
Work Hard, Play Hard

I used to smoke weed, but I stopped it. Like, God doesn't want me to do it and I'm doing His will. So I've been three months without weed. I haven't drank since my last birthday. I'm 21. I should be barhopping like all the rest of the kids, but that's not me. I just want to do something with my life. Get somewhere, but that's kinda hard, when you're places like this.

—AMIR, SHADY ELMS PSYCHIATRIC EMERGENCY ROOM, DAY 2

In pictures posted on Facebook, James was often impeccably dressed, his curly dark hair carefully styled. Raised in a leafy suburb, he had well-educated parents and a gainfully employed father. Both of his parents were South Asian, born and educated outside the United States. They came to Texas for work before James was born. James, his mother, Mala, said during an interview, was “a friendly, playful kid.” Growing up, she thought James was “totally fine,” because he was “always invited to parties and had so many girlfriends.”

I first met James at a Starbucks near his parents' house, where he was living, two months after his initial hospitalization. I liked him right away. He was funny, sensitive, and charismatic. He weaved in and out of talking about things anyone who has been a young adult can understand—such as experimenting with substances and looking for love.

JAMES: I did weed since tenth grade, and I did acid [LSD] since like eleventh grade. So, [I have used substances] for a pretty long time.

NEELY: Why did you start?

JAMES: Because my friends did it. I was like—okay, if they're doing it, it must be fine because they seem normal.

NEELY: Right. So, you were goofing around?

JAMES: Yeah, pretty much. And then, after a while, it got addictive. [. . .]¹ The weed made me feel calmer. The acid I did for fun because it showed me cool visuals, and I like the head trips because it made me think that I was learning about the world.

I was not surprised to hear James talk about these experiences. The college students in my medical and psychological anthropology classes over the past decade freely discuss their experimentation with sex and substance use. James's generation, like many generations before his, enjoyed drinking alcohol, smoking pot, trying psychedelics, and listening to music or hanging out with friends, romantic partners, or potential hook-ups in a relatively safe space. After all, sexual experimentation and substance use can bring people closer together at times, enhancing much-needed social bonds.² And engaging in risky behaviors that I call playing hard—often exemplified in sexual pursuit and substance use exploration—is a key part of coming of age in American culture for young adults.

James worried me, though. Even though we were in public, in a Starbucks with an affluent crowd, James looked disheveled. His black shirt was speckled with dandruff and his hair was greasy. He smelled like rotting food, as though he had not showered for a while. He spoke quickly and tangentially, and he had a thousand thoughts that poured out in bursts, which made him hard to follow but fun to speak with overall.

James thought of himself as an aspiring hip-hop artist and regularly posted his music on internet sites, though he had not been discovered—yet. On social media, he tried to attract the “celebrities” he followed, posting pictures of himself partying or rapping, hoping they would notice him and want to be his friend. This seemed like typical adolescent behavior until James added that the celebrities frequently came to his house to get him but his parents kept blocking them from seeing him. For example, he told me, when Jay-Z came to the door, they told him that he wasn't home, but he was just in his room sleeping. Jay-Z then left a public post on Instagram letting James know what had happened using code words James knew were for him. James felt frustrated by his parents' refusal to let him be famous. He thought maybe they did not approve of all the drugs the celebrities used—they definitely did not like his own drug use—but James thought that was ridiculous and old-fashioned. His parents did not grow up in America, he explained, so they did not understand.

James told me that he tried to stay awake to meet the celebrities when they came to the door, but he had to sleep eventually. Sometimes he wandered outside the local airport arrival doors, smoking, pretending to be an Uber driver. He hoped to spot the celebrities who came to visit him before his parents could send them away. The celebrities were making this all clear to him on their Instagram feeds—leaving coded messages to let him know they were coming, which he appreciated. James was sure he was going to be famous.

I left the interview feeling uneasy.

Interviewed separately a few weeks later, Mala, James's mother, did not talk about the celebrities or her son's substance use. Her attention was focused on “the girl.” After James's fifth psychiatric hospitalization in a few months—his first hospitalizations ever—Mala thought James was suffering from a broken heart. His

whole life, Mala explained, she had let the pediatrician talk to James about “sexual health,” but she never thought to warn him to “guard your heart” or “watch for those emotions.”

“I never thought of that,” she said, her voice cracking.

The pediatrician told her that it was normal for people to take their first romantic relationship too seriously. So Mala told James to take it easy with “the girl stuff.” She added, “He was always playful, but in college he got attached to this girl, so . . .” She sighed.

When James was arrested for “an incident with this girl” that landed him in the psychiatric emergency room for the first time, Mala recalled, the pediatrician reminded her again that young people often take their first relationship too seriously. James was just too serious.

Mala advised James, “That is a good heart you’ve got. You’re not like one of those playboys. You’re actually valuing the girl, and if it hurts you, she’s not worth it.” Perhaps, she thought hopefully, he would learn his lesson and grow stronger. What his mother did not mention was that James’s behavior had driven his first love away.

In a different interview, James explained how he had forced his way into his ex-girlfriend’s car after she refused to see him anymore and told him she was with someone else. Once he was in her car:

I put my hands on her. She was screaming at me. I think I was in my psychosis state even then. I was doing a lot of marijuana, and that can induce psychosis. I was probably smoking cocaine that was laced with marijuana. Did a lot of acid [LSD]. I think she just got fed up with me doing drugs all the time, so she finally cheated on me—to push me away. But I got in her car, and she was not fine with it, so she told me to get out. Then I put my hands on her by accident. Like, on her wrist—not even harshly. I just grabbed them, and then I got out of her car, and I saw some guy pull up to her car, and I was like, “Is this the guy?” And then she drives to my work. So she tells the work people, gets me fired from over there, and then tells the police I was stalking her. So the cops come to my house. They said I wasn’t getting arrested, the charges were still pending, so they just took me to the mental hospital. That was the first time I had ever been to Shady Elms. I was there for about like a week, and they put me on antipsychotic drugs . . . for depression.

After this incident, James lost his job and was expelled from college. He could not enroll again for at least one year. In our early interviews, he blamed “the girl” more than anything. She cheated on him. End of story.

However, over time, his perspective shifted. He thought that the challenges he faced might be attributed in part to his heavy substance use and the power that it had over him. In a later interview, he reflected:

If I wasn’t on so many drugs, maybe I’d not have even got in her car. Maybe I’d have thought more rationally. Maybe I’d have called her up and said, “Hey, we’re done.”

That would've been the manliest thing to do [. . .] I was looking for, like, the truth in life, and just to help me to make choices in life and stuff. But, honestly, it was just putting me into this psychosis state that was just feeding me false lies—like false truths, actually. So it was pretty much just lying to me.

It took time, but eventually James could see the clear connection between his behavior and the “incident” with the girl that seriously diminished his moral agency with many of his intimate others. It was hard for others to see someone who used so many substances in irresponsible ways and then assaulted their girlfriend as a “good” person. First, his old friends no longer wanted to spend time with him. His girlfriend rejected him romantically. His workplace no longer saw him as a valued employee. The school administrators no longer respected him, and he lost his enrollment privileges. Not having a girlfriend or a job and not being in college amounted to a serious loss of the social bases of self-respect in James’s local moral world. He also lost many peopled opportunities in this fall from grace as his intimate others became reluctant to maintain their affiliation or give him another chance to try to be a good person. His substance misuse—which began, at least in part, as a socially acceptable way to fit in with his high school friends and be invited to lots of parties and have lots of girlfriends—became a key part of his loss of moral agency in college as it fueled—and was perhaps fueled by—his emerging psychosis.

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At first glance, James’s and Corrina’s stories are not that different from the experiences that have defined young Americans’ transition to adulthood for generations. Both graduated from high school, tried to break away from their parents by pursuing higher education, had a taste of the freedom of youth, experimented with substances, searched for love. This is how American adolescents acquire moral agency and become valued adults. They must leave home, work hard, play hard, and prove they can be “fun” while maintaining self-control, attracting a life partner, finding a new community, and becoming financially independent. American culture encourages young people to experiment with risky behaviors and fringe identities but has a narrow window of tolerance for what is ultimately acceptable. American adults who have successfully made this transition may view this time of experimentation as an important and expected part of their own youthful “glory days.” But for young people with early psychosis, this way of transitioning to adulthood is often perilous. For the youth in our study, this American-style rite of passage lacked the involvement of wise elders, relied on individual skill, and lured youths with mental health concerns into at times dangerous and isolating excesses with long-term consequences.³

Tapping into cross-cultural perspectives on adolescent development and moral agency, this chapter explores how American culture is especially toxic for young people with early psychosis. Some of the very ways that American culture

encourages young people to acquire moral agency and become valued adults—breaking away from family, acting independently, working hard, and playing hard—are uniquely dangerous to those who are highly vulnerable to stress and developing symptoms of psychosis. Unfortunately, what can be “fun” and promote social bonding for others can be disastrous for them. In our social media–fueled world, these disasters can be witnessed by more people than ever before. Online social interactions can be easily misread, and misunderstandings and missteps made online are hard to take back. James thought the celebrities on his Instagram feed were communicating with him, and for Corrina, her life was a lie, she was really an angel, and her parents were demons sent to harm her—a “truth” that she also posted on social media.

This book shows many others making these same kinds of mistakes. As psychosis emerges, it reverberates throughout a person’s life. By thinking through what it means to be a young American coming of age today, we can see how this environment can be especially toxic for young persons with early psychosis. Once we understand that environment, those of us who could serve as wise elders or supportive friends and family can show more compassion for how challenging it can be, better anticipate how to guide people through it, and offer more guardrails and course corrections along the way.

So, what is it like to be a young adult in the United States today? Modern neuroscience suggests that adolescents transitioning to adulthood are developing new cognitive, socio-emotional, and skill domains, including romantic emotions and sexual behavior, an increase in independence and risk-taking behavior, and shifts in orientation to self and others.⁴ And what developmental psychologist Erik Erikson observed in the 1960s—that young adulthood may be characterized as an “identity crisis,” or a period of heightened vulnerability and potential—seems to hold true today.⁵ During this transition, young Americans are sent off to live independently in the “social jungle of human existence,” which Erikson thought was the American version of a “rite of passage.”⁶ This could include leaving home to go to college, moving out of the house to take on a new job or start a family, joining the military, or attending a trade school.⁷

However, Erikson was no anthropologist, and his proposed American rite of passage falls far short of what some cultures offer adolescents to help them transition. *Initiation rites*, or rites of passage that help a young person transition from a now-devalued childhood identity to a valued adult social role, can be curated, well-directed experiences that help a young person know how to acquire moral agency (the ability to be seen as a good person) in their own culture. Arnold van Gennep, a French ethnographer and folklorist working at the turn of the twentieth century, first detailed such passages cross-culturally. Van Gennep and anthropologist Victor Turner argued that initiation rites found across many cultures guided young persons into their meaningful adult social roles.⁸ These rites essentially laid out local ideas about moral agency: what would it mean to become a valued

adult worthy of intimate connections with others in this particular social context? Initiation rites thus offered a specific set of directions that made sense in their local social context. In our culture, young people must invent themselves—edit their lives, secure the social bases of self-respect, and find peopled opportunities. In some cultures, young people were instead assigned their future role as moral agents, which channeled and eased the psychological stress of changing roles, encouraged young people to develop locally “prized virtues” like courage and resilience, and helped young people appreciate and respect life’s mysteries.

Initiation rites also often involved an “ordeal” and so helped young people learn how to face discomfort and pain gracefully with the guidance of trusted elders.⁹ For example, some young Maasai men undergoing initiation rites (usually between the ages of 9 and 15) spend a few months in a special camp being guided by elders to learn about social traditions and life skills. As part of the experience, they are circumcised and then leave their village, not speaking to their loved ones (they are considered to be ghosts) while living outside the village for months with only one another to rely on. Upon their return, ideally after killing a lion (which is no longer possible in most places), they are welcomed back as “junior warriors,” a new social role for young men that is both celebrated and defined.¹⁰

In contrast, in the United States, society affords only limited support for the transition to adulthood. Yes, there are days of celebration such as graduation ceremonies, debutante balls, bar mitzvahs, and quinceañeras, but many of these celebrations require some degree of wealth, do not cut across the population (the whole community typically does not participate), and do not necessarily help young people bond with their peer group and elders in the wider social world of American life. Notably, these American ceremonies also do not involve enduring any kind of ordeal with peers or the guidance of elders, but often instead climax with a party. After the party is over, young people still must reenter mainstream society and reestablish themselves as a moral agent more broadly—and largely on their own.

Thus, instead of being guided through a structured, guided, time-limited rite of passage that helps one to know one’s place, American youths are taught to leave home, work hard, and play hard—on their own and in their own way. Most young Americans typically begin this transition between the ages of 16 and 18, when they gain legal privileges such as a driver’s license and the right to vote. Learning to drive, graduating from high school, and turning 21 so you can legally purchase alcohol are all loosely referred to as rites of passage in American life.

Any of these may be like an initiation rite in that the young persons have separated from their parents and “village” and are, as Turner would say, “betwixt and between” social identities and roles,¹¹ but for cultures with formal initiation rites, this phase was typically held outside everyday life. It was guided by trusted elders, close kin, neighbors, and healers all of whom helped young people through the more difficult or challenging aspects.¹² Youths undergoing initiation rites thus had an opportunity to experiment with forgetting their childhood and trying and

failing in a socially sanctioned way that brought them closer to their peers and select elders. This was a structured way to display one's competence in cultural values, be tested for that competence, accept one's role in life, and receive social recognition for that role.

In the American version, by contrast, young people must leave their home communities and prove themselves to be worthy and responsible adults with little more than the help of their peers—and, typically, not the peers who were their childhood friends. One would hope that spiritual, educational, or vocational mentors would be in place to reach out to young adults who struggled to find their “tribe” and to help them transition.¹³ But wise and humble elders are not something American culture particularly values or helps young persons find. As a result, often there is no one to notice if a youth is struggling with mental health or to support them. Those that knew American youths as children—teachers, clergy, neighbors, pediatricians, even friends' parents—are often no longer in contact except perhaps on social media. Very few of the youths we talked to mentioned having much guidance from someone outside their family or friends when asked about supportive others.

Also, unlike traditional initiation rites, the American version is not time limited and gives young people few clear exit ramps to mark the point when they can consider themselves to be valued adult members of the community or what that role means. In traditional initiation rites, the end is marked by a celebration, a return from social exclusion and isolation, or the acquisition of new names, social roles, and bodily markings like a shaving, piercing, or tattoo that are then recognized and celebrated with the young person's loved ones. Transitioned youths are welcomed back into the community with a new and valued social role, secure in their place in the community and clearly separated from their parents and their childhoods but incorporated into the larger social world.

In the United States, it is not clear when one has arrived at adulthood. There is no official marking of one's arrival, and those who have arrived are not sure how or when it happened.¹⁴ Was I an adult when I graduated from college? Had my first job? Got married? Had a child? Bought a home? What if I moved back in with my parents? And in a country where social and economic upheavals have made it unclear at which age a young person will be moving out, getting a job, and starting a family, and with little change in the expectation that one leaves at the age of 18, this whole process is confusing.¹⁵ In fact, the only real set of directions that I have found—in this research, in my own experience, and in the experiences of family, students and friends—is that young Americans are expected to leave home, establish their independence, work hard, and play hard around the age of 18—right around the time that psychosis can begin to emerge.

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Pulitzer Prize winner James Truslow Adams wrote that all Americans share “that dream of a land in which life should be better and richer and fuller for every

man [*sic*], with opportunity for each according to his ability or achievement.”¹⁶ The social expectation is that with hard work and an independent spirit anyone can achieve their dreams. As then-president Barack Obama stated, “If you work hard and meet your responsibilities, you can get ahead, no matter where you come from, what you look like, or who you love.”¹⁷ Then-president Donald Trump also said, “The American Dream is freedom, prosperity, peace—and liberty and justice for all. That’s a big dream. It’s not always easy to achieve, but that’s the ideal. More than any country in history we’ve made gains toward a democracy that is enviable throughout the world. Dreams require perseverance if they are to be realized, and fortunately we’re a hard-working country and people.”¹⁸

Anthropologist Margaret Mead wrote in the 1920s that this “myth of endless opportunity” stemmed from a very American notion that the United States is a meritocracy and success is anyone’s for the taking, and that this could leave Americans with little peace with their station in life.¹⁹ Immigrants, in particular, Mead noted, were under pressure to exceed the potential of their parents. More recent studies, for example in sociology, have also shown that the American Dream is alive and well and that many Americans think of education as a key pathway to success.²⁰ In the United States, then, the key to living a “good” life is communicated as becoming a person who works hard.²¹ Americans are taught this core cultural virtue from childhood, and the ability to be productive through work is the moral foundation of the American social contract, as well as one of the few clear ways to enhance moral agency and social belonging.²²

The youths in our study heard this message loud and clear. Corrina’s mother wanted her to go to college. James’s parents expected no less. Corrina and James had tried, but it was not working out. As wonderful as aspiring to endless opportunity and independence sounds, it comes with a price: an overwhelming array of emotionally charged choices in the absence of clear or practical standards. The expectation of autobiographical power, or the need to be at least the editor of one’s own life in order to be seen as a good person, puts a lot of pressure on young people to craft a self-story that others might accept but provides them with few guidelines for what is acceptable. The endless demands of making choices that risk some important relationships in favor of others in order to establish independence can cost young people the very relationships they need for support. While most young people are given opportunities to try and fail by their loved ones, there are so many choices that it can be hard to make sense of the best path. Nor do the pressures and choices stop when one works hard, because in America we also play hard.

For example, James was caught between two differing standards for the social bases of self-respect. He had a desire to fit in with the “celebrities” and his friends who enjoyed substance use, but his girlfriend, his parents, the police, and his school administrators and employers disapproved. The more his substance use amplified, the less time his old friends spent with him. He started hanging out

more with what he would later describe as the “wrong crowd.” As time went on, James started to lose his ability to be the editor of his own life.

Working hard and playing hard in American culture means that a young person must be able to work hard enough to earn the ability to “have fun,” and to spend their time and money consuming whatever they deem fulfilling at the time. Life’s purpose can at times revolve around the consumption this cycle perpetuates. In 2012, two years before my study started, American rapper Wiz Khalifa captured this American cultural ethos in a popular song called “Work Hard, Play Hard” about smoking good weed, drinking champagne, and having “so much money I should start a bank.”²³ Chances are, James knew this song, which went double platinum, but Khalifa hardly invented the concept. As biologist Lonnie Anderson explained in a *Forbes* article in 2016, the “work hard, play hard manifesto has been around for a long time.”²⁴ In his survey of fourteen hundred Canadian undergraduates, he found that one correlation stood out above all others: “an attraction to accomplishment and an attraction to leisure.”

Nor has the appeal faded since then. According to a recent BBC article, “Leisure is the prize, right? We work hard, so we want to play hard.”²⁵ In 2022, a popular television show called *Severance* debuted that *The Economist* described this way: “Imagine if your mind could be divided: surgically separated into two selves so that you might better ‘work hard’ and ‘play hard.’ That is the premise of this thrilling workplace dystopia.”²⁶ But who needs surgery? A 2015 study among young people in New York City reported that misusing stimulants prescribed for ADHD helped them to work harder and quickly meet “cultural expectations of achievement and productivity,” so that they still had time and energy for leisure and socializing.²⁷

For young people, leisure and socializing often mean partying. To be seen as a good person by one’s peers in young adulthood, and to attract a partner in an Instagram-captured social world, one must appear to be having fun. Having fun for the young people in my study often meant hanging out and using substances. In fact, 80 percent, without being prompted, talked about social substance use. One-third talked about using cannabis, nearly one-fourth talked about alcohol use, about one-fifth reported using methamphetamines, and another one-fifth reported misusing prescription amphetamines. A handful also reported using cocaine or heroin.²⁸

This pattern is not that different from most young people in the United States. In 2019, over half of young adults (18 to 25) reported using alcohol, and one-third cannabis, in the past month.²⁹ Over half had used cannabis sometime in their life. LSD and cocaine use were less common, with around 10 percent of youths under 25 reporting any use. (I am skeptical that young people will answer questions accurately about illegal substance use on a survey administered by the federal government, so these numbers may underestimate reality.)³⁰ The data are clear, though: many young people are experimenting with and using substances.

Experimentation in general is a given in young adulthood.³¹ Experimentation with recreational substances and alcohol, as James and Corrina found, can be fun and facilitate bonding between friends.³² And, while playing hard begins when one is a young adult and hanging out with peers, it continues into young adulthood and the real world. Many American work-related events—dinners, office parties, happy hours, conferences—involve substance use. The successful social use of alcohol, at least, can be interpreted as an important signal of adulthood.

Note the phrase “successful social use.” In the work hard, play hard ethos, young adults are supposed to learn how to have fun *without* overdoing it, getting in trouble, doing poorly in school, or becoming a burden on other people. You must be able to lose control without completely losing control. When I was a young adult in the early 2000s, people who were partying too hard would get “fired” by their friends, meaning they were becoming too much of a liability and had to be shamed into not behaving that way again. If you could not control yourself, your friends would stop hanging out with you.

In this way, substance use has become, paradoxically, both a way to gain moral agency and a way to lose it. You need to be able to use substances responsibly to earn access to the intimate relationships and the social bases of self-respect that come with them. If you overdo it, however, there are consequences—social shame, the loss of educational and vocational opportunities, and legal problems. This is a challenge for all young people, but as I found in my research, for those who are also struggling with emerging symptoms of psychosis and the at-times-amplifying effects of substance use and misuse on those symptoms, these expectations can be downright toxic.

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I first met Miranda at her parents’ home—a large, ranch-style house on a half acre or so where the relentless urban sprawl thinned out and the Texas Blackland Prairie still thrived. Miranda was a pretty girl with shaggy bangs, thick glasses, and a bright smile. She had attended some vocational training and had an associate’s degree in health care. Her white mother, Angela, had fought her way up the socioeconomic ladder with a graduate degree in health care. Her father, Roberto, was a first-generation Hispanic migrant with very little education but a strong mind for business. Miranda’s parents were financially successful. They expected Miranda to work hard, go to college, have a good job, and start a family of her own. This would fulfill their own American dream—working hard to provide a better life for their children so their children could achieve even more.

When we met, Miranda had finished her degree at a local community college, but she was “taking a break” from work. She was living at home, smoking a lot of cannabis, playing video games, and watching Netflix. She kept detailed journals, enjoyed dancing to music, and tried to imagine her future. She worried: what was she going to do, who was going to love her, and was she attractive enough or smart

enough to attract a partner? A lot of her friends from high school had finished college and were working and living independently. Some were even married. Miranda felt a little useless, even though she knew her experiences with an autoimmune disease and depression had slowed her down.

Then, totally out of the blue, a young man she knew in high school, Sean, started calling her and texting her. Miranda was so excited. She had had a crush on Sean when they were younger, but she never told him. But she kept missing his calls, and her phone kept erasing his texts after she read them. Her parents, she decided, must be tampering with her phone, intervening to keep them apart. Sean was white, Miranda self-identified as Hispanic. It was like *West Side Story*, she decided, or *Romeo and Juliet*.

Miranda started texting and calling Sean through Facebook at all hours, but he was not answering. Sean, thousands of miles away, was very confused and had blocked Miranda—whom he could hardly remember from high school—on Facebook messenger.

Angela said that one night Miranda came to her to announce that she was leaving. She needed to grow up, she insisted; her mother needed to let her go. She wanted to visit Sean. They were planning to get married. Her mother was confused. She had no idea who Sean was. How could she miss something so major, she wondered.

Angela later said Miranda was very defiant, saying, “‘You don’t want to let me go, and blah, blah, blah.’ She says, ‘I’m going to leave.’”

Angela just wanted the conflict to end. “I said, ‘Honey, you can use the [family] van. The van’s right there.’ She wasn’t really—at that time, she probably was manic, but I didn’t recognize it. She actually started packing stuff in the van. She took the van and spent the night at my mother’s house nearby. I felt good about that because I knew where she was. I didn’t want her to just get in the van and leave.”

Early the next morning, there was a great deal of confusion. Miranda’s grandmother hid the keys to the van while Miranda was sleeping and locked the external garage where the van was parked to prevent her from sneaking off overnight.

However, Miranda *knew* that Sean was waiting for her in the garage, and she realized her grandmother also wanted to keep them apart. She desperately needed to be reunited with him, to run away with him in the van before their parents caught them. She texted and called Sean countless times. Her family, she was sure, must have rigged her phone, because she could not see his answers.

The next morning, without access to the garage, Miranda broke the metal door down. Her family thought her strength was bizarre.

“Superhuman,” Roberto said.

Once she was in the garage, Miranda realized she did not have the van keys in her purse. She did, however, have a knife. She threatened her grandmother with it, demanding the keys.

Her grandmother locked herself in the house and called Angela and Roberto for help. Upon arrival, Roberto tried to get Miranda to calm down, and she punched him. She said they were keeping her from Sean. They were so confused: Who was this person? Where was he? Why was he messing with their daughter this way? They realized they had to call the police.

When they told her they had called the police, Miranda laid down on the ground. Her grandmother stayed in the house, and her parents hovered nearby in terror. Roberto was afraid she had stabbed herself. Then, Miranda startled him by sitting up and throwing her purse to him.

“I knew the cops were being called,” she said later, “and somehow in my mind, I thought ‘Okay, well I can’t have a knife on me while the cops come.’” She also tossed him her sunglasses and her shoes. After that, Miranda laid down to wait.

“In my head,” she explained later cheerfully, “I thought I was peaceful protesting.”

Months later, Angela told me that she may have overprotected Miranda because she herself had a bad childhood. “We coddled them [her children] and everything, and maybe we were too overbearing, but they never had to deal with what I had to deal with. They are both grown now, and I think they are both trying to find their identity, and the step forward for life as an adult. I believe that when [Miranda] had that breakdown, she was kind of freaking out because she couldn’t handle all the stuff that adults do.”

Like James, Miranda blamed her own substance use. She said that earlier she had been dancing in her room when she was high, and “I don’t know if people could see but I got paranoid, and that was probably a week or so before my psychotic break. I kept telling my mom, ‘What if somebody’s going to come into the house and murder me because they saw me dancing?’” She did not see anyone outside, but she sensed them there.

She said she initially used cannabis to reduce her stress level and treat her pain from her autoimmune disease while tapering off her antidepressant medication. She said her mom—a medical professional—knew about but initially overlooked her cannabis use.

“She doesn’t mind; she thinks it’s all right,” Miranda told me. “I was taking marijuana. I was smoking; I was trying to increase my tolerance, decrease it I guess. I was slowing down on my usage, but it did make me paranoid [. . .] I don’t know if it was the different strain.”

“Maybe it was stronger?” I asked.

“Yeah, it was strong.”

However, Miranda’s friends did not experience paranoia, even though they were smoking the same strain. In fact, she explained, one friend who used cannabis, “she’s Hispanic like I am, but she can handle stress pretty well. She’s a medical assistant at [place-name omitted], so she’s kind of an example for me to look up to.”

So Miranda kept smoking cannabis to calm herself, but everything just kept getting worse. “I felt like I was planning like one of those Doomsday preppers people,” she laughed later. “I was gathering up weapons. I had a canteen and a nice survival handbook I bought from Barnes and Noble.”

Angela later said she would have taken Miranda to the hospital right away if she had had any clue as to what was about to happen. Angela was a health professional, but she and her husband “did not recognize this was a mental health issue. We just thought, ‘Oh, she’s trying to find herself.’” Miranda *was* trying to find herself, experimenting with love and substances in what seemed to her to be low-risk ways, but she was also having emerging symptoms of psychosis, which complicated everything.

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The American social expectation that young adults can find themselves by working hard and playing hard was especially challenging for those in my study to navigate. Miranda, James, and Corrina all struggled to negotiate love, substance abuse, and early psychosis as they tried to make a smooth transition to adulthood. This ethos, put forth as the way for young Americans to reach valued adulthood, set them up to fail. There are several reasons for this common situation, and they all feed into one another.

First, establishing one’s independence while working hard and playing hard is stressful. Many youths struggle with their mental health as they attempt to make a successful transition to adulthood, perhaps increasingly so, as the recent numbers about youth mental health suggest. But young adults with early psychosis also struggle with the additional burden of an exaggerated physiological response to stress that can include not just anxiety, panic, and disturbed sleep but also paranoia, hearing voices of people telling them what to do that no one else can hear, or seeing figures that no one else can see.³³ James said the psychosis and substances were “feeding [him] false truths—lies, really.” Miranda was paranoid that people were watching and that her parents were tampering with her phone. She heard voices telling her that Sean was in the garage waiting for her. Corrina heard disruptive noises and then later thought that the world of angels and demons was relevant to her everyday life.

If these same people who are more sensitive to stress are leading stressful lives because of social conditions of marginalization or disadvantage or adverse social experiences, even low-level stressors can push them toward experiencing symptoms of psychosis. Beneath the surface of their stories, many of the young persons I worked with had experienced such stressful social conditions and adversities in their childhoods. Corrina, James, and Miranda all were children of immigrants, which seems to elevate one’s risk for developing psychosis.³⁴ Some of the young adults we interviewed had experienced the death of a parent as a child or

childhood sexual abuse or witnessed terrible acts of violence and so had significant adverse childhood experiences.

Any young person's ability to handle increased risk-taking behaviors and impulses in responsible and resilient ways is shaped by early life experiences. As anthropologist Carol Worthman has written, adolescence is "where the rubber meets the road as the strengths and vulnerabilities formed in development hit the demands of transitioning into adulthood."³⁵ For those young people who had lived through stressful conditions, were experiencing symptoms of psychosis, and were sensitive to stress, everyday social expectations that they work hard and play hard could push them to a breaking point.

Both Corrina and James had parents who wanted them to get back to work and school. They felt pressure to live up to their parents' expectations, and to their own. Miranda's parents, on the other hand, seemed to notice that she was not quite ready to be an adult, and they "coddled" her to some extent. She was not under a lot of pressure to go back to work or school when I met her. While all three had psychotic breaks, Miranda seemed to be doing the best of the three, at least when I first met them. I suspect this was in part because she was under the least amount of pressure at home to become independent—in fact, it was not clear that she had ever really tried.

In addition, many of the youths in my study were also trying to meet expectations that as young adults they should play hard. For many, this meant "party hard," and alcohol and cannabis were the substances the young people in my study most commonly used for fun, relaxation, and stress reduction. Miranda, James, and Corrina all used cannabis for exactly these reasons. Studies suggest that all young people living through unstable life transitions such as changes in living arrangements, academic expectations, or employment are developmentally and contextually likely to increase their use of alcohol and substance use at such times.³⁶ Substance use is also one way that persons from minoritized groups with early psychosis cope with trauma in their lives—historical and everyday trauma, as well as stress, anxiety and stigma.³⁷

Some young people, on the other hand, tried to establish their independence with substances as a form of rebellion against cultural rules they thought were too restrictive. Mohammed, a Muslim from West Africa, told me: "Yeah, I took K2, marijuana, kush, corn. I don't want to take crack. I drank a lot, partied . . ."

"Why? Why did you do that?" the interviewer asked.

"Because pussy, money, weed. That was my motto."

Mohammed was trying to play by American cultural rules by breaking free from his parents and finding a sense of belonging in the world as a hip-hop artist. He used cannabis both to play hard and to rebel against his parents' Muslim cultural ideals of sobriety. But the cannabis use altered his personality, allowing a second self to emerge, Chrome, which was reminiscent of Corrina's angel self, Karina. As Chrome, he thought he was fearless, powerful, and independent and

had the potential to be successful. Mohammed wanted to keep Chrome around, but he thought that required him to smoke cannabis.

Many Americans have come to see cannabis as not only acceptable but even medicinal. Miranda enjoyed smoking cannabis with her coworker, a health professional peer whom she admired. Her mom, also a health professional, thought it was fine even though cannabis use was—and remains—illegal in Texas. Miranda said she used cannabis to self-medicate for her autoimmune disease and depression. In the United States, understanding cannabis products as medicinal has made them seem less harmful and has led to more favorable youth and community attitudes toward use.³⁸ Some research suggests that for college students this acceptance has made it harder to refuse than to use when cannabis is on offer.³⁹

Jeremy, an African American we interviewed, explained that he did not do “harder drugs” because he was “too scared of all that,” but then noted, “Even marijuana can get scary. The paranoia that it gives is—on my end—crazy.”

He continued, “I used to smoke every day, so . . . I mean, it just depends on the day. When I have pain, it’ll take away some pain. [. . .] It might make me feel better at the moment, but then I go back to upset because it made me overthink.”

These trends toward acceptance and wider use of cannabis as a medicine make it harder to understand that it can be both helpful and harmful for some people. Even though Miranda and Jeremy both seemed to know that cannabis was making them more paranoid, they still liked the way it worked on their other symptoms. And, while it is not widely culturally acknowledged or discussed, cannabis use does seem to be a risk factor for psychosis.⁴⁰ My own data and other research suggest that using cannabis may be a very bad idea for people who have a family history of psychosis, who may be developing psychosis, or who are experiencing psychosis.

To begin with, studies suggest that young people developing psychosis who try cannabis are more likely to develop a cannabis use disorder than their peers,⁴¹ which means that their cannabis use is more likely to result in worsened performance at work and school and in interpersonal relationships because of misuse, overuse, and the fallout from overuse such as blackouts and accidents. Certainly, James thought that his cannabis use (among other things) was not helping him with his relationship with his girlfriend or with keeping his old friends.

In one study, more than half of Black youths with early psychosis also had a substance use disorder.⁴² Multiple reasons likely account for this statistic. The percentage may be high because Black youths referred to treatment for psychosis are then also diagnosed with a substance use disorder after being overpoliced.⁴³ In addition, Black youths with early psychosis and a cannabis use disorder are more likely to report childhood and physical abuse than are those without cannabis use disorder.⁴⁴ Exposure to childhood traumatic events, a history of incarceration, and having dropped out of high school have also been shown to be associated with co-occurring alcohol and cannabis use disorders for all

young people with early psychosis.⁴⁵ Local culture can also play a role. One study with primarily Black and Latino inner-city youths suggested that access to high-potency cannabis products can “become an important way of gaining status, prestige and popularity among peers.”⁴⁶ At the same time, some studies suggest that for young people with early psychosis, using higher-potency cannabis more frequently worsens outcomes.⁴⁷

Moreover, studies show that the misuse of cannabis (but not occasional use) can increase one’s risk of developing psychosis in the first place.⁴⁸ In one study, cannabis misuse or dependence, especially for people with a family history of psychosis, predicted the onset of psychotic symptoms.⁴⁹ Another study found that young people who stopped using cannabis after a psychotic break stopped having psychotic episodes,⁵⁰ while individuals who continued using cannabis after psychosis onset experienced higher relapse rates, longer hospital admissions, and more severe positive symptoms than individuals who stopped using.⁵¹

Which came first—the chicken or the egg? The research on substance use and early psychosis specifically is limited, and interventions designed to prevent or support young people in reducing cannabis use are nascent. There is also almost no research on the interactions between “harder” drugs—LSD, cocaine, methamphetamines—and the individual experience of psychosis. With our current retrospective methods and studies, it is impossible to tease apart the exact relationship between cannabis, alcohol, social marginalization, and psychosis, but they do seem to feed into one another.

Some studies also suggest cannabis misuse might be linked to more violent and aggressive behaviors for people experiencing psychosis.⁵² James said he was smoking cannabis laced with cocaine when he assaulted his girlfriend: Was it the cocaine, the cannabis, the psychosis, or just James not controlling his anger? It is hard to tell.

What we do know is that James went to community college, made new friends, had a romantic partner for the first time, and intensified his regular cannabis use to smoking marijuana at least twice a day. He progressed to regularly using LSD and smoking cocaine-laced joints. His girlfriend no longer wanted to be with him, but he kept using. He did not know how or when to quit.

Later, James felt that he had botched his own transition to adulthood:

Sometimes I hold myself down. And even though I don’t realize it, it’s just a thing I have to accept [. . .] There’s all these crossroads that you need to choose, and if you don’t choose wisely, you’ll go down, and then it’s just messed up. But then, maybe other people, like your supporters, will help you. [. . .] Then you can try to go along with them. But even then, sometimes, my self is just like, “Maybe you just deserve to be in the mental institution.” But I don’t believe I’m mental. [. . .] Basically, the challenge is just to be more organized [. . .] Just seeing the right paths to take. Sometimes I don’t, and I regret that I didn’t take that path at that time . . . And then you’re like, crap, I’m already too far. That’s the crossroads.

A few weeks after this conversation, James found another crossroads. He was extremely high at the time—possibly on cannabis and LSD, but he could not recall exactly. He parked his car on the tracks at the railroad crossing to make sure the train would stop. The celebrities were on the train. They told him on Instagram that they were coming to take him to New York City and make him famous. They would meet him at a specific railroad crossing, but how would he stop the train? He decided the best way to stop it was to block it.

Luckily for him, James did not think it was important to stay in the car. He showed me pictures on his phone of a vehicle demolished beside some tracks. After this incident, James was arrested and hospitalized involuntarily for more than a month in the state hospital. When released, he refused further treatment. All his friends used alcohol and illegal substances, he said. Treatment meant sobriety and social isolation, and he really needed to get back to work and hang out with some friends.

James also thought that using cannabis and other substances would make him seem more attractive to the celebrities—and to his less famous friends. Miranda, Corrina, and many other young people in my study saw using cannabis recreationally as a conduit for securing the intimate relationships they needed to thrive. Using cannabis, in a receptive social context, could offer a source of the social bases of self-respect and peopled opportunities. It helped James and Corrina, and many others like them, secure intimate relationships with others. In the long run, though, cannabis misuse—and substance misuse more broadly—also amplified our interlocutors' loss of control over their lives. They began to lose the thread of the life narrative they wanted to promote, or their autobiographical power, as things started to go wrong.

Paradoxically, playing hard—probably for anyone but certainly for young people with early psychosis—can become a way not just to prove to others that one is a competent adult but also to lose others' confidence. Unfortunately, psychosis and substance misuse seem to fuel each other to synergistically compromise a person's moral agency. Who wanted to trust Corrina after she destroyed family memorabilia, or James after he parked his car in front of a train, or Miranda after she broke down her grandmother's garage door?

. . .

James, Miranda, Corrina, Mohammed, and so many others took steps to break away from their parents, to mark a departure from childhood, and to establish themselves as independent adults who could make their own decisions. They worked hard. They pursued higher education, found employment, and tried to live independently. They also played hard using recreational substances to separate themselves from their childhoods, connect with new friends and romantic partners, and have fun, all of which proved precarious for them. We might even say it set them up to fail.

These stories—and those of many other young people told in this book—suggest that navigating the work hard, play hard ethos of young adulthood in the United States can be perilous, particularly for young people who are also struggling with substance misuse, pressures to find their place in the world, and the underlying development of a psychotic disorder. All the young people I engaged with during my study experienced some combination of romantic failures, substance misuse, lost opportunities with school and employment, and lost relationships with family and friends. Emerging symptoms (and the adolescent brain) complicated decision making, which could complicate substance use and romantic decision making, which led to more isolation and loss. Nearly everyone mentioned having the sense that somewhere along the road they had lost their way.

Instead of offering support, American culture encourages young people to be independent and go out on their own with little guidance during a time when there are an overwhelming number of choices to make and when they are neurologically primed to take risks. This sets young people up to sink or swim. Those who learn to swim may thrive. Those who do not may find themselves drowning, especially since American culture in general provides few lifeguards.

We need to understand that young people are struggling with choosing roles, finding a path that is their own, working hard and playing hard in ways that will mark them as no longer children, pleasing those who are important to them, and navigating all of these challenges without the guidance that many other societies provide.⁵³ This American-style transition to adulthood is difficult for all but is especially so for those experiencing early psychosis. We need to understand how much it complicates their ability to become a moral agent in the broader culture, and why. We need to look at ways this passage to adulthood might be better supported for vulnerable youths living in this work hard, play hard social context.

The work hard, play hard mentality, and expectation that most young people will experiment with sex and substances to prove that they can become independent adults, is likely here to stay. The ways this experimentation plays out ruthlessly on social media are unlikely to change. The perception of cannabis as a panacea is also likely to remain because most people are not going to have a psychotic break after using it. However, by raising awareness of these cultural features, we can see more clearly the social context in which young people with early psychosis are trying to thrive, and we can better understand the pressures they are under and the consequences these pressures can have specifically for them. We can offer more sensitivity and guidance around this transition if we are paying attention. There may be entrenched American traditions around what young people need to go through to prove themselves as valued adults, but we can make a significant difference by better understanding how it makes some young people especially vulnerable so that we can develop stronger supports to promote a smoother rite

of passage for all. While I offer thoughts in chapter 7 on how to develop these supports, in chapter 2, I explore how the young people in my study sought to explain and manage their psychosis-related symptoms as they emerged. It is my hope that further exploration can encourage compassion for and understanding of their remarkably challenging situation.