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Investigating the Interrelationship between the Desire for a
Cohesive Community and Opioid Abuse: A
Neuropsychological Study of *Demon Copperhead*

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Abstract

Foregrounding the increasing global crisis of opioids as the “leading cause of deaths in fatal overdoses,” the *World Drug Report 2023*, published by the United Nations Office on Drugs and Crime (UNODC), mentioned that in 2021 more than 80,000 people died due to opioid overdose in the United States of America. The Centers for Disease Control and Prevention (CDC), the national public health protection agency in the United States, has reported that “the predicted number of drug overdose deaths showed an increase of 0.5% from the 12 months ending in December 2021 to the 12 months ending in December 2022, from 109,179 to 179,680” (“Provisional Data”). Although the trajectory of opioid use disorders (OUDs) has affected different sociodemographic groups in the country since its first wave in the 1990s, teenagers in poverty-stricken rural areas are more vulnerable to such addiction (Keyes et al.). Poor parental guidance, impoverishment, troubled childhoods, detrimental familial structure, scarce opportunities, and accessibility to opioids are often considered to be the primary risk factors for unprivileged teenagers to develop a psychic reliance on opioids for engendering a perpetual sense of contentment. According to the incentive sensitization theory, the persistent desire to transcend physical and psychical limitations for a sense of relief, triggered by chronic drug misuse, often evokes a sense of “wanting” or incentive salience, a compulsive inclination towards drug-associated stimuli (Berridge and Robinson, “Drug Addiction” 22). This intense desire of “wanting” often generates a perpetual sensitization of the mesolimbic systems in the brain which is also activated by mental representations of drug-associated cues (Robinson and Berridge 3139). Focusing on drug-induced changes in the brain such as hypersensitization and neuroadaptation, this study analyzes Barbara Kingsolver’s *Demon*

Copperhead, a modern reimagining of *David Copperfield* by Charles Dickens. The selected text addresses primarily some pertinent socio-political crises, such as the poor foster care system, poverty, and the engrossing opioid endemic in Southern Appalachia. However, this study attempts to analyze the precarious state of some characters, who become addicted to opioids seeking recognition from peer groups and perpetual psychic stability, in the selected text from a neuropsychological perspective.

Keywords: Opioid Crisis, “Wanting,” Incentive Sensitization Theory, Vulnerability, Resilience.

Introduction

The desire to seek recognition and belongingness usually serves as a detrimental determinant to convert an individual susceptible to the decisions and whims of others. Such desire is primarily perpetuated by unresolved cognitive and emotional deficiencies which often result in identity diffusion. If “consolidated identity with flexible and adaptive functioning” enables one to form constructive relationships with clear goals in life, identity diffusion occurs through the “loss of capacity for self-definition and commitment to values, goals, or relationships, and a painful sense of incoherence” (Goth et al. 3). While identity crisis as “an inability to maintain or re-establish a biographical narrative” can transpire in different phases of life, it is the adolescents and teenagers who are vulnerable to identity diffusion (Gligorov 37). With a perpetual tenacity to seek external validations for evaluating their self-worth, such receptive mindscapes are often exploited by varied coercive and ideological apparatuses. The increasing abuses of hedonistic substances like oxycontin, fentanyl, morphine, and heroin in the name of alleviating psychological inhibitions reinforce the perpetuating crises of drug subculture, which is primarily caused by the “four clusters of cultural elements,” such as “(1) alienation from mainstream society, (2) strong social ties with other drug users, (3) feelings of excitement/pleasure and (4) feelings of effectiveness/mastery deriving from illicit drug use and other associated risky behaviors” (Moshier et al. 813). The initial expectation of

gaining pleasure from opioids and the eventual exposure to its repeated abuses “to avoid unpleasant withdrawal symptoms that would ensue upon the cessation of use” deviate young individuals from mainstream values (Berridge and Robinson, “Drug Addiction” 24).

Emphasizing this psychosocial oscillation between experiencing the indulgences of opioids and the intermittent resilience to abstain from those substances, this study, in congruence with the incentive sensitization theory, analyzes Barbara Kingsolver’s 2022 novel *Demon Copperhead*. Set in southern Appalachia, the novel delineates how indecisive teenagers, suffering from poverty and looking for belonging, succumb to the detrimental effects of opioids. Accentuating the traditional definition of constructive identity that usually accompanies securing a place in a cohesive community, Kingsolver poignantly highlights how youths in their search for a responsible community and emotional relief fall into precarity due to becoming attached to different people who introduce them to opioid addiction and encourage them to perpetuate the same. In reference to Kingsolver’s novel, this study further seeks to investigate the materialist conditions that perpetuate the drug subculture in rural Appalachia. If, in his semiautobiographical novel, Dickens criticizes the effects of infiltrated capitalism in mid-nineteenth century England through his realistic depictions of institutional poverty, child labour, poor education system, and prostitution, Kingsolver explores the intricate mechanisms of biopolitical power in Appalachia that are manoeuvred by pharmaceutical companies, coal industries, the controllers of poor foster care, and so on.

Opioid Crisis and Appalachia

With the increasing death rates caused by fatal overdoses of synthetic opioids, such as fentanyl, carfentanil, oxycodone, methadone, and pethidine, in different parts of the world like the United States of America, Canada, Mexico, and Brazil, the opioid epidemic can be defined as a global crisis. As “one of the most extensive public health crises,” the opioid epidemic “with opioid overdose deaths now ranked as a leading cause of injury-related death in the United States” (Rengifo et al. 1). The

trajectory of the opioid crisis in the U.S.A. can be traced back to the 1990s, when the first wave broke out as a result of overprescribing “prescription opioids” which “incrementally and consistently outpaced annual heroin death rates” (Madras 441). The second wave began in 2010 when substance abuse transitioned from prescribed opioid pills to heroin as the “growing dependence” of the young users “required larger and more consistent pill supplies than they could obtain either by prescription or on the street” (Ciccarone, “The Triple Wave” 184). It was in 2013 that the third wave started with “significant increases in overdose deaths involving synthetic opioids, particularly those involving illicitly manufactured fentanyl” (“Understanding the Opioid”). The fourth wave is argued to have begun in 2016, in which “high mortality involving cocaine and methamphetamine use has been gathering force” (Ciccarone, “The Rise of Illicit” 348).

In the U.S.A., from 1999 to 2021, approximately 645,000 people died from the damaging effects of prescribed and illicitly manufactured opioids (“Understanding the Opioid”). According to the data published by the Centers for Disease Control and Prevention (CDC), the total number of “overdose deaths involving opioids, including prescription opioids, heroin, and synthetic opioids (like fentanyl), in 2021 was 10 times the number in 1999. Overdoses involving opioids killed more than 80,000 people in 2021, and nearly 88% of those deaths involved synthetic opioids” (“Data Overview”). The provisional data released by the National Center for Health Statistics (NCHS) mentioned that “82,998 predicted opioid-involved drug overdose deaths in the United States for the 12-month period ending in December 2022 is an increase from 82,310 in the previous year” (“Provisional Data”).

Among all the territories affected by the pernicious repercussions of the opioid epidemic, the condition of the Appalachian region has been a severe one for the last two decades. According to the demographic statistics published by the Appalachian Regional Commission (ARC), “Appalachia is made up of 423 counties across 13 states and spans 206,000 square miles, from southern New York to northern Mississippi” and its “26.3 million residents live in parts of Alabama, Georgia, Kentucky, Maryland, Mississippi, New York, North Carolina, Ohio,

Pennsylvania, South Carolina, Tennessee, and Virginia, and all of West Virginia” (“Appalachian Region”). Despite its abundant natural resources like coal, minerals, and forests, Appalachia has been engaged in mediating several survival hardships, such as “rural poverty, social stratification, unemployment, lack of social services, poor education, and poorly developed infrastructure” (Smith). According to the Appalachia’s County Economic Status Report for the fiscal year 2022, published by ARC, “81 counties are classified as distressed, 95 are classified as at-risk, 231 are classified as transitional, 12 are classified as competitive, and 4 are classified as attainment” (“County Economic Status”).

If opioid addiction is argued to be more or less proportional to poverty and lack of opportunities (Bonnie et al. 41), “the highest overdose rates in 2015” in West Virginia, Kentucky, and Ohio that were grouped with New Hampshire supplement such propositions (Maguire et al. 1480). Among varied quotidian challenges, such as “transportation, housing, access to care, education, and steady employment,” Appalachia was disproportionately impacted by the substance use disorder in such a severe manner that “in 2021 overdose-related mortality rates for people ages 25 – 54 was 72 percent higher in the region than the rest of the country” (“Addressing Substance”). Different socio-cultural factors, like economic depression, a poor education system, and lack of healthcare facilities are often argued to be the predominant causes of the unprecedented outspread of the opioid crisis in the Appalachian region. Moreover, the increase in “polydrug toxicity,” i.e., taking multiple drugs to have added stimulations on the body and the brain, also emerges as one of the leading causes of “drug-related deaths” in rural territories like Appalachia (Schalkoff et al. 35).

Dynamics of Community, Belonging, and the Opioids Marketing in *Demon Copperhead*

The empathetic aspects of “community resilience” of the Appalachian populace are supposed to have a collective ability “to adapt to a stressor; in this case, opioid misuse that has led to the current opioid crisis” (Roberson et al. 29). Concurrently, to establish “community-based

recovery ecosystems to save lives and strengthen the Region,” the Appalachian Regional Commission (ARC) supports the implementation of “multi-prolonged” approaches such as the “[i]nvestments Supporting Partnerships in Recovery Ecosystems (INSPIRE) Initiative” (“Addressing Substance”). However, several discriminatory stereotypes have been infused in the popular depictions of Appalachians, such as the epithet “hillbilly,” which “long hurled at Appalachians is one of the oldest examples of locational prejudice in U.S. history” (Rhee and Scott 533), the “ridicule and criticism related to their distinct dialect, pronunciation, and patterns of communication” (Cummings-Lilly and Forrest-Bank 126–127), and so on. In this context, in *Demon Copperhead*, Kingsolver criticizes classism or social prejudice against the Appalachians. The principles of class discrimination generally uphold the superiority of the upper class at the cost of the segregation and subjugation of the lower class. Such power disparity has an unswerving connection not only to an essentialized idea of belonging but also to the strategic manipulations for encouraging socio-cultural seclusion. The essentialist determination to establish a homogenous community often includes the standard definitions of class, social status, income, and social network which eventually force some individuals, who are unable to fulfill those requisites, to seek belongingness through the formation of marginalized communities.

As young people are more eager to be part of a well-accepted set of identities, Kingsolver explicates how some unprivileged young individuals become vulnerable to the illusive identity patterns induced by substance use disorder. Describing an inclusive assimilation of arts and politics, Kingsolver always deciphers the fragmented but well-demarcated channels of socio-political structure that often remain suppressed under the generic designations of class and community. Her depiction of the intricacies of communities always explores the multifaceted nature of existential politics. The perpetuation of her idea of how an inclusive community can be beneficial for the well-being of all its members can be seen in her first novel, *The Bean Trees*, published in 1988, in which the personal quest of the protagonist, Taylor Greer, for an independent life, deals with her emotional assimilation into a new community.

If a harmonious cohabitation of individual traits with the egalitarian values of an inclusive community is the cornerstone of her first novel, the necessity of developing a collective memory can also be discerned in her subsequent publications. In *Animal Dreams*, published in 1990, the characters live in an arid community in Grace, Arizona, where “the very things that make the town seem inhospitable – the aridity, the problems with the river, the smallness – are the very things that provide a strong sense of community and connect the people to each other” (Magee 15). *Pigs in Heaven*, published in 1993, points out how love and compassion can form a global community against the background of the socio-cultural disparities faced by Native-American children when they are detached from their distinct culture. The concept of community as a space for supporting and nurturing relationships is also perpetuated in Kingsolver’s next novel, and, in this regard, *Demon Copperhead* is not an exception. However, it can be argued that the distinct traits that give the latter novel a sense of uniqueness rely on its astute portrayal of class discrimination against the Appalachian populace, which can also be considered a contributing factor to the opioid crisis there.

Arguably, one of the possible causes of substance use disorder among several Appalachians is the “low social capital (a construct including civic management, sense of community belonging, and community trust) compared to other regions in the U.S.” (Schalkoff et al. 9). However, as a constructive commentator of social justice, in *Demon Copperhead*, Kingsolver demonstrates that the dynamics of community politics that are prevalent in Appalachia are shaped by the negative stereotypes perpetuated by mainstream communities. Her treatment of this cultural disparity can be perceived through her reference to the quotidian hardships of the *Dalits* in India and its relation to Demon’s existential conflicts. Kingsolver’s concern for social justice is reflected in her poignant delineation of the detrimental changes in the Appalachian region after the exploitation of natural resources by industrialists and coal miners: “Once upon a time we had our honest living that was God and country. Then the world turns and there’s no God anymore, no country, but it’s still in your blood that coal is God’s gift and you want to believe” (280). If structural poverty can be said to cause “a combination of different

constraints (affecting either them directly or their close family members), including sickness or disability, alcohol and/or substance abuse crime, and domestic violence” (Schotte 13), *Demon Copperhead* hints at the pernicious impact of structural poverty as the root cause of the Appalachians’ hardships.

Kingsolver’s portrayals of economic hardships, poor foster care, child poverty, accessibility to opioid abuse, and deprivation of natural resources in the Appalachian region focus on almost the same socio-cultural crises that Charles Dickens emphasized in his bildungsroman *David Copperfield*. While acknowledging Dickens’s *David Copperfield* as the source of her adaptation in the form of *Demon Copperhead* in the afterword, Kingsolver states that “I’m grateful to Charles Dickens for writing *David Copperfield*, his impassioned critique of institutional poverty and its damaging effects on children in his society. Those problems are still with us” (547). As “the first great urban novelist in England,” Dickens “used fiction effectively to criticize economic, social, and moral abuses in the Victorian era” (Diniejko, “Charles Dickens”). In *David Copperfield*, Dickens criticizes child poverty through the depictions of the miserable education system controlled by domineering teachers like Mr. Creakle in the boarding school, Salem House; the employment of poor children to paste labels on bottles or “corks to be fitted to them, or seals to be put upon the corks, or finished bottles to be packed in casks” in a warehouse named “Murdstone and Grinby’s” which is “discoloured with dirt and smoke of a hundred years” (Dickens 151); the constant disparity in terms of enjoying privileges between the upper class and the lower class, as represented by characters like James Steerforth and David Copperfield respectively, and so on.

Although “psychoactive drugs (particularly opium)” were used profusely in Victorian Britain and “affected all classes of society,” “their use was not regarded as a serious social and medical problem until the early twentieth century, when doctors began to warn about the dangers of addiction” (Diniejko, “Victorian Drug”). Although Dickens highlights the ways in which poor orphans, women, and other marginalized people are exploited in Victorian society, his narrative does not focus on the harmful effects of addiction. However, Dickens uses scattered references to

alcohol and tobacco as pernicious elements of social life. For instance, the late husband of David's landlady, Mrs. Crupp, "died of drink and smoke" (Dickens 333), and David celebrates his semi-independency with Steerforth and Markham by consuming alcohol: "Everything was good; we did not spare the wine; and he exerted himself so brilliantly to make the thing pass off well, that there was no pause in our festivity" (336).

On the other hand, in her adaptation of *David Copperfield*, Kingsolver portrays the plight of the Appalachians through the damaging influence of opioids. In Dickens's narrative, a higher social class and possession of wealth are depicted as the basic requirements for a sustainable life in nineteenth-century England. Kingsolver also illustrates how the differences between the upper class and the lower class maliciously impact the upbringing of adolescents and teenagers. It is through the childhood experience of Mr. Ghali, the owner of Golly's Market, in India, that the issue of social ostracization is explicitly introduced in the narrative:

He said his parents, sisters, and all their dump friends were so-called no-toucher people. Meaning if they touched food or anything at all, it was like, doomed. Regular people would have none of it. Same bodies, no shaking hands. If he let his *shadow* touch a high-class person, they'd call the cops to come beat the hell out of him. He said a name for this kind of people that sounded like "dolly." (Kingsolver 187)

Like most of the adherents to the mainstream culture, Mr. Ghali feels elated to consider how fortunate he is in the U.S. as there are no such discriminating practices in his known surroundings. However, through his experiential learning, Demon ponders on the spreading of similar prejudices in his region as well, especially for the backward sections of society in terms of lacking opportunities and privileges: "A lot of people don't ever get touched. Not even high-fived after a rim shot. I should know. Little kids chase around yelling 'Cooties,' which are a made-up thing. But if we had a word for that type of person in America, it would get used" (188).

Demon's feeling of otherness also emerges when he comes into contact with his parental grandmother, Betsy Woodall. As he feels alienated from his known community, he allows others to make decisions

for him. His self-reflective thoughts often equate his identity with a “non-toucher kid” (202). His emotional fluctuations can be attributed to the prevalent essentialized characteristics of social capital that often evade criticisms in the name of convention, culture, and community. A shift in social capital can occur when “we decide that the real transformation is having citizens – strangers up to now – sitting in circles, learning to trust each other, and deciding how to make a place better” (Block 189). As a result of his mother’s drug addiction and the unpropitious environment at home because of her abusive relationship with Stoner, Demon fails to imagine the scattered possibilities in his community, and he remains focused only on its hardships.

This critical pattern of evaluating both people and situations transforms him into an indecisive individual. His psychological and emotional disturbances for lacking a sense of belongingness are temporarily alleviated by the prospects of being a rising football star at Jonesville Middle:

So the impossible happened. In due time, a school would be owned by Demon Copperhead in his Members Only jacket. He should have been the happiest damn fool ever. But, no, he’s waiting for the shit to hit the fan, looking behind whoever is being nice to him that day to see what’s coming. Still your jack-shit homeless orphan, just faking it in nice clothes. I’d done nothing to deserve good luck, and I knew what people are made of. Sooner or later they will turn on you. Or die. (Kingsolver 255)

Kingsolver paradoxically represents social prejudice. It is primarily through negative stereotypes that the influential people segregate the people with a lower social class in Appalachia, and, by using the same stereotypes, the coal mining companies take the ethical liberty to exploit such regions in terms of extracting coal and minerals.

The exploitation of natural resources and the ensuing poverty in Appalachia are also significant reasons for preventing the people of Appalachia from imagining and experiencing an inclusive community. When Mr. Armstrong, an English teacher of seventh and eighth grade at Demon’s school, explains how the manipulated stereotypes by influential outsiders perpetuate Appalachian hardships, the students hesitate to believe his argument, as he himself is an outsider: “He said they made us

out to be animals so they wouldn't feel bad about taking everything we had and leaving up us the creek. But Mr. Armstrong wasn't from here, so we didn't believe him" (265).

Kingsolver emphasizes that a sense of belonging is important for an inclusive community and the recognition of such a community depends on the ethical circulation of its egalitarian principles to others. The "social support and psychological sense of community" are considered to have crucial roles in "the recovery of individuals who have had problems with substance abuse" (Stevens et al. 17). The integration of individual requirements based on shared values is a key aspect in order to construct a sense of community. While "components of power, resources, conformity, and cohesiveness" are defined as influential components for inducing a sense of community (Stevens et al. 18), Kingsolver explicates how the Appalachian region is exploited and how it is prevented from constructing an effective community. In this context, *Demon* lays bare the devastated state of Lee County, as he states that "[e]verything that could be taken is gone. Mountains left with their heads blown off, rivers running black. My people are dead of trying, or headed that way, addicted as we are keeping ourselves alive. There's no more blood here to give, just war wounds. Madness. A world of pain, looking to be killed" (Kingsolver 280). If distinct individuality is a fundamental prerequisite to the formation of agency, *Demon*, being part of a conflicted community, fails to assert it straightforwardly. Like some characters in the novel, he suffers a lot to adapt himself to the changes in his surroundings. As a result, he becomes indecisive and gets affected by others' opinions. It has often been argued that agency is situated (Barandiaran et al. 379), and, in *Demon*'s case, he becomes a victim of his situation. The definition of agency also pertains to interactional asymmetry, which refers to how an individual shapes the normativity of his or her surroundings through a dialogic discourse. However, Kingsolver suggests that the dissolution of a participatory parity in the formation of an egalitarian community causes most of the young characters in the novel, who have failed to attain any agency, to succumb to addiction in the hope of redefining their identity. Moreover, these young characters become more vulnerable to opioid addiction due to their easy accessibility to addictive substances like opioids, and it happens

because of the manipulative marketing strategies of some representatives of pharmaceutical companies.

The usage of effective marketing strategies to influence consumer behaviour is not a new phenomenon. In order to persuade consumers, companies advertise their products through different promotional tools such as “samples, coupons, rebates, price packs, premiums (gifts), frequency programs, contests/ sweepstakes/ games, patronage awards, free trials, product warranties, tie-in-promotions, cross-promotions, and point-of-purchase display” (Ofosu–Boateng 25). As a result of such business tactics, consumers’ purchasing behaviour gets affected. However, when the well-being of public health is controlled by pharmaceutical companies through manipulated marketing strategies, the question of moral disengagement comes to the forefront. If some contemplative socio-cultural prejudices are crucial determinants for preventing people’s sense of belonging to a certain community, the perpetrators of financial and physical exploitations on the same community members are also responsible for aggrandizing the situation. Kingsolver criticizes the self-indulgence of pharmaceutical companies in promoting the usage of opioids in Appalachia. The severity of the poor patients is described through the brawl between June, a nurse in Knoxville, and Kent, a pharmaceutical representative: “June was just choosing not to give out any more of Kent’s poison. . . . He said she was uncompassionate to people in pain. June said if he wasn’t such a damn coward he’d come down to her clinic and see all decent people with hepatitis from needles, and their family farms bankrupt in six months” (Kingsolver 292). The indication is that it is not only Kent, but there are more like him who work for pharmaceutical companies and force doctors to prescribe harmful opioids regularly.

Substance use is a way of avoiding real-life problems in order to perceive a “false sense of security,” and it is also a “vicious cycle because when the drugs and alcohol are not present, all the emotions they are unable to deal with come racing right back” (McClernon). The “Opioid Withdrawal Symptoms” are quite similar to “other substance use disorders” for “abruptly stopping use opioids leads to withdrawal symptoms, including generalized pain, chills, cramps, diarrhea, dilated

pupils, restlessness, anxiety, nausea, vomiting, insomnia, and other intense cravings” (“Opioid Use Disorder”). Because of the temptation of this illusory sense of identity, affected regions, like Appalachia, are suffering from a generational crisis. Moreover, deception in marketing strategies by the manufacturing companies is one of the foremost reasons for the extensiveness of the opioid crisis: “Opioid products . . . were defectively designed because companies failed to include safety mechanisms, such as an antagonist agent or temper-resistant formulation. Manufacturers also purportedly failed to adequately warn about addiction risks on drug packaging and in promotional activities” (Haffajee and Mello 2301).

Kingsolver carries forth the Dickensian critique of institutional poverty on the juvenile consciousness through her depiction of the pernicious strategies employed by opioid manufacturing companies like Purdue Pharma, the manufacturer of OxyContin, that have similar impacts on young addicted individuals. Through June’s narration, Kingsolver discusses how strategically the opioid crisis has persisted by the makers of opioids like Purdue: “She said Purdue looked at data and everything with their computers, and hand-picked targets like Lee County that were gold mines. They actually looked up which doctors had the most pain patients on disability, and sent out their drugs reps for the full offensive” (Kingsolver 416). During Demon’s injury, he also becomes a victim of this power structure that is controlled by the makers of opioids and their assigned doctors. Converting Demon’s leg injury into an excuse, Dr. Watts prescribes a painkiller called Lortab, and Demon gets swayed by its temporary euphoric effects. He narrates the aftereffects of Lortab: “I stopped caring around this point because the little white submarine-shaped pill he’d given me to swallow was starting to sing its pretty song in my head. Cool relief, let’s you and me go cruising Main. Just hold my hand. Lortab was her name. Blessed, blessed lady” (234). It is not only Demon but some other young characters, like Maggot, Dori, and Emmy, who also become victims of substance use disorder. Always seeking emotional relief to emerge from their traumatic pasts and troublesome present, they are misled to find solace in opioid use. If their conflictual relationships with an inclusive community are defined as crucial determinants in preventing their desire to achieve belongingness, it is also the exploitative

marketing policies of opioid manufacturing companies that delude the characters with a false sense of identity.

“Wanting,” “Liking,” and Resilience

Many evolving subcultural identities are criticized for perpetuating drug subcultures. The definition of belongingness in subcultures is often questioned because it popularizes the illusive efficacy of drugs. While the formation of a drug subculture usually includes the abuse of drugs, Kingsolver seems to argue that, in the Appalachian region, it is the substance use disorder that engenders different subcultural communities. Criticizing the calculative circulation of opioids in Appalachia, Kingsolver notes that the industrialists and business organizations have jeopardized the lives of young individuals for their financial benefit, as repeated abuses of drugs impact their decision-making sense. Moreover, as this study attempts to argue with the help of some fundamental precepts of the incentive sensitization theory, opioid-induced sensations affect their sense of recognition and belonging.

Defining the incentive sensitization theory of addiction, Terry Robinson and Kent Berridge mention that “repeated exposure to potentially addictive drugs can, in susceptible individuals and under particular circumstances, persistently change brain cells and circuits that normally regulate the attribution of incentive salience to stimuli, a psychological process involved in motivated behaviour” (3137). K. Berridge and T. Robinson also mention that “the most important of these psychological changes is a persistent ‘sensitization’ or hypersensitivity to the incentive motivational effects of drugs and drug-associated stimuli” (“Drug Addiction” 22). It is due to these persistent motivational effects and their resulting sensitization that a “pathological motivation for drugs” is produced in the brain which is also termed as “wanting” (Berridge and Robinson, “Drug Addiction” 22). The influence of incentive salience or “wanting” is uniquely strong, and its impression can remain in the mesolimbic systems even after a prolonged gap of drug addiction. Analyzing the intensity of “wanting” or the mesolimbic incentive salience, Berridge and Robinson state that “[t]he ordinary sense of wanting

(without quotation marks) refers to a cognitive desire with a declarative goal. However, incentive salience ‘wanting’ is less connected to cognitive goals and more tightly linked to reward cues, making those cues attention-grabbing and attractive” (Berridge and Robinson, “Liking, Wanting” 671).

Without looking for external stimuli, when Demon is manipulated to use OxyContin, he gradually becomes accustomed to its euphoric sensation. According to his confession, following his coach’s advice, he tries to quit it but fails to do so:

I did what he said, or tried. Every day. Until I was hiding puke in my balled-up jacket and swamp-sacking my bed sheets. Then I’d give in, take a couple of pills and start again. Usually some percs and half an oxy in the morning would get me through school as a functioning being, and then afternoon and evening were just so many hours to get through until, until. Until the next hour that’s not completely horrible, bought and paid for with another pill. (363)

This psychological and physiological penchant of Demon for OxyContin can be analyzed through the sustaining propensity of “wanting.” Robinson and Berridge point out that “[s]ensitized incentive salience can be manifest in behaviour via either implicit (as unconscious wanting) or explicit (as conscious craving) processes, depending on circumstances” (3137). Demon’s desire for pills does not let him focus on anything constructive, which also takes a severe form when he starts to feel that his stability can only come from those substances. Though he is supposed to take OxyContin to get rid of his physical injury, he becomes so addicted to those pills that the pain appears to be a mere excuse. Demon’s condition can be perceived through his self-reflective narration of the damaging influence of opioids:

Pain was not the issue. Pain is just like this thing, like a noise or a really bad smell. Here’s you, there’s the pain, you bump fists and make your deal. What I’m discussing is a feeling up inside your blood and lungs, like you’ve been snakebit from the inside. Shivering, loose-boweled, a body you want nobody to get anywhere close to until you get it fixed. The issue is: how soon will this bottle run out. (363)

Kingsolver explains that it is not only Demon who suffers from this opioid crisis. There are other characters like Dori, Emmy, and Maggot,

who also face the same fate, probably in a more severe manner. After losing her father, Dori tries to find emotional solace in opioids but is unable to find peace and remains addicted to those substances. The aftereffects of the pain of withdrawal are defined as “[s]ensitization-related changes in the brain, which can persist long after withdrawal ends, provide a mechanism to explain why addicts continue to ‘want’ drugs and are liable to relapse even after long periods of abstinence and even in the absence of a negative affective state” (Berridge and Robinson, “Drug Addiction” 28). Dori cannot tolerate a momentary gap in her craving for addiction as she is always experiencing the pain of withdrawal. She even loses her rational skills to handle an existential crisis, as she asks Demon for morphine after her miscarriage. Her desire to seek belonging, for which she starts a relationship with Demon, is replaced with her excessive dependency on substances, and, eventually, she dies from an overdose.

Emmy is also a victim of the treacherous implications of drugs. Despite having had a favourable upbringing from Aunt June, Emmy fails to make a correlation between her distinct individuality and the deficient culture in the Appalachian region. She falls into the trap of Fast Forward, a drug dealer, like Dr. Watts. After beginning her life as a promising individual, she gets settled in rehab for three years after her family finds her delirious and half-naked in a secluded room. Though all these characters lead more or less different lifestyles, the common thread that links them together is their similar desire to acquire a sense of belonging and their subsequent struggles with the opioid crisis. Without realizing the consequences, all of them were addicted to opioids, and gradually, they became the victims of “wanting.”

However, Demon’s emergence from his traumatic childhood memories and opioid addiction shows the spirit of resilience in him. After leading a life as a “sober living resident” for more than three years, he returns to Lee County with the realization that “I mean yes, you want money and a job, but there’s a hundred other things you do for getting by, especially older people and farmers with crops, tomato, gardens, and such” (516). Demon’s psychological transformation, especially his indifference towards addiction, can be analyzed through the different brain mechanisms of “wanting” and “liking.” According to the incentive

sensitization theory of addiction, Berridge and Robinson define the distinction between “wanting” and “liking” as “repeated drug use sensitizes only the neural systems that mediate the motivational process of incentive salience (‘wanting’) but not the neural systems that mediate the pleasurable effects of drugs (‘liking’)” (“Drug Addiction” 27). It is through his strenuous adaptation skills at rehab that Demon starts to give importance to the pleasurable aspects by intentionally suppressing the aftereffects of the pain of withdrawal. His indomitable spirit to reorganize his life can be discerned from his self-created tactics: “I followed my mother’s footsteps and got hired as a stocker at Walmart Supercenter. Unlike Mom, I was probably the soberest cracker in the whole big box, and quickly worked my way up the career ladder to produce. I avoided the employee smoking room aka drug-exchange HQ, and found no real downside to the job” (513). By focusing on maintaining a sober life, Demon’s “liking” and “wanting” are dissociated, and he comes up with the realization that “You come in thinking you’ve lost all there is to lose, then find out there are things you never knew were on the table” (512). Demon’s intentional reconnection with characters like June, Agnes, and Coach Winfield suggests his improved sense of coping mechanisms for recognizing their support and kindness towards him. This attitude affirms his psychological resilience to form belongingness without the opioid-induced sense of emotional relief.

Conclusion

Seeking belongingness is a fundamental impetus of human psychology. In the absence of a linear trajectory in order to become a part of the mainstream culture, an individual’s identity is often negotiated between the prevalent tendency to adopt the mainstream cultural values and the gradual internalization of feelings of inadequacy and deficiency. While social disgrace is often used as a way of segregating such individuals from the mainstream culture, their desire to acquire belongingness also encourages them to form a subcultural identity. Although the tendency to form subcultural identities emerges from the desire to have a cohesive community, without proper guidance, such tendencies are often

jeopardized by exploitative people. Kingsolver's representation of the opioid crisis in Appalachia illustrates how unprivileged young individuals become vulnerable to substance use disorder in their longing to enjoy a continuous period of happiness and avoid reality. Apart from analyzing the crucial factors that are responsible for the psychological struggles of the impoverished young generation in the Appalachian region, this study also maintains the idea that a better future can be created through individual reliance.

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