用擔心，不會再睡醒便毒癮發作，發作時，有錢便立刻去拿毒品，沒錢的話，便出去賺錢，賺完錢再去拿毒品。但去到後期我不是只拿一種毒品，我要拿兩種，白粉，藍精靈，缺一不可。後來還要有美沙酮，他們三種的毒癮不一樣，美沙酮只能抑制白粉的毒癮，無法抑制藍精靈。我現在也和仍然在吸毒的人說，最毒的毒品是政府出的這種，美沙酮。美沙酮是強力止痛藥，吃了之後二十四小時也有效，那麼你說美沙酮是不是比毒品更毒。現在的白粉很多雜質，沒有以前那麼純。我現在生活輕鬆了許多，還能幫助別人，作為一個榜樣勸喻他人。你不吸毒便不用做那些非法的東西，不用偷呃拐騙。做這些都只是為了毒癮。現在的生活都輕鬆，帶着兩籠雀仔出來坐，多麼寫意。到了下午如果這邊有外展活動，我便過來參加。

問：很高興見到你有這樣的改變，多謝你願意回答我們的問題。

Participant 7

問：首先想問一些背景的問題，可否說一下您的童年經歷？

答：我們小時候住九龍城寨，本身就很調皮，到處玩，到處打架，沒有很早吸毒，83年才開始，當時二十多歲，我今年六十四歲。

問：二十多歲好像不算很早開始？

答：對，都是因為接觸那些人，才開始吸毒。十四歲開始接觸有社團背景的人。

問：當時的朋友主要都是居住地方附近認識的嗎？

答：附近的街坊，一起長大的。

問：學校呢？和學校的朋友多聯絡嗎？

答：少，我們讀書也不多，小學程度。

問：那時候空閒的時候會做什麼？

答：都是在家裡玩，四圍去玩，去別人的樓摘生果，什麼都玩。有時候會去遠足，燒烤。童年可以說開心，也可以是不開心。也不會悶，那時候物資也很少，那時六、七十年代，想吃個麥當勞麵包也沒有，不像現在那麼富裕。

問：那時候是怎樣接觸有社團背景的人？

答：讀書的時候。

問：第一次接觸毒品是 20 多歲的時候，所以 14 歲時開始接觸社團後的那幾年是沒有接觸毒品的？

答：對，20 多歲，八三年才開始。

問：為什麼那時候會突然開始？

答：因為接觸那些人，一班人在屋裏，接觸好的人當然不會吸毒，但他們一班人在那裏吸毒，也自自然然會吃，第一天不吃第二天不吃，第三天也會吃了。很容易就會吃了。

問：都是受其他人影響。

答：對。大部份都是。

問：剛開始接觸社團時候那些人是不吃的嗎？

答：對，不是所有有社團背景的人都會吃。

問：那麼你整個吸毒的行為持續了多久？

答：我間中都有兩次停過沒有吃，有試過停了大概一年沒有吃。都九零年開始便沒有停過了，九零年至一六年幾十年都沒有停過。吸食的時候也不知道為什麼，明知道是死路一條。經常和自己說今天吃完明天不吃了，改去喝美沙酮。但一睡醒就出去找海洛英了，經常自己欺騙自己。其實我現在還有和那班人聯絡，他們全都是癮君子，但我出來這麼久了也沒有再吃過了。

問：所以你並沒有和他們斷絕來往？

答：對，每天都會接觸到癮君子。

問：繼續和他們接觸會令你想重吸嗎？

答：希望不會，我自己也不敢說，但應該不會了。我做了兩年路，出來了兩三年，差不多五年沒有再吸了。認識我的人都不希望我再吃，盡量自己站穩。

問：所以一六年是你最後一次接觸毒品嗎？

答：對，一六年到現在也沒有再吃過了。希望能賺得穩，但我也不敢說，因為很多戒了幾二十年的人也會重吸。

問：知道是什麼原因令他們重吸嗎？

答：不知道，只是聽說，有些戒了也會再吃。

問：能說說你一六年被判入獄的經驗嗎？

答：是因為毒品，一四年接觸毒品和別人一起被逮捕，判了兩年。

問：是因為藏毒？販毒？

答：販毒。只有這一次。他們也說我算幸運，幾十年來只有一次。

問：那次是你第一次販毒嗎？

答：是的。本來我也不會做這些，但那時太太剛去世，所以自己一個人沒什麼負擔。我現在也是一個人住，單身。

問：那麼第一次吸食毒品的時候覺得怎麼樣？它的效果如何？

答：習慣了吃之後，不吃的話會有點不自在。

問：是身體上還是心理上？

答：心理都有。明知道是不好的，但是很難說，就好比喝酒吸煙賭錢。海洛英的話，不吃便會很辛苦，上癮之後，不吃便會很辛苦，會經常打呵欠，流眼水、鼻水。很不舒服，自然就會去找毒品。

問：所以身體狀況也會迫使你們繼續吃。

答：對。

問：那麼你兩次的戒毒經驗覺得最難的是什麼？

答：那時我都是自己在家裏戒，沒有喝美沙酮。可能那時毒癮也不是很深，最重要是心理，不去想它便會沒有那麼辛苦。

問：身體的狀況會過多久才消失？

答：那時候 20 多歲，很年輕，便很快會恢復。年輕的話會很快，忍 10 多天便沒有事。

問：精神狀況也會有影響嗎？

答：會沒有那麼容易睡覺。

問：剛開始吸毒的那時候有工作嗎？

答：有，我本身是揸車的，那時候有開中港車。但賺回來的錢經常都是拿去買海洛英，那時候都沒有心機。

問：吸毒始終需要消耗大量金錢，那麼那時候有沒有想過用一些犯罪的行為去賺錢？

答：有，很多人都會去偷、搶、販毒等等來賺錢。但我那時候因為有正行所以不用這樣，所以我沒有經常出入監獄。如果那些人是高買，便會出出入入監獄。我們做正行便會少一些。

問：那夠嗎？

答：夠，但吃多了便不夠，始終很昂貴。請問現在有些拿綜援來吃白粉，真的連買飯吃，買煙也沒有錢。真不知道他們在想什麼，拿 4000 多元的綜援，一粒海洛英已經最少 200 元。

問：那時候這麼多年都沒有接觸犯罪的行為，為什麼一四年的時候會開始？

答：因為太太剛剛去世，一個人便沒有什麼負擔。就算有事也是自己一個人承擔，不用牽連到別人擔心。我又無兒無女，太太又多病痛。

問：你說中間有試過兩次戒毒，那時候是為什麼萌生這種念頭？

答：我也不知道為什麼這麼突然，只知道吃到很灰，大家都很絕望，會躲起來不想見人。有時吃到神志不清，自己不避，別人也不想和你一起。很多都是這樣。

問：所以那兩次經驗是自己主動想去戒的？

答：是。

問：那麼之前兩次戒毒，為什麼後來都會重吸？

答：都是因為又重新接觸那些人，如果不聯絡的話會好些。所以說近朱者赤，近墨者黑。

問：你覺得那些戒毒治療例如美沙酮，戒毒所，有幫助嗎？

答：有，不過少部份。最重要是自己的心理，要站穩。大家都知道又貴又不健康，但還是自己欺騙自己。

問：為什麼一四年第一次販毒之後，出來以後便沒有再犯這個打算？

答：都是迫自己，一八年出來後有接觸到善導會，便沒有再犯，兩年多了。

問：那麼你現在是在做義工？

答：是的，我們會四圍去，會去老人院探訪，有很多節目，我們都很積極參加。善導會的職員也幫了我們很多。

問：覺得現在的生活最大的變化是什麼？

答：開心了很多，不用再去喝美沙酮，現在的人通常又要喝美沙酮又要吃海洛英，兩種要一起。如果只吃海洛英不飲美沙酮，海洛英撐不過那麼長時間。加上美沙酮便會持久一些。我這樣持續了 20 多年，沒有停過。

問：那麼這幾年的生活圈變化很大嗎？接觸的人也不同嗎？

答：有，但是我還是經常去見那些人。以前那些朋友知道我們不再吸毒，也不會理睬我們。我們拿綜援也沒有那麼都開支。

問：現在回首當時有什麼感覺嗎？

答：沒想那麼多了，都過去了。朋友也說不要想那麼多了。很多時候吃到神志不清被警察逮捕，他們都是不知道發生什麼便被逮捕了。會斷了片，沒有記憶。那些吃冰毒的會更嚴重，吃了會幾天睡不到覺，吃不到東西。一睡便會睡一兩天，叫做融雪。又會出現幻覺，疑神疑鬼。

問：你自己有吃過冰毒嗎？

答：沒有。只有海洛英，不敢搞其他。

問：現在的生活習慣有什麼新的改變嗎？

答：都是睡醒便去飲茶，有節目便上來參加，有時候和那些癮君子也會聊聊天。我們也會有時候做外展，作為一個榜樣輔導他們，盡量叫他們不要再吃。也會叫他們入會，過來參加活動。幫到便盡量幫。我自己本身都有糖尿有心臟病，眼也有黃斑點。

問：那麼戒毒後有感覺到身體狀況有好轉嗎？

答：都差不多。

問：善導會怎樣令你不重吸或重犯？

答：他們有很多節目，社工也很好人。他們很多活動我們都積極參加，例如飲茶、燒烤。

和社工和會友變熟，又更好了。有新的寄託，也不想令他們失望。

問：很感謝你願意接受訪問。

Participant 8

問：多謝你願意抽時間我接受我們的訪問，可否說一下你的童年經歷和成長環境嗎？

答：我在橫頭磡長大。樂富那邊。

問：那麼你那時候通常會做什麼？

答：小時候在球場那邊玩耍，長大一點以後便跟了黑社會，再遲一些便開始販賣白粉，然後自己也開始食白粉。一直升級。

問：小時候的朋友都是在哪裏認識的？

答：通常都是屋村附近認識的，或是同學。

問：所以小時候認識的朋友是有吸毒背景的嗎？

答：一些些。

問：到什麼時候開始你自己也加入？

答：小學的時候。

問：那時候有上學嗎？

答：一直有上學的，直至中一、二便沒有再讀了。

問：和學校的朋友關係如何？

答：小時候我們每個人都可以做朋友，沒什麼特別。

問：你什麼時候才正式加入黑社會？

答：17、18 歲，那時候一家人邊開始幫忙販毒。

問：這個時候自己還沒有試過吸毒嗎？

答：沒有，到了之後自己開始買的時候才開始自己吸。

問：那麼你第一次嘗試吸毒是什麼時候？

答：很久以前了，我吃了白粉差不多 30 幾年了。19、20 歲左右第一次吃。一隻是抱着玩的心態，自己也不知道上了癮。

問：是什麼原因令你嘗試了吸毒？

答：朋友引誘。也有一點好奇。

問：那麼第一次吃的時候有什麼感覺？

答：第一次吃完後不停嘔吐，但是有勇氣回去再吃一口，已經什麼事也沒有了。第一次吃白粉，吃不到就是吃不到，但是吃得到的話就會繼續下去了。

問：所以其實你第一次吸食毒品的經歷並不是特別開心？

答：我小時候食毒品通常都是十幾二十人一起吃，全部都是差不多年紀，因為我們那時候食白粉不用錢。

問：什麼時候才發現自己對毒品上了癮？

答：和女朋友到泰國旅行的時候才發現，開始流鼻水和出現其他狀況。

問：因為那時候旅行沒法帶毒品過去，所以有一段時間吃不到才開始發現自己上了癮了？

答：是的是的。而且沒有想過自己真的會上了癮也不知道。

問：除了身體狀況外，有心癮嗎？

答：心癮沒有那麼快出現，但是身體狀況已經覺得自己很多地方不舒服。心癮是大一點之後才知道，想戒毒的時候才知道有心癮。

問：可否說一下你有什麼犯罪記錄？

答：有入屋行劫，都是為了錢。因為一睡醒便需要毒品，所以要想辦法得到錢。

問：有沒有在受毒品影響下、神志不清的狀況下犯的事？

答：都會有影響，那時候我會和男生打架，經常會斷片，做過什麼也忘記了。只是後來聽別人說自己做了什麼。

問：記得那時候犯罪的頻率嗎？

答：視乎那時候是否急需用錢，急需的話會密一點。有一段時間我是不急需用錢的，結了婚以後，雖然也有一路吸食毒品，但是我也有做正行。有一段時間沒有工作，會比較失控一點。

問：那時候做正行是什麼工作？

答：駕駛。

問：做到什麼時候？

答：做了 10 多年，那段時間很安定，只有上班下班和食白粉。

問：犯罪的時候心態是怎麼樣，會害怕嗎？

答：也不太清楚害怕不害怕，因為已經習慣了。沒有想過害怕或者不害怕，只想着做或者不做。如果害怕自然就不會去做。要做的話就要用自由付出代價。

問：去到什麼時候開始覺得自己一定要戒毒？

答：一直都很想戒，但每次都欠缺一些動力，而且人一路長大，路也越來越窄。而且也遇到一些善導會的社工願意幫我，自己也沒有想過能夠解得到。都是身邊朋友的幫助。因為也戒過很多次，戒到有點害怕了。

問：你覺得每次戒毒最困難的是什麼呢？

答：身體上的原因，一次比一次辛苦。也會有一些心癮，會一直想着它。

問：到現在還會有嗎？

答：也會有，但是已經少很多了。

問：你戒毒了多久了？

答：都差不多兩年了。這兩年也沒有再接觸毒品了。

問：你是什麼時候接觸善導會的？

答：一四年。

問：接觸善導會的原因是什麼？

答：那時候只是要拿錢，因為剛服完刑。他們又願意幫我，所以便試一下。

問：那麼什麼時候才開始在這裏做義工的？

答：義工是這兩三年才開始。

問：為什麼會願意留在這裏做義工？

答：因為自己有空，又想嘗試一下。

問：覺得這樣的生活有什麼變化？

答：開心了許多。因為認識了很多新朋友，自己也不用每天也有跑錢的壓力。

問：現在還有和以前的朋友聯絡嗎？

答：不要找我。真的不要找我。已經和他們斷了聯絡。認識久的朋友知道我戒毒了，也替我開心，所以不會再找我。

問：所以比起以前的生活更喜歡現在的生活？

答：對。感覺和以前很不一樣，以前是很迷惘的。

問：現在回望過去，有什麼想法嗎？

答：很慶幸，慶幸自己脫離那種生活。現在見到有些仍在吸毒的人吸到不似人形，也有點害怕。

問：現在做義工主要做什麼？

答：這裏通常和他們出去玩，飲茶。油麻地那邊會幫忙派東西，我有好幾個地方回去。

問：那麼除了做義工呢？空閒時候會做些什麼？

答：疫情關係留在家比較多，也有時候會去遠足。都是一些健康的活動，不要想太多無謂的東西。

問：你覺得這些戒毒治療，社區中心對你們有幫助嗎？

答：有的，視乎你自己願不願意踏出這一步。別人願意幫你，你也要願意嘗試。

問：剛才你有提及過戒毒過很多次也不成功，和社交圈子沒有變化有關係嗎？

答：對。有時候戒了幾個星期又碰見那些朋友。很容易便重吸。

問：明白。感謝您願意接受訪問。

Participant 9

問：可否說一下你的童年經歷和成長環境？

答：我 13 歲已經加入黑社會，我們那個年代經常打打殺殺，那時我已經有參與，直至結婚後才開始脫離。

問：那時候為什麼會加入你黑社會？是身邊的人的影響呢？

答：好勝。因為我當時在黃大仙舊區，有很多這些人，而我跟了那班人。我屋村附近都是這些人，所以只認識這些人。

問：那時候有上學嗎？

答：一回去便被人趕走，因為打架。

問：那時候在空閒時候會做什麼？

答：也沒有做什麼，也沒有讀書，一會去便被趕出來。主要都是和社團的人在一起。

問：可否說一下你第一次接觸毒品的經歷嗎？

答：我第一次試在感化院的時候。六六年的時候，那時候十幾歲。在赤柱教導所那裏食。

問：是從那裏獲得毒品的？

答：因為出假期，到了社團的地盤，一班兄弟給了我吃。

問：所以是朋友的引誘嗎，抑或你自己想吃？

答：也不能算是朋友引誘，如果自己不想吃，誰叫你吃也不會吃。是自己的不好，不關別人事。

問：你的整個吸毒歷史有多長？

答：很久了，我在教導所一出來已經開始吃了，食到九八年。在那之前也有飲美沙酮，九八年開始美沙酮也沒有飲了。也有辛苦了一個多兩個月，睡不到覺，但直到現在也沒有再重吸了。煙和酒也沒有碰了，所有都戒了。

問：現在是在善導會做義工嗎？

答：是的，有需要便上來幫忙。

問：可否說一下你有什麼犯罪記錄？

答：打劫、打架，最多應該是藏毒。

問：是什麼時候的事？

答：第一次是六五年，是因為打劫，判了去赤柱教導所，判了差不多兩年。出來後就差不多年年都有。之後因為對毒品上了癮，每次去拿毒品都會被發現，因為我不懂得高燒的技巧，每次都只是待在身上，很容易被發現。每次只是判幾個月，我把它當成去旅行。最嚴重是七一年被判兩年，因為打架被判藏有攻擊性武器。

問：第一次接觸毒品的時候感覺如何？

答：那是只覺得很苦，雖然很苦，但和朋友在一起，他們吃自己沒有理由不吃。

問：為什麼後來會對毒品上癮？

答：那時候在教導所已經上癮了，出來後便沒有停過了。

問：是因為心癮，還是因為生理上的原因？

答：不是因為身體上，只因為好勝，那是認為不吃好像不是大哥。

問：你覺得你的犯罪記錄和吸食毒品有直接關係嗎？

答：當然有，如果不吸毒，我就不用去打劫。

問：那麼你打架的時候是吸了毒的狀態下才去的嗎？

答：不是不是，是很精神的。打架主要是為了自己社團，不是因為吸毒。

問：那時的心態是覺得即使被拘捕也不要緊嗎？

答：不要緊。判刑也不是很重。

問：是什麼原因導致你覺得自己需要戒毒和停止犯罪？

答：因為結了婚，九八年的時候，一結了婚便不再碰了，因為怕太太知道。辛苦了一至兩個月，但辛苦也要戒，只是睡不着覺，

問：那次是你第一次戒毒嗎？

答：不是，我也戒過很多次，也有去過石鼓洲戒毒。反反覆覆有很多次。

問：那麼你還有和以前有社團背景的人接觸嗎？

答：沒有，自己工作，沒有再找他們。做清潔工也做了很久

問：有沒有覺得這種生活很難習慣？

答：沒有。結了婚也被迫要習慣。現在基本上完全和他們脫離了，有時碰到也只會打招呼。

問：現在回望過去，對那時候的自己有什麼看法？

答：那時候的環境和現在不一樣，那時候的活動不能不去，但現在不一樣，我只需要管自己的事。

問：你是什麼時候開始接觸善導會的？

答：很多年前了，那時候還叫釋囚會，差不多結婚的那時候。

問：什麼時候開始在這邊做義工？

答：最近兩三年。有時也會做外展，在柏立基那邊。

問：你會怎麼勸他們？

答：只是和他們說，希望他們不要吃，告訴他們自己也沒有吃很多年了，他們聽不進去也沒有辦法。

問：你喜歡現在這種生活更多一些嗎？

答：當然，現在和太太一起吃飯也舒服一些。那時候每天都很焦慮。

問：你覺得戒毒治療有幫助嗎？

答：效果不大，一出來便重吸了。

問：現在的社區中心呢？有幫助嗎？

答：有，起碼我無聊時候上來有人陪我聊天。還有大部份在這邊的人也沒有再吸毒了。

問：這些年有曾經動搖過想重吸嗎？

答：我那時候在清潔的時候撿過很多次了，但我都立刻扔掉。

問：朋友知道你戒了，也不會再找你了嗎？

答：不會，他們知道我沒有再吃，見到面也只會打招呼。

問：現在空閒的時候會做些什麼？

答：吃完飯通常看一會電視，然後到公園散步，然後回家煮飯。主要和家人在一起。

問：你覺得做義工對正在吸毒的人幫助大嗎？

答：也有幫助，幫得到也希望幫。

問：感謝您接受訪問。

Participant 10

問：首先想問一些背景的問題，我們知道你現在是善導會的朋輩，有過吸食毒品的經驗，那麼你有犯罪記錄嗎？

答：有，我坐過三次牢，第一次是九二年，那次是因為走私汽車。第二次是二千年，因為販毒。最後一次是零八年因為無牌經營賭檔。

問：明白，所以總共三次，三次都有被判入獄嗎？

答：對的。

問：可否說一下您的童年經歷、成長環境？

答：我小時候住在舊屋村，在柴灣區。小學五年級已經開始接觸黑社會。五年級便開始販賣大麻，因為以前屋村的人不像現在這麼疏離，一班小朋友經常一起滿滿，很容易接近那些同黨。那是已經開始接觸社團，有吸食大麻，去到中三已經沒有再讀書了。然後便帶著自己的同黨加入社團，從而繼續接觸毒品和販毒。

問：明白，小時候認識的人已經有接觸這範疇，那些人都是在屋村附近認識的嗎？

答：對，到在屋村附近。

問：那麼學校呢，學校也有這些人嗎？

答：主要都是在學校以外認識的，放學之後會一起去玩，去公園。

問：你們空閒的時候會去玩什麼？

答：會四圍去，因為我以前住的地方近海邊，所以會去海邊玩。那是好像住小西灣，有時會去撐艇仔，我記得有一次三年級的時候，看到有人泊了一首艇在附近，我們便手撐了出去玩，殊不知太大浪，便反了，哈哈。

問：哈哈，小學已經會撐艇，很厲害。但你所說的那些活動都只是去玩耍，那麼為什麼會接觸到毒品？

答：因為當時有個社團大哥住在我旁邊，因為以前經常在空閒時在樓與樓之間的空地一起玩，而他會吃大麻，我有時也會吸煙，所以我也會偷偷地把大麻檔成煙仔吃。

問：那是只是小學五年級嗎？

答：對的。

問：那麼當時第一次吃的感覺如何？

答：很暈，但興奮，是開心的，會不停地笑。

問：你的整個吸毒歷史有多長？由小學五年級至成功戒毒為止。

答：正式戒毒的話，應該差不多 20 年。那是年紀再大一點之後，入到社團便沒有再吃大麻，會吃那些高級一點的，例如可卡因、搖頭丸、白粉。因為我當時有販毒，販賣白粉。我應該是讀完中心之後，帶着一班兄弟一起販賣白粉。那時候就沒有正式食，因為都知道吃白粉是極度不好的，所以雖然自己有賣但是不會食。真正開始吃的話應該是二千年那時候，我九二年被拘捕的時候還沒有開始吃，但是我被拘捕也是和毒品有關係，因為販毒的

地區有很多人吃，那些人沒有東西做但是他又會偷車，而我又認識上面那些開走私快艇的人，所以便幫他們搭路。

問：這次第一次犯罪當時大概是多少歲？

答：大概 19、20 歲，但這次是第一次被拘捕，不是第一次犯法。13、14 歲已經開始犯法，但沒有被拘捕。因為當時越做越大，警察又有線人跟著我們，所以才被拘捕。

問：你們當時的犯罪頻率是怎樣？一直都有進行嗎？

答：一直都有進行，因為都沒有其他什麼技能，加上學歷又低，也習慣了這種生活，沒有辦法朝九晚五上班。還有生活圈子一直也是這樣，離不開這個生活圈子，也斷不了這些行為。

問：剛開始吸毒的時候只是抱着玩的心態，那麼什麼時候開始發現自己已經上癮並且離不開毒品？

答：應該是九九年，因為那是我已經讀完中三，輟學了，那是已經開始正式販賣毒品，白粉那些，已經沒有再賣大麻了，因為那時大麻已經不是十分流行，那時候白粉的市場很大，那些海洛英。因為那時候香港是，不知道你們知不知道什麼是風潮，即是外來的毒品數量很少，香港的市面上白粉很少，要親自上去國內拿，因為要試那些毒品的品質好不好，試着試着便開始上癮了，也知道了那些毒品的品質好，便上去拿。剛開始也認為能夠戒得掉，最後還是戒不掉。

問：所以你輟學後已經嘗試了不同種類的毒品？

答我對的那時候已經像一個藥房，什麼都試過。例如搖頭丸，氯胺酮和病毒那時候好像不怎麼流行。基本上說得出的毒品都有試過，只是沒有接觸過鴉片。因為鴉片已經沒有市場，沒有必要再去接觸。

問：你覺得是什麼令你沒辦法離開毒品？是心理上還是生理上的原因？

答：我個人是因為從事這方面的東西，已經沒有辦法離開它。也有身體上的依賴，加上自己又無所事事，除了販毒以外的時間都很空閒，不用工作，不用面對其他人。因為我也不是自己親自去買的，我是在幕後控制他們買賣的，所以時間比較多，便經常躲在屋裏吸毒。而且因為離不開那個圈子和那個行業，除非你轉行，完全不接觸毒品，便會有機會，否則很難離得開。剛開始我吃的時候，也想着那是毒品、白粉，沒有理由戒不掉，認為自己才是大哥，怎麼可能被它控制到，結果真的被它控制了。那個生理反應非常強烈，令你非常辛苦，完全不想見人。吸完毒後精神一點才會想和別人聊天，毒癮發作的時候是完全不會想和別人聊天的。

問：毒癮發作的時候會有什麼樣的反應？

答：個心會「囉囉攞」，不斷打呵欠、流眼水，如果再久一點會嘔吐，總之就是非常辛苦。

問：這樣的狀況通常會維持多久？

答：其實基於你當時的環境，如果身處大陸，因為在大陸那毒品就在那裏吸食的話會很怕被拘捕，我也試過在大陸留過幾個禮拜嘗試戒毒，殊不知一過關內心已經蠢蠢欲動，便重吸了。當你離開了那個圈子，心癮便沒有那麼大。我也試過去旅行一個多星期沒有吃，所以身處的環境和是否想離開它的決心很重要。一回到香港我已經忍受不了。因為那時我的車停泊在上水那邊，連車也不想開，直接在上水搭的士回講到那邊，身體上已經支撐不了，連樓也不想上去直接打電話叫兄弟幫我拿毒品下來，在樓下吸完才上樓。非常辛苦。身體上和心理上的反應都有。如果沒有一種很堅定的信念，是很難離開它的。

問：那麼剛才提及過總共有三次被拘捕的經驗，那麼你覺得這三次犯罪的行為和毒品有沒有直接關係？是受毒品的影響下去犯罪，抑或純粹為了錢？

答：我想是因為錢，因為我也不是為了賺錢買毒品，因為我一直做販毒，也不會擔心沒有毒品供應。二來是為了班兄弟，因為你那班兄弟是讀書的時候和我一起的，一起不唸書，一起出來跟社團。如果我不做的話，他們也不知道做什麼。加上那時候也有小孩子，要供書教學。加上自己對毒品的依賴，如果不做那些犯法的行為，根本沒有可能滿足自己的毒癮。一天賺幾千元也不足夠。

問：所以毒品所消耗的金錢是十分分龐大的。

答：是啊是啊。毒品和犯罪可以說是連體嬰。這個關係根本斷不開，要吸毒根本不可能不犯法。

問：你有試過在吸完毒後神志不清的狀態下犯法嗎？

答：我沒有。

問：那麼你身邊的人呢？這樣的狀態下通常會犯什麼事居多？

答：他們當然有，通常是偷竊，打劫那些也有見過。都是因為需要錢食毒品。

問：最後目標都是求財。

答：是啊。以前和我一起販毒的夥計食完之後，因為我約了他收錢，然後和他走進了便利店，他一路拿一路放進自己的袋裏，但他自己不知道自己正在偷東西。真的會食到整個人神志不清，做什麼也不知道，疑神疑鬼。

問：你也有過幾次戒毒的經驗，是因為什麼原因會令你有這個想法？

答：首先是因為家裏的小孩，他們逐漸長大，知道爸爸有吸毒，和媽媽的關係不怎麼好，媽媽常說他總吸毒，吃到整個人神志不清，雖然未至於有什麼大問題，例如家暴或其他經濟上的問題，但是自己個人的狀態都很差，吃飯也沒有精神，所以不想讓這小孩子知道有個這樣的爸爸，這是最初的動力。

問：明白，家庭是第一個動力。

答：後來我最後一次在坐完牢出來是零八年，那次在監房接觸善導會，因為善導會在裏面開就業課程，那時候是夏天，所以只是想着去涼冷氣，想了個清潔滅蟲課程，還有一張證書。出來後已經想戒毒，在街上無意中遇到之前的囚友，他告訴我他上了去善導會拿證書找工作，然後我便跟着去拿了那張證書，但我之後還是沒有去找工作。但那時候開始便接觸了善導會的社工。但那時候隔了大半年後也有重吸。我重吸的次數也有起碼四、五次。

強制戒毒已經有三次。第一次只是戒大麻，但那個只是三人，並沒有很難。真正強制戒毒戒白粉是九九年和零八年，但出來後也有重吸。那個善導會的社工也一直聯絡我，跟我說有什麼事情都可以打給他，感覺到他是真心關心自己。有一次我上大陸戒毒，精神狀態迷迷糊糊，想起社工說有什麼事情都可以打給他，便撥打了長途電話給他，社工擔心我一個人在大陸戒毒很危險，因為我也有吸食藍精靈的習慣，所以便叫我回香港，陪我看醫生。第二天他在火車站等了我好幾個小時，見我神智不清，便送了我北區醫院。我最記得的一幕是我到達醫院後已經不懂得表達自己是什麼事，社工代替我向醫生回答所有問題。然後因為要照老素描，需要脫下頸鏈，社工幫我拿着頸鏈的那一幕令我覺得他好像我媽媽，哈哈。我留醫了兩、三日後便走了。走了之後並不是重吸，而是上大陸，醫生開了些藥給我，類似鎮靜劑。其實最大的毒癮是來自藍精靈，並不是白粉。因為藍精靈的效果比白粉更辛苦，會出現幻覺。差不多一個月後回到香港，便繼續找善導會，參加活動。

問：所以其實善導會的社工在你戒毒的過程也幫了很多。

答：是啊。我想是第二個動力，令我堅持到現在。

問：可以分享一下每當你進行犯罪活動的時候的心態嗎？會很害怕嗎？

答：第一次被拘捕的時候不是很大，只有差不多 20 歲，那時候也不懂得害怕，因為也不是殺人放火，不是很重罪，最多判兩三年，出來又是一條好漢，又重操故業。始終你跟那個圈子，很難離開犯法句號可能也和社團有關係，因為不是賺錢面試打架，所以離不開那個圈子便一定有機會犯法。

問：兄弟之間會很講求義氣嗎？有試過為了兄弟打架嗎？

答：都有，但是那些不用坐牢。

問：剛才提及過零八年最後一次是因為什麼事情被判入獄？

答：開賭。我在那區販毒，在附近有個賭檔。

問：三次入獄分別被判了多久？

答：第一次兩年，第二次販毒那次判了四年多，最後一次判了兩年。

問：每次入獄怎樣渡過毒癮發作很辛苦的時期？

答：監房有一些類似美沙酮的藥讓我們止癮，然後主要是戒心癮。身體上的反應一個多星期已經沒有什麼了，但剛剛開始時時直情連飯都吃不下，看到飯便會上吐。那時候應該是在荔枝角收押所，沒有了毒癮，變了小便，才會正式讓我去監房。

問：所以出來後重吸主要都是因為心癮。

答：是啊。經常心軟，覺得吃一次不會上癮。但吸過毒的人重吸是很容易會重新依賴的。

問：所以那時候之所以會重吸，主要是因為你的生活圈子沒有太大的變化，出來以後也是和那些人見面。

答：是啊。

問：後來是否因為接觸了善導會，才導致你的生活圈子有所變化？

答：是啊，那時開始才接觸到那些所謂正常人，哈哈。因為我由細到大都未有正式上過班，我的第一份工作是一一年駕駛小巴。

問：一一年是已經接觸了善導會嗎？

答：對，是零九年第一次接觸的。因為我爸爸是開店舖的，所以零九年到一一年都是在店舖幫忙。爸爸去世之後店舖沒有再做，我才出來駕駛小巴。原本是全職的，但後來變兼職，因為要回來善導會幫忙開小組，搞活動。

問：第一次有正式的工作感覺如何？

答：因為不用再以前那些壓力，因為始終販毒和在社團裏面都會整天提心吊膽犯法也會怕被警察拘捕，又害怕那些仇家，不知道在哪裏等着襲擊你。那種精神壓力十分大。

問：為什麼即使收入減少那麼多，也願意繼續做下去？

答：都是為了孩子們，而且不想令社工失望。

問：零九年接觸了善導會後，依然是有反反覆覆吸毒嗎？

答：對的。直至我爸爸過世，才下定決心覺得自己有責任擔當家庭支柱，然後便戒毒和脫離黑社會。一一年正式戒完毒以後才離開黑社會的，因為也害怕自己脫離黑社會以後會沒有了依靠，始終有社團背景會有很多途徑賺非法錢。

問：你脫離了舊有的圈子後，現在還有跟他們聯絡嗎？

答：在街上碰到會打招呼，大家知道我不再在那個圈子也不會怎麼聯絡我，所以見到面有事打打招呼，聊幾句天。

問：那時想離開黑社會有什麼困難嗎？

答：對我來說也不是很難，因為我交回以前的地盤給社團，他們求之不得，很多人爭着想要。

問：現在有了新的生活，回望過去的自己有什麼感受？

答：好像發了場夢。我常常說我現在經歷了兩個人生，很多人的一生都很平淡的，我很慶幸自己一生人經歷了兩個完全不同世界的生活，但也有些遺憾，有點自責為什麼要和那班那麼要好的同黨走上了那條路。也很唏噓，但也改變不了什麼，只好分享自己的經歷他人，告誡他們。因為我們也會做分享，有很多人依然沉淪於毒品，不懂得害怕。毒品真的可以令人一無所有，妻離子散，傾家蕩產，家徒四壁。

問：現在的生活圈子最不同的地方是什麼？在正行認識的那些人和以前的人有什麼不同？

答：在不同是自然一些，不需要那麼大戒心，因為沒有什麼利益衝突，以前在社團除了自己之外不會相信其他人，因為很容易會出賣你。現在走在街上也比較放心，那種安逸覺得很舒服。

問：你現在還有什麼活動空間拓闊自己的生活圈子嗎？除了在善導會做義工和上班，空閒時候還會做些什麼？

答：因為我有個嗜好是釣魚，所以會約那班釣魚朋友一起出去，釣魚也不會有衝突，都很充實。

問：你覺得那些更生康復計劃和社區中心對你們的幫助大嗎？

答：我覺得最大的幫助是他們願意聆聽，因為當初我和社工並不是希望有什麼物質上的交換，純粹是希望有個人聊天。

問：有什麼動力令你一直在這裏做義工去幫助現在還在吸毒的人？

答：因為這個身份可以警惕到自己，作為朋輩，至少我對得起自己身份，要以身作則。雖然說做義工是幫其他人，但是也幫了自己。也很大程度上阻止了自己回去舊有的圈子，始終這個身份令我覺得有責任做好自己。

問：做義工的同時會一直碰到吸毒的人，曾否有一瞬間動搖想重吸？

答：我沒有，我連煙也戒了，所以也不是很擔心會再重吸。

問：你目前為止有成功感化過其他人嗎？

答：都有幾個，有個朋輩也因為我戒煙而戒了煙，大家會有很多細微的變化，很欣慰。以前不會等到綠燈才過馬路，但現在帶隊活動都帶領他們遵守法則，才發現原來過馬路也要學習，哈哈。見到這些改變自己也很滿足，有些人成功戒毒當然更好。

問：現在的收入減少了那麼多，生活上會有什麼變化嗎？

答：現在每個月只賺一萬多元，以前一晚也用完了。但其實也已經足夠，吃東西也不是需要大魚大肉。最大的分別是以前駕駛私家車，現在駕駛電單車，哈哈。以前最大的開支都是毒品。

問：最後想問一下你，在種種經歷有什麼得着嗎？有學習到些什麼嗎？

答：得着就是深切地明白到一定不能再碰毒品，第二便是不要加入社團，是可以選擇的。

問：當初你選擇加入社團，是朋友的影響還是自己的決心較多？

答：自己。因為我父母開店舖，很少時間你會我，經常只有自己一個，所以便想找其他人一起玩，希望有人認同自己。

問：都是因為種種原因令你誤入歧途。但也很高興看見你現在有這樣的轉變。

答：對，非常充實，也學習到很多新技能。

問：很感謝你的分享。