

To what extent has recreational drug use become normalised amongst young adults in contemporary society?

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Abstract

The purpose of this dissertation is to examine the extent to which recreational drug has become normalised amongst young adults in contemporary society. Drug normalisation has been a theory that has been heavily neglected for around a decade, therefore this dissertation is extremely valuable as it provides a thorough investigation in a contemporary setting. Through the use of online self-completion questionnaires, the research has investigated; the access and availability of illicit drugs, drug trying rates, levels of recent and regular drug use, levels of social accommodation from abstainers and 'ex' triers, as well as levels of cultural accommodation. The research revealed that 70.5% of respondents have tried an illicit substance, whilst it is the significant minority who have never consumed some form of illicit drug. The research has also importantly revealed that non-users and ex-triers are highly tolerant of the use of drugs recreationally and many attitudes displayed are remarkably accommodating. With regard to previous research, the current research revealed that cannabis still remains to be the most normalised drug; however LSD and amphetamines can no longer be seen to hold a footing within the conceptualisation. The current research has also been revealed that cocaine appears to be gaining a substantial level of momentum and is moving away from its 'hard drug' classification; it could soon be situated within the conceptualisation. Overall, the research found that within the sample, recreational drug use has become further normalised and has moved significantly away from its traditional association with deviancy. Recreational drug users can no longer be simply thought of as social 'outsiders'.

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Introduction

Although the term is not without its difficulties, recreational drug use is typically defined as being the 'the use of drugs for pleasure or leisure' (DrugScope, 2014), and it is often used to denote the use of 'softer' drugs like cannabis and 'dance drugs'; 'they can be used and usually not affect the person's ability to work the next, or following day' (Redhead, 1993b, pg. 7). For decades recreational drug use has commonly been associated with young people and there have been various distinct movements of drug consumption within youth culture (Blackman, 2007). These included; the 'speeding' mods throughout the 1960s, whose consumption was focused particularly upon amphetamines (Hebdige, 2006); the LSD consuming 'trippy hippies' of the 1970s (Willis, 2006) and the vast wave of heroin users throughout the 1980s (Seddon, 2007). These post war drug arenas were confined to marginal populations, thus were fundamentally subcultural drug scenes and were able to be adequately explained using sub-cultural theories, structural macro theories focusing upon inequality and poverty, and positivist psychological theories emphasising individual developmental deficits (Aldridge, Measham and Williams, 2011).

The 1990s however, saw something quite unprecedented; 'widespread drug use amongst very large numbers of ordinary, conventional young people' (Parker, Aldridge and Measham, 1998, pg. 1). As a result of the emergent 'acid house' rave culture, recreational drug use began becoming situated within popular mainstream youth culture and consequently, drug use was no longer able to be adequately explained using traditional theoretical explanations. Parker and colleagues (1998) therefore developed the drug normalisation theory as a way of exploring and explaining these changes, by investigating the behavioural and drug attitudinal change, whilst importantly considering the socio-economic and cultural background for such change (Measham, 2004). Normalisation is essentially concerned with how stigmatised or deviant individuals or groups become included in many features of conventional everyday 'normal' life (Parker, Williams and

Aldridge, 2002), thus it was a highly appropriate concept in order to explain the increased drug involvement of ordinary young Britons.

The primary aim of this dissertation is to re-investigate the normalisation of recreational drug use by utilising Parker and colleagues (1998) normalisation thesis. It aims to discover whether recreational drug use has become further normalised, remained similar or since normalisation is 'a two-way street' (Parker, Williams, Aldridge, 2002, pg. 943); in fact reversed and denormalised like cigarette smoking is arguably moving towards. Hence the central research question; to what extent has recreational drug use become normalised amongst young adults in contemporary society? It does not look towards investigating the underpinning causation behind normalisation; it only aims to measure the extent. In order to successfully re-examine the extent of normalisation, the dissertation will constantly be drawing upon, and comparing Parker's original findings, as it will enable the research to truly examine the changing patterns of normalisation amongst young adults between the ages of 18-25. The extent of normalisation will be measured by investigating the notion's key features; access and availability of drugs, drug trying rates, usage rates, social accommodation and the degree of cultural accommodation; through the use of online self-completion questionnaires. It has been over a decade since normalisation of 'sensible' recreational drug use was thoroughly examined; therefore this dissertation will be a valuable asset to the research field as it examines normalisation in a contemporary setting.

The following chapters of this dissertation will include; a literature review, methodology section, discussion and analysis of findings and finally a conclusion. The first section will provide a comprehensive review of the existing literature relevant to the normalisation debate. It will provide an in depth analysis of the emergence of mainstream recreational drug use in the 1990s, bring forward the normalisation concept and finally critically analyse the concept. The next chapter will primarily be focused upon the research methodology. It shall outline the research procedure, data analysis,

sampling, as well as ethical considerations. The third chapter will be the crucial discussion and analysis of the research findings. This section will bring forward the findings of the study and will critically analyse them in order to establish the extent to which recreational drug use is normalised. The final chapter shall provide an overview of the research and will crucially provide a response to the central question.

Literature Review

The following chapter will investigate the surrounding literature regarding the normalisation of recreational drug use. The chapter shall be divided in several sections to ensure that there is clarity surrounding the key issues. The first section shall investigate the renowned 'Chemical Generation' of the 1990s, as it is arguably the 'key feature of the production of drug normalisation within popular culture' (Blackman, 2004, pg. 146). The second section will bring forth Parker and colleagues (1998) concept of drug normalisation. The section shall investigate how evidence of normalisation was acquired; examine the central dimensions of the theory and shall also explore other perspectives of normalisation. The final section shall investigate the normalisation debate, outline criticism of the normalisation thesis and also note the importance of the current research.

The Chemical Generation: The Emergence of Mainstream Recreational Use

As the introduction highlighted, prior to the 1990s, recreational drug use was generally regarded as being a marginal activity linked closely to deprivation and social dislocation; and those who took part were branded as being 'mad, bad or sad' (Shapiro, 1999, pg. 17). At the start of the 1990s however, recreational drug use began moving away from being a minority activity restricted to subcultures and towards the heart of mainstream youth culture. The widespread use of drugs emerged from the 'acid house' or 'rave' culture which began in the summer of 1987 (Redhead, 1993a). Acid house came to Britain as a result of British 'clubbers' wanting to 'relive the jouissance of the Mediterranean holiday in the pleasures of dance music and drugs' (Melechi, 1993, pg. 30) by refabricating the party spirit of the Balearic island of Ibiza to the British club scene. As a result, during the late eighties, a whole new generation of clubs emerged in many cities throughout the UK (Shapiro,

1999). These clubs were an overwhelming success and a year after acid house had arrived in Britain, it was beginning to attract an increasingly wider audience and was growing and diversify beyond all expectations; it was the second summer of love (Redhead, 1993a). As the introduction underlined, a stimulant drug had always been associated with previous youth cultures; and the rave culture's drug was ecstasy. The 'smiley' logo ultimately defined the nature of the drug – a happy, fun, party drug (Shapiro, 1999); 'there were no hypodermic needles involved, no grim paraphernalia or ritualistic preparation. It was literally, an easy pill to swallow, and it came packaged not as a drug cult, but as the ultimate entertainment experience' (Collins and Godrey, 1997, pg. 280); it was a clean 'friendly' drug (Redhead, 1993b, pg. 12). Ecstasy and rave culture are said to go 'hand in glove' (Redhead, 1993b, pg. 13), so as acid house began to expand, so did the use of drugs. Why however, was a drug culture expanding so rapidly? Why were so many young people attracted to Methylenedioxymethamphetamine?

As a result of Thatcherist neo-liberalist ideology of individualism, in Britain throughout the 1980s 'there was a sense of alienation, lack of community... a sea of individuals each fighting for their own survival and fearful of what the future may hold' (Shapiro, 1999, pg. 24). Britain was facing a period of great insecurity and people from all sections of society were facing the same kind of employment uncertainties. Following Thatcher's notorious 'there is no such thing as society' quote in 1987 (Margaret Thatcher Foundation, 1987); young people throughout the decade were deeply cynical about the political process and along with this, communities were no longer felt to deliver the sense of belonging and solace like it previously had. Thus there was a generation of young people who were not only seeking an altered state of consciousness, but were searching for community and the accompanying sense of belonging. The rave scene and the use of ecstasy provided this. Ecstasy culture brought people together; removed social barriers; promoted empathy and fellowship amongst its followers (Shapiro, 1999); offered a forum to which people can bring narratives about class, race, sex, economics

or morality; 'it was a hedonism distilled in its purest form' (Collins and Godfrey, 1997, pg. 267).

Given the evident popularity of ecstasy and the vast expanding rave culture it soon became a 'big business' for entrepreneurs emerging from 'The Thatcher dream' (Collins and Godfrey, 1997). Raves soon became professionally organised events and in true Thatcherite spirit; profit making became the motive (Redhead, 1993b). The popularity of MDMA and the vast expansion of ecstasy culture had opened up an array of highly lucrative opportunities for entrepreneurs.

As an earlier paragraph highlighted, acid house started in clubs, but following a series of police drug raids, raves became forced out of the city centre clubs and moved towards abandoned industrial spaces and open fields. Illegal raves soon began to attract even higher numbers of young people and Reynolds (2012) estimates that raves around the M25 Orbital often attracted up to 25,000 people. The media soon started highlighting the spectacle of large numbers of young people gathered; dancing all night to loud music under the influence of drugs, and as a result, this created a widespread moral panic (Thornton, 1995). Due to the moral panic, the government needed to tackle the apparent 'alarming drug behaviour of young people' (Coffield and Gofton, 1994, pg. 4) and attempted to stop the expanding ecstasy culture. The 'media blitz' (Melechi, 1993, pg. 29) initially spawned a police crackdown on acid house parties, however these strong armed tactics inevitably failed and as Shapiro (1999, pg. 30) argues 'if anything police action made activists even more determined'. Given the failings of the crackdown operations, the government sought a different approach and launched a variety of legislation which targeted the drug cultures epicentre; illegal raves. Firstly they launched the Entertainments (Increased penalties) Act of 1990 which meant that rave organisers could face fines of up to £20 000 and/or six months in prison (Redhead, 1993b). Unfortunately for the government, this legislation had a limited effect disrupting raves and it was not until 1994 when they launched the Criminal Justice and Public Order Act

that the underground rave scene truly ended; it was 'the final nail in the coffin of unlicensed events' (Shapiro, 1999, pg. 30). The government's legislative responses did eventually eradicate illegal raves, but it certainly did not end the now mass drug culture; it simply forced it into legitimate nightclubs and as Collins and Godfrey (1997, pg. 272) argue 'it in fact can be seen to have the opposite of their intended effect: by driving it towards the mainstream, they brought the dance-drug virus to a wider community of willing hosts'.

As the previous paragraph outlined, legislation of the early 1990s had pushed the now mass ecstasy culture into the legitimate nocturnal economy and closer towards the mainstream. The once notorious rave scene had merged into the legitimate and commercial club scene; 'it was a highly lucrative business for operators on both side of the law' (Collins and Godfrey, 1997, pg. 264). Commercialised venue organisers such as 'The Ministry of Sound' and 'Cream' became established (Shapiro, 1999); DJs became marketed as celebrities; club promoting became a profession; renown clubs began acquiring national sponsorships; BBC Radio One which had previously censored acid house, recruited the legendary acid house DJ, Danny Rampling in a desperate bid to acquire more listeners; major dance labels became established; clubbing magazines, such as the still popular 'Mixmag' became extremely profitable; department stores like C&A began stocking the ravers extravagant apparel (Collins and Godfrey, 1997; Rietveld, 1993). 'Clubbers became a huge market place to be 'farmed' by corporate concerns' (Collins and Godfrey, 1997, pg. 271). Ecstasy culture had become a legitimate and lucrative arm of the leisure industry and had transformed the dance scene into the dance industry, which in 1993 the Henley Centre estimated to be worth £1.8 billion (Collins and Godfrey, 1997). As a result of its popularity and the unprecedented facilitation by legitimate entrepreneurs; ecstasy culture undoubtedly became by far the biggest drug culture which Britain had ever seen. Ecstasy culture had become so big that in 1992 Richard Carr, chairman of Allied Leisure announced that 'it is a major threat to alcohol-led businesses' (Independent, 1992). Ecstasy had now become an almost ordinary aspect of British night life and the widespread amount of

users 'had combined in a unique symbiosis to herald the normalisation of illicit drug use on a previously unknown scale' (Shapiro, 1999, pg. 18).

As the section has highlighted, the ecstasy culture of the 1990s is undoubtedly the catalyst which allowed recreational drug use to move rapidly from the margins and into mainstream youth culture; thus it is a highly significant aspect of drug normalisation. The following chapter will bring forward the normalisation thesis which aims to theoretically understand how 'how an illegal activity, recreational drug use, has spread into mainstream youth pursuits whereby a youth culture has accommodated a drugs culture' (Parker, Aldridge and Measham, 1998, pg. 29).

The Normalisation of Recreational Drug Use

As the previous section highlighted, the ecstasy culture of the 1990s had enabled recreational drug use to become culturally accommodated amongst very large numbers of conventional young people, and as Parker and colleagues (1995, pg. 24) argue 'it was the watershed whereby drugs moved from subculture status to become part of mainstream youth culture'. The characteristics of drug users had changed significantly and following the tragic death of Leah Betts in 1996, the British public were becoming all too aware of this. Drug users were now as likely to be female as male, and come from all social and educational backgrounds; they could no longer be simply written off as 'delinquent, street corner 'no hoppers' (Parker, Aldridge and Measham, 1998, pg. 1- 2). Due to the magnitude of these changes, recreational drug use could no longer be adequately explained by either subcultural theory or traditional notions of deviance (Redhead, 1993a) and unless it was believed that half the generation of young people were prone to psycho-social disorders (Parker, Aldridge and Measham, 1998) or were simply a generation of criminals (Collins and Godfrey 1997); a new explanatory body needed to be established; hence the creation of the normalisation thesis.

The term normalisation is essentially concerned with how 'a deviant, often subcultural population or their deviant behaviour is able to be accommodated into a larger grouping or society' (Parker, Aldridge and Measham, 1998, pg. 152). The term can indeed be used in various contexts and Parker and colleagues therefore utilised the concept as a way of exploring and explaining the unprecedented increase in the drug involvement of young Britons throughout the 1990s. Parker, Aldridge and Measham (1998, pg. 152- 153) describe normalisation with regard to recreational drug use as follows;

'Normalisation cannot be reduced to the intuitive phrase 'it's normal for young people to take drugs'; that is both to oversimplify and overstate the case. We are concerned only with the spread of deviant activity and associated attitudes from the margins to the centre of youth culture where it joins many other accommodated 'deviant' activities such as excessive drinking, casual sexual encounters and daily cigarette smoking... Normalisation need not be concerned with absolutes; we are not even considering the possibility that most young Britons will become illicit drug users'.

The idea of drug normalisation is ultimately to get beyond narrow understandings of deviance linked to subcultures by showing that drug use has become part of mainstream normalised youth culture (Blackman, 2004). Due to the shifting characteristics of recreational drug users, they could no longer be isolated within the realm of 'other' (South, 1999), which consequently meant that drug use needed to be understood as a product of everyday life. The evidence Parker and colleagues (1998) put forward for the concept of normalisation was broadly twofold: statistics which specified large numbers of young people claiming to have used drugs in terms of frequency and regularity; along with cultural changes which appeared to have accommodated this type of drug use (Blackman, 2004).

Parker and colleagues (1998) acquired evidence for the normalisation concept from the unique North West Longitudinal study which began in 1991 and tracked over 700 ordinary young people to assess how they developed attitudes and behaviours in relation to drugs. Given the breadth, depth and length of the study, Parker, Aldridge and Measham (1998) were able to provide some insightful conclusions regarding why recreational drug use was moving away from the margins and into the centre of youth culture. They found that 91.1% of respondents had been offered an illicit drug, and along with this, drugs were becoming much more routinely available in locations such as schools, colleges, pubs and clubs. The study also revealed how around five to six in ten respondents had tried an illicit drug and found a clear closure of gender and social class difference. Most importantly however, Parker's study revealed how recreational drug use was becoming culturally accommodated as a result of wider social changes which had transformed young people's experiences of growing up in late modernity. Parker and colleagues (1998) explained how drug use fit in young peoples 'time out' to self-medicate from the stresses and strains of their uncertain futures, and since the drug use which the study was focused upon was recreational and not dependant use; drug use was seen to be accommodated into young adults leisure time.

As a result of these findings, Parker and colleagues (1998) identified five distinct dimensions which measure the scale and limits of drug normalisation. These include; the access and availability of drugs, levels of recent and regular drug use, drug trying rates, the level of social accommodation (particularly of abstainers) and also the level of cultural accommodation. Essentially the cultural dimension of the thesis is perhaps the most vital, as this form of accommodation enables drug use to move away from the margins and into the heart of youth culture. The dimension is however rather subjective, and Parker, Williams and Aldridge (2002, pg. 948 - 949) argue that measuring the extent to which drugs are accommodated in 'cultural understandings of normality are very difficult to make'. South (1999, pg. 7)

argues that 'whether or not as individuals we actually use drugs, we now live in a cultural, media and consumption environment saturated with references to and images of drugs, as well as explicit and implicit connections between drugs and various other consumption items'.

Coffield and Gofton (1994) can also be seen to be advocates of drug normalisation, as they too suggest that drug use has become more conventional and integrated into the lives of young people. They argue that 'drug taking is not an isolated aspect of young people's lives but is one of a number of ordinary unremarkable activities like listening to music, drinking beer and talking to the opposite sex which are part and parcel of the process of growing up in contemporary British society' (Coffield and Gofton, 1994, pg. 35). Their claims run almost parallel to Parker's and they too believe that the majority of drug use by young people is 'rational, logical and responsible' (Coffield and Gofton, 1994, pg. 36); not problematic; not deviant; not how social policy perceives it. As a result, similarly to Parker and colleagues (1998; 2002), they too strongly challenge the governments 'war on drugs' discourse which fails to come to terms with the awkward fact that the majority of drug use by young people is not a problem. They suggest that cannabis should be decriminalised and recommend that the government introduce a five year controlled social experiment. They contend that cannabis is undoubtedly a drug which has become normalised and believe that the statistical findings which show that there are some 41,400 'cannabis offenders' clearly demonstrates this. Their recommendation to decriminalise cannabis was indeed ignored, but the argument they brought forth about it being normalised gave prohibitionists a new outlook on this illicit drug.

The Normalisation Debate

Despite normalisation being a popular concept which has been deployed by other academics; it has faced heavy criticism and prompted the normalisation debate (Manning, 2007). Shiner and Newburn (1997) believe

that Parker's findings did not suggest that 'sensible' recreational drug use had moved away from its previous association with deviancy; but in fact 'had a long way to go before it assumed the status of a 'normalised' activity' (Shiner and Newburn, 1997, pg. 511). Their criticisms of the normalisation thesis are based upon two main arguments.

Firstly they argue that the survey data; and subsequent normalisation evidence; was read into far more than warranted and was interpreted wrongly. They argue that drug use remains to be a minority activity and the normalisation thesis exaggerated the true extent of illicit drug use due to it being focused predominately upon lifetime measures. They claim that lifetime measures 'do not reflect the dynamic nature of drug use' and 'indicators based on use during the last year and/or month show that regular drug use remains a minority activity' (Shiner and Newburn, 1997, pg. 526). For Shiner and Newburn (1997; 1999) recreational drug use is not part of 'normal' youth culture, as it remains as being a deviant minority practice which is restricted to subcultures. Shiner and Newburn (1997) go on to further support their claims and challenge the concept of normalisation by utilising evidence from both the 1994 British Crime Survey and the 1992 Youth Lifestyle Survey. By employing such evidence they reiterate that if focus is given particularly to current use, evidence overwhelmingly suggests that drug use is a minority activity and 'claims that an activity has become an established part of mainstream British youth culture therefore seem displaced' (Shiner and Newburn, 1999, pg. 146).

Shiner and Newburn's (1999) second and perhaps main criticism of normalisation, is that young people's perceptions of illicit drug use is overly simplified and they claim that the 'social accommodation' of drug use proposed by Parker and colleagues (1998) is not true. Shiner and Newburn (1999, pg. 152) claim that 'the apparent place and meaning of drugs in the lives of young people is, at the very least, guilty of romantic hyperbole' and 'there is clear evidence that the restrictive attitudes to drug use which are held to be characteristics of the 'adult world' are fairly widespread among

young people'. Shiner and Newburn carried out their own qualitative study regarding young people's drug-related attitudes and their study revealed a breadth of views about drugs which challenged Parker's 'monolithic implications of claims that drug use is becoming normalised' (Shiner and Newburn, 1997. pg 521). The study revealed how non users were not demonstrating particularly accommodating attitudes towards drug users, but instead held negative views and often associated drug use with deviant activities such as crime and violence. Shiner and Newburn (1997) also argue that even drug users themselves share many of the concerns expressed by non-users; including fears of addiction and damage to family relationships. Shiner and Newburn (1997; 1999) therefore clearly demonstrate how the normalisation proposed by Parker and colleagues (1998) may have significant limitations as a result of the acquired evidence.

Another key criticism which Shiner and Newburn (1997) highlight is as a result of the geographical location of the North- west longitudinal study. As the name suggests; the study took place throughout the North-west of England, which meant that many respondents were from Manchester; which at the time was regarded as 'the rave capital of Great Britain' (Coffield and Gofton, 1994, pg.5). As a result, Shiner and Newburn (1997) believe that the inclusion of the media labelled 'Madchester' (Redhead, 1993a), with its renowned club scene, makes the sample far less representative of the wider population. Coffield and Gofton (1994, pg. 5) also agree with this claim and argue that since Manchester had double the national average of drug addicts per million, it is hardly a location from which 'we can safely generalise to the total population of school pupils or young adults in the United Kingdom'. These criticisms raise serious issues regarding the validity of the longitudinal study and consequently the entire proposition of drug normalisation. The normalisation debate has remained dormant for around a decade now and as a result, little is known regarding the normalisation of recreational drug use in a contemporary setting; hence that is the central aim of this dissertation. The following chapter will outline the research methods adopted.

Methodology

This chapter aims to provide an in-depth analysis of the research methodology. The first section shall initially begin by outlining the research procedure, the justifications behind its selection, along with the alternative methods which were considered but rejected; the second section shall outline and examine the methods used to analyse the data; the third section shall examine the sampling and representativeness of the research; whilst the final section will investigate the ethical issues and how these were addressed.

Research Procedure

Since the research is reinvestigating normalisation in a contemporary setting to see how the situation has changed since the original study; the research has adopted a comparative design. In order to successfully achieve the research aims and provide a response to the central research question, this dissertation has collected primary data and also analysed and compared secondary data collected by Parker and colleagues. This section aims to explore the primary data collection in more depth.

Primary data was collected using anonymous online self-completion questionnaires which predominately adopted a quantitative approach through the use of closed questions, often in the form of Likert scales; but also included qualitative open-ended questions. Including open ended questions enabled respondents to elaborate and develop upon answers given in

previous questions, which resultantly produced a more diversified set of answers compared to close ended questions alone. The questionnaire was created using the website 'Survey Monkey' and this form of data collection was adopted as 'information can be gathered from a large number of people in a relatively short period of time' (Kalof, Dan and Dietz, 2008, pg. 119); it was also the most viable method given the financial restraints. The questionnaire remained live for 28 days and participants were approached using social media sites, where a hyperlink to the questionnaire and a brief description of the research was posted.

As highlighted, self-completion questionnaires were selected for a variety of reasons, but a more pressing issue made this form of data collection the most suitable method. Given the nature of the research, with its focus upon illicit drug consumption; it was felt that without participant anonymity and the absence of the researcher; a sufficient number of responses would not be received and those who did participate may give socially desirable responses to avoid criticism, stigma and/or gain social approval (King and Brunner, 2000); and consequently this would have affected the validity of the data (Huang, Liao, Chang, 1998). As a result, the only practicable option which could assure anonymity and would not involve any interaction with participants was online- self completion questionnaires.

Ultimately a mixed method approach whereby the research utilised both in-depth interviews; which provide 'personal and intimate encounter in which open, direct, verbal questions are used to elicit detailed narratives' (DiCicco-Bloom and Crabtree 2006, pg. 317) and/or focus groups which provide 'the opportunity to study the ways in which individuals collectively make sense of a phenomenon and construct meanings around it' (Bryman, 2012, pg. 504) would have been the most effective procedure; but due to the lack of funding and likely difficulties acquiring a sufficient number of respondents it was not considered feasible.

Data Analysis

As highlighted, the research was predominantly of a quantitative nature, and as a result primary data was analysed through Univariate analysis, as it enabled an intimate investigation of the data by examining variables precisely and in detail (Bernard, 2013). A variety of closed questions utilised five point interval measuring scales to effectively investigate the attitudes of respondents; and in order to successfully analyse such data, the arithmetic mean was calculated. The formula is shown below:

X = response count for answer choice

W = weight of answer choice

$$\frac{(X \times W) + (X \times W) + (X \times W) \dots X_n W_n}{n}$$

Total Sum of Responses

(Blaikie, 2003, pg. 72)

By calculating the arithmetic mean, the central tendency of responses could be revealed and the rating average was established. Measures of central tendency 'identify the point on a distribution around which all the other scores tend to group' (Black, 2002, pg. 120), which therefore enabled the measuring scales to be interpreted effectively. Rating averages were then situated into a series of bar charts as it enabled an effective visual comparison between variables. The small quantity of qualitative data acquired from respondents who elaborated on certain answers was analysed using thematic analysis, as it enabled the emergent themes and repetitions to be systemically coded and evaluated, which helped support quantitative data (Ryan and Bernard, 2003).

Sampling

In order to successfully acquire a sufficient sample of young adults, the method of strategic convenience sampling was adopted. As the name suggests, convenience sampling is concerned with simplicity and accessibility for both the researcher and participants (Bryman, 2012); hence the study's acquisition of respondents through social media sites. Despite its remarkable convenience however, this form of non-probability sampling does have a variety of limitations. Many social researchers criticise convenience sampling due to the confined nature, which resultantly makes generalisations about the wider population difficult, near unfeasible (Johnnie, 2011). Ultimately a probability sample would have minimised sampling error and improved representativeness, but again, given the financial restraints it was not possible. The sample contained a total of 154 participants, of which 52% (N= 80) were male and 48% (N= 74) were female. Since the research is focused upon young adults, all participants were between the ages of 18 and 25. The mean age of the sample was 20.5 years of age, whilst the modal age was 20.

Ethical considerations

Research ethics refer to rules of morally good conduct for researchers (Gomm, 2008) and according to Diener and Crandall (1978) the ethics of social research can be broken down in four main categories which include: whether there is harm to participants; whether there is a lack of informed consent; whether there is an invasion of privacy and whether deception is involved. To ensure that the research remained ethical and did not impose on any of the categories highlighted above; the research strongly adhered to the ethical guidelines set out by various academic bodies, including the British Criminology Society (2006).

According to the British Sociological Association (2002) it is imperative that researchers are aware of the 'possible consequences of their work' and 'should attempt to anticipate and to guard against, consequences for research participants that can be predicted to be harmful'. This paragraph

aims to provide a thorough discussion of the key precautions taken to ensure that participants did not experience any form of harm. Firstly, although questions were not concerning the complex issue regarding the impacts of illicit drug use; they still were of a sensitive nature, thus it was imperative that psychological distress was anticipated. Support was made available to participants through the drug support service 'Talk to Frank' and the web link to the service was included at the beginning of the survey. Secondly, participants were able to withdraw from the survey if at any time they felt uncomfortable to continue by simply closing their web browser. Participants were continually reminded of their ability to withdraw and for participants who had already submitted; they too could withdraw by emailing the researcher with their unique 'codename' which would enable their response to be identified and removed. Thirdly, and perhaps the most important step taken to ensure that the risk of harm was significantly reduced was by assuring anonymity. As highlighted, the survey was online; therefore no respondents were ever identified by the researcher. The questionnaire did not acquire respondent's personal information and 'Survey Monkey' was able to successfully mask respondents IP addresses and also protect responses as they moved along the communication pathways, and did this through its SSL encryption feature (Survey Monkey, 2013). The final step which was taken to ensure participants did not experience any harm was by effectively safeguarding all data. As the survey was web based, there was the possible security threat through the unauthorised access to the online database (Couper, 2008); therefore as soon as all data was collected, it was transferred into Microsoft Excel and was only ever accessed through password protected computers.

The next ethical principles which the research was compliant with were regarding informed consent, the invasion of privacy and the use of deception. Informed consent implies that 'subjects are made adequately aware of the type of information you want from them, why the information is being sought, what purpose it will put to, how they are expected to participate in the study, how it will directly or indirectly affect them' (Kumar, 2011, pg. 244). In order

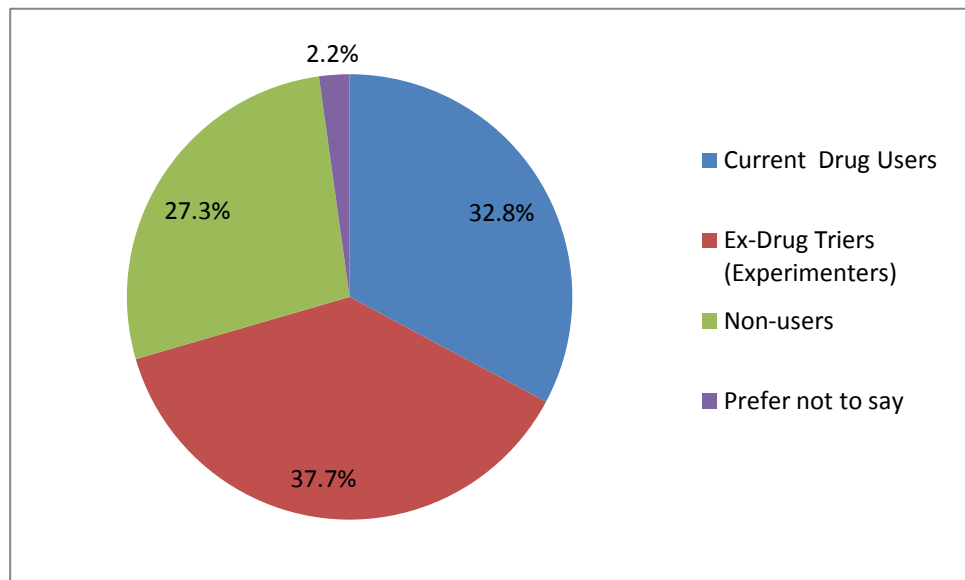
to successfully gain informed consent and ensure that no respondents felt that their privacy was being breached, it was imperative that before any respondents began the survey they had read all the necessary information regarding the nature of the study and were happy to partake. Participants then had to 'tick' the box which stated: 'Yes I have read all the information and agree to take part in the study' (See Appendix 1). By officially acquiring informed consent all respondents are made fully aware of the nature of the study, and also the researcher has a record of consent if issues are later raised by participants (Bryman, 2012). Since the survey was web-based, the function was put in place so participants had to provide informed consent otherwise they could not take part. Finally, it is important to emphasize that in no way were any participants deceived; all information received was accurate and revealed the true nature of the research aims. The next chapter shall move towards critically evaluating the research findings.

Discussion and Analysis of Findings

The following chapter explores and analyses the responses of 154 young adults who completed the online questionnaire. In order to successfully investigate the extent of drug normalisation, this dissertation investigated the five key dimensions proposed by Parker and colleagues (1998; 2002), thus questions were concerning; the access and availability of illicit drugs, drug trying rates, levels of recent and regular drug use, attitudes towards 'sensible' recreational drug use and the degree of cultural accommodation. Given the comparative nature of the study there will be a constant referral to Parker's original longitudinal study, to see how the situation has changed in order to truly evaluate the extent to which recreational drug use is normalised in a contemporary setting.

Before each of the key dimensions are thoroughly examined, it is first important to provide an overview of the sample's experiences with illicit drugs. Figure 1 below highlights the sample breakdown.

Figure 1: Sample Breakdown: Drug users, Ex-triers and Non- users



As Figure 1 demonstrates, the majority (70.5%) of respondents have tried at least one illicit drug, whilst it is the minority (27.3%) of respondents who have refrained from ever trying any form of drug. Regular drug users are indeed restricted to a limited percentage (32.8%), but what the chart has importantly demonstrated is that illicit drug consumption is widespread; it is not confined to a minority population. Table 1 below examines the sample further and reveals the gender breakdown of the percentages.

Table 1: Gender Breakdown of Sample: Drug users, Ex-triers and Non-users

	Male	Female	Total Percentage
Current Drug Users	21.1%	11.7%	32.8%
'One off' Triers (Experimenters)	16.9%	20.8%	37.7%
Non-users	11.7%	15.6%	27.3%
Prefer not to say	2.2%	0.0%	2.2%
Total	51.9%	48.1%	100.0%

Both Figure 1 and Table 1 have provided a useful overview of the sample; these findings shall now be examined much more thoroughly in the following sections.

Access and Availability

The first dimension of drug normalisation concerns the access and availability of illicit drugs; without this dimension normalisation cannot develop. This section will investigate drug offer situations, the ease of accessibility to drugs and also the methods of drug acquisition.

'Offer' situations provide an established measure of drug availability and Parker and colleagues (2002) revealed that the vast majority (93.1%) of young people had been in drug offer situations. This research also found similarly high levels of drug offer situations with 92.9% (N= 143) of respondents reporting to have been offered an illicit drug. Like Parker's study, the current research also revealed that gender did not particularly determine drug offer situations with 93.8% of males reporting to have been offered drugs and 91.9% of females. Table 2 below displays in more detail the overall percentages of specific drugs which have been offered to respondents.

Table 2: Drug Offer Percentages for Specific Drugs

Cannabis	90.9%
Cocaine	67.5%
Nitrous Oxide (Laughing gas)	65.6%
Ecstasy	64.9%
Mephedrone (M-Cat)	64.3%
Nitrites (Poppers)	53.2%
Ketamine	51.9%
Legal Highs	42.9%
LSD (Acid)	36.4%
Amphetamines (Speed)	33.8%
Magic Mushrooms	32.5%
Heroin	3.9%

Like Parker's longitudinal study, cannabis remains as being the most commonly offered drug, with an astounding 90.9% of respondents reporting an offer, which is very similar to the 89.0% found by Parker and colleagues (2002). Other drugs which appear to have remained similarly available, as well as unavailable in terms of offer situations are Ecstasy (originally 62.1%) and both Magic mushrooms (originally 32.4%) and Heroin (originally 8.9%). Despite the similarities however, there have been some notable shifts in the availability of numerous illicit substances.

In Parkers original study, 76.1% of respondents were offered amphetamines, 63.9% were offered nitrites and 56.3% of respondents were offered LSD which made these drugs the most offered behind cannabis. This research however found that all three of the drugs are no longer so commonly offered. Offers for nitrates have only slightly decreased (-10.7%), but offers for both amphetamines (-42.3%) and LSD (-19.9%) have reduced significantly. Amphetamines have shifted from being one of the most commonly offered drugs to nearly one of the least offered and the same can be said for LSD. Finally, and perhaps the most significant shift which has occurred in terms of offer situations is regarding cocaine. Originally Parker and colleagues found that less than half of respondents (46.5%) had been offered cocaine, whereas the percentage for this study is considerably more; with over two thirds of respondents (67.5%) reporting such an offer, making it now the second most offered drug. Such a substantial increase in offers for cocaine clearly demonstrates how it has become much more readily available since the 1990s. Another important difference regarding drug offers is as a result of the variety of new substances which have emerged since Parker and colleagues original research; notably nitrous oxide, mephedrone, ketamine and the evolving variety of 'legal' highs.

Another essential measure of normalisation is the accessibility of drugs. All respondents were therefore asked to indicate how easy they felt it would be to obtain specific types of drugs. Table 3 below indicates the research findings in hierarchical order of central tendency.

Table 3: Ease of Accessibility

	Very easy	Easy	Difficult	Impossible	Don't know
Cannabis	74.0%	20.8%	0.0%	0.7%	4.6%
Legal Highs	36.4%	20.1%	3.9%	0.7%	39.0%
Mephedrone (M-Cat)	30.5%	32.5%	9.1%	26.6%	1.3%
Cocaine	28.6%	39.6%	11.0%	0.7%	20.1%
Ecstasy	29.9%	29.9%	14.3%	1.3%	24.7%
Nitrites (Poppers)	28.6%	20.1%	14.9%	2.0%	34.4%
Nitrous Oxide (Laughing gas)	26.6%	24.7%	14.9%	2.0%	31.8%
Ketamine	22.1%	33.8%	12.3%	1.3%	30.5%
Amphetamines (Speed)	8.4%	20.8%	25.3%	2.0%	43.5%
LSD (Acid)	7.1%	17.5%	30.5%	2.0%	42.9%
Magic Mushrooms	7.8%	9.1%	32.5%	2.6%	48.1%
Heroin	1.3%	3.9%	24.7%	6.5%	63.6%

Unlike Parker's original study, this research provided the fifth option 'Very easy', to allow the accessibility of drugs to be gauged more accurately. Once again cannabis stood out from the cohort with it being by far the most accessible drug, with 84.8% of respondents reporting 'very easy' or 'easy', which similarly reflects Parker's findings where 84.3% of respondents indicated it would be 'easy'. The majority of respondents for all other drug types apart from LSD, magic mushrooms and heroin also indicated that they believed it would be either 'easy' or 'very easy' to acquire illicit drugs; however a large proportion of respondents did indicate that they did not know for almost all drug types. For all drug types, only a minute number of respondents indicated that it would be 'impossible' to get hold of drugs, which clearly demonstrates how drugs are accessible to most young adults in the sample.

The final part of this section investigates further the ease of accessibility. Why are young adults able to acquire drugs so easily? The 70.5% of respondents, who reported to have tried some form of illicit drug, were asked how they would normally obtain drugs. The majority of respondents (93.8%) had obtained drugs through either friends or acquaintances. Friends are evidently the main method in which young adults acquire drugs, and being

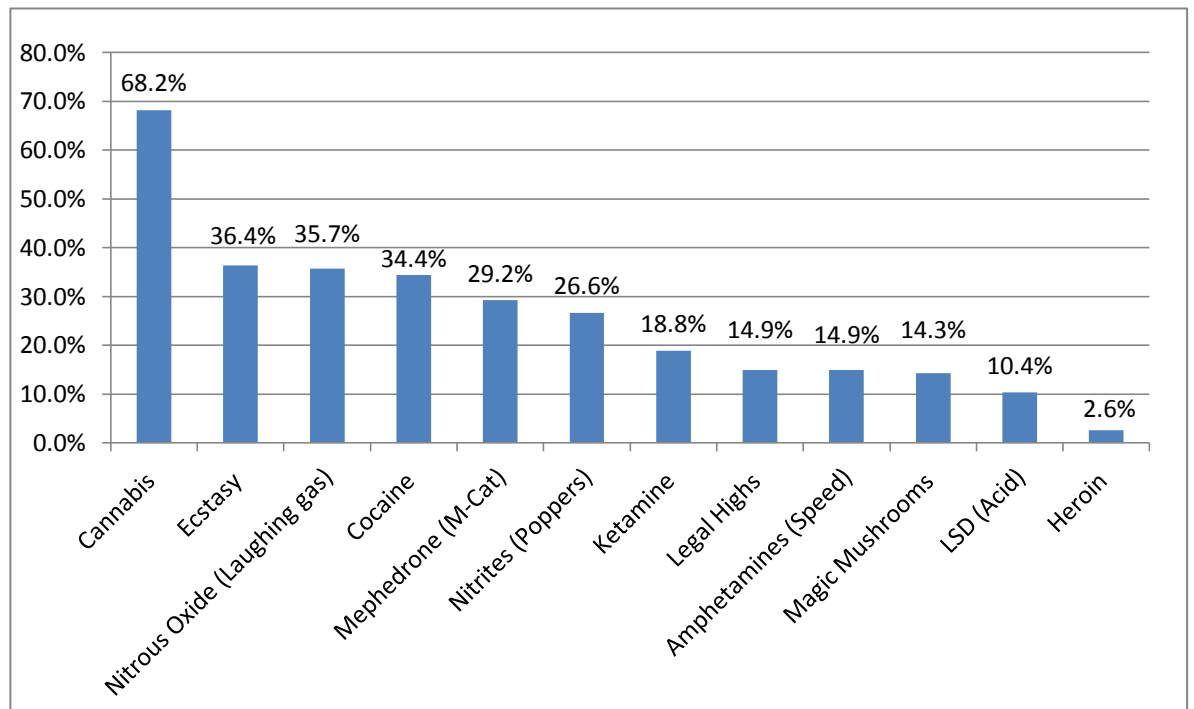
'sorted' drugs by a friend, as opposed to being dealt drugs by an unknown dealer is an essential part of drug normalisation. 'Sorting' acts as a 'filter or social device which allows them (young adults) to obtain drugs without venturing into the dodgy world of dealers' (Parker, Williams and Aldridge, 2002, pg. 944), and ultimately it enables illicit drugs to move away from their traditional association with deviancy. The research went to investigate the extent of 'sorting' and remarkably found that 21.4% of respondents have 'sorted' drugs on numerous occasions.

Drug Trying Rates

The next essential measure of normalisation is concerned with drug trying rates. This section shall initially begin by exploring the overall drug trying rates of the sample (containing figures from both current users and ex-triers) and shall then move towards specifically examining the proportion of the sample that are 'experimenters'.

In the original study, Parker and colleagues found that by the ninth year 75.8% of respondents had tried 'at least one' illicit substance. This research revealed a slightly lower percentage to Parkers findings, with 70.5% (N= 109) of respondents reporting to have tried some form of illicit drug. Of the cohort, 54.1% of drug triers were male and 45.9% were female which further demonstrates how gender no longer appears to determining factor. Figure 2 below reveals the drug trying rates of the overall sample regarding specific types.

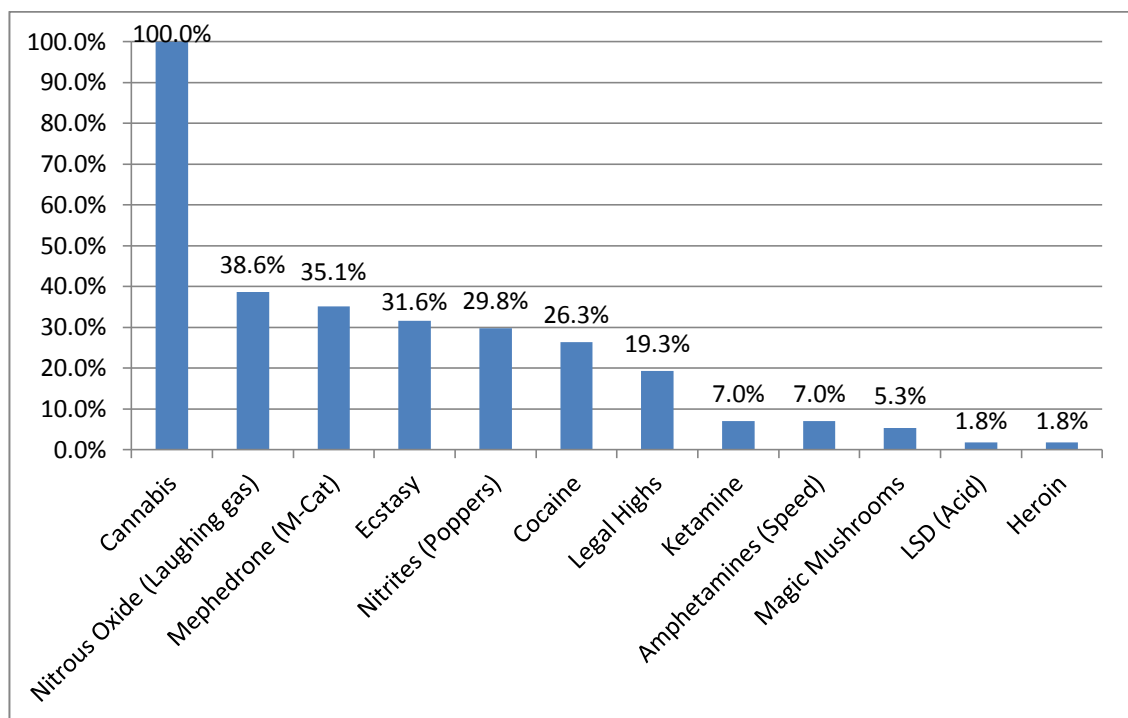
Figure 2: Drug Trying Rates of the Overall Sample



Cannabis remains as being by far the most commonly tried drug with 68.2% of the sample reporting to have tried it, which is remarkably similar to the 69.9% reported by Parker and colleagues (2002). Both Heroin and magic mushrooms remain as being drugs which have extremely low trying rates. Despite the similarities however, there are some notable differences regarding drug trying rates. Cocaine again has seen a steep statistical increase with 34.3% of respondents reporting to have tried it, which is a significant increase from the 24.6% reported by the longitudinal study. The trying rates for Ecstasy have also increased with 36.4% now reporting to have tried it, compared to the original 28.5% of respondents. There have also been some significant decreases in the drug trying rates for several different substances. After cannabis, amphetamines, nitrites and LSD were drugs which Parker found to have the highest trying rates, whereas this research revealed a significantly different finding. The trying rates for amphetamines have fallen by 26.9%, nitrites by 18.6% and LSD by 18.4%; a significant decrease for all three drugs. Overall drug trying rates remain high, but the trying rates for specific drugs have altered substantially.

Now that the overall drug trying rates of the sample have been thoroughly investigated, it is imperative to now solely examine the respondents who have only ever tried drugs 'once or twice'. As Table 1 (pg. 21) indicates, of the overall sample, 37.7% (N=57) of respondents are regarded as being ex-triers, who do not regularly consume illicit drugs, but have only ever tried them 'once or twice'; 'experimenters'. Figure 3 below, demonstrates much more clearly the percentages of specific drugs tried.

Figure 3: Drug Trying Rates Specifically of Ex-Triers



Once more, cannabis remarkably stood out from all other types of drugs with 100% (N= 57) of ex-triers revealing that they had tried it. Other drug types however are typically very low, with all other drug types being tried by much less than 50% of the ex-triers. It is therefore quite evident that 'one off' drug trying amongst young adults within the sample is predominantly centred around cannabis, as the trying of all other drugs is significantly lower.

Overall, drug trying rates still remain significantly high, with both males and females showing similarly high levels; gender is not a determining factor. With regard to individual drug types, cannabis still remains to be the most popular drug which is consumed, whilst the trying rates for other drugs have shifted considerably, with amphetamines, LSD and nitrites no longer being popular. For individuals who have only ever experimented with illicit drugs, the majority have only ever tried cannabis, with rates for all other individual drug types being evidently much lower.

Recent and Regular Drug Use

Following on from drug trying rates is the dimension which examines respondents who are classified as current drug users. The section shall explore the overall drug use rates of the sample compared with Parker, Williams and Aldridge's (2002) findings and shall then provide an individual examination of rates of current use. As Parker and colleagues outlined, it is difficult to define what constitutes as a 'current drug user', however this research regarded current users as being respondents who have used drugs on more than one occasion within the past month and who categorised themselves as drug users; not simply 'experimenters'.

Overall, regular and recent drug use remains as being a minority activity (32.8% of respondents in this sample and 31.2% in Parker's study), however the past month prevalence of illicit drug taking for individual drugs is

extremely different to that found by Parker. Table 4 below outlines the rates of drug use by current users, whilst Table 5 brings forth Parker's findings.

Table 4: Current Drug Use Rates of the Overall Sample

Cannabis	31.2%
Ecstasy	24.7%
Cocaine	24.0%
Nitrous Oxide (Laughing gas)	21.4%
Ketamine	16.2%
Mephedrone (M-Cat)	16.2%
Nitrites (Poppers)	15.6%
Amphetamines (Speed)	12.3%
Magic Mushrooms	12.3%
LSD (Acid)	9.7%
Legal Highs	7.8%
Heroin	1.9%

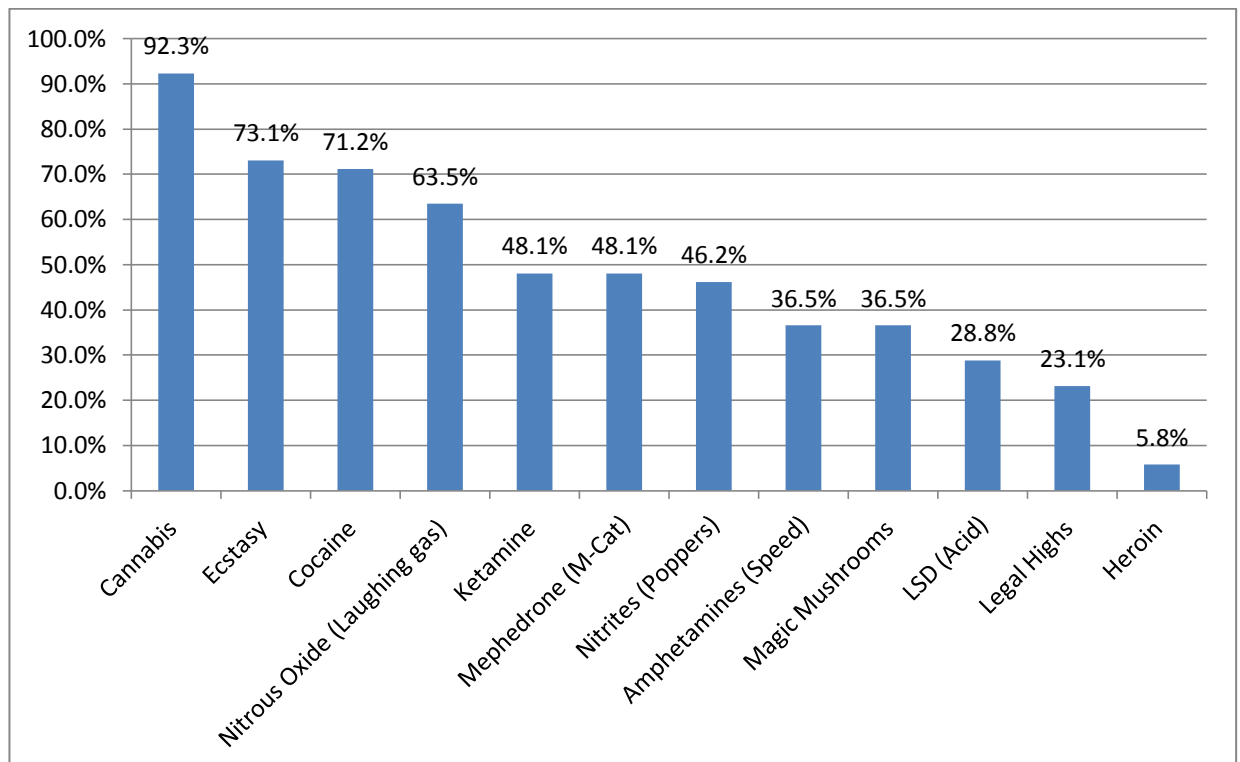
Table 5: Past Month Prevalence of Illicit Drug Taking Found By Parker and Colleagues (2002, pg. 956)

	Year 9
Cannabis	25.8%
Ecstasy	8.3%
Cocaine	7.0%
Nitrites (Poppers)	4.1%
Amphetamines (Speed)	3.7%
Magic Mushrooms	0.9%
LSD	0.0%
Heroin	0.0%

As Table 5 highlights, Parker's original research indicated that cannabis was the most dominant drug consumed, as the rate of usage for all other drug types was considerably lower. Although this current study similarly found cannabis to be the most commonly used drug; the rates of usage for other drugs have increased exponentially and resultantly cannabis no longer

remains as being by far the most predominately used drug. The rates of usage for all drug types have increased significantly since Parker's research, but what is important to note is that the hierarchy has remained identical, with cannabis, ecstasy and cocaine remaining the most popular, whilst nitrites, amphetamines, magic mushrooms, LSD and heroin follow. Such a significant increase in drug usage rates is a major finding of this research, as although regular use remains as an activity confined a small number of young adults; it is no longer primarily centred around cannabis; it a range of illicit substances which current users are now consuming. Figure 4 below highlights in more depth, the individual drug use rates of the sample's current users (32.8%).

Figure 4: Drug Use Rates Specifically of Current Drug Users



In summary, regular drug use remains as being an activity confined to a limited number of young adults, however it no longer appears to be primarily centred around the regular use of cannabis. As both Table 4 (pg. 28) and 5 (pg. 29) have illustrated, there are now some clear differences in the levels of past month drug use. The rates of regular drug use for almost all drug types have rose tremendously and as a result, drug usage rates for all individual drug types now represent a much higher proportion of the sample than previously found by Parker and colleagues. With regard to gender, the research revealed that regular drug use remains to be an activity which males predominately engage in. Males represent 65% of current drug users, whereas females only signify 35%; a clear indication of gender difference.

Social Accommodation of Recreational Drug Use

As Parker, Williams and Aldridge (2002, pg. 947) note 'an essential measure of the scale normalisation is the extent to which recreational drug use is personally and socially accommodated by abstainers and 'ex' triers'. This section therefore focuses upon investigating the attitudes of both abstainers and ex-triers towards recreational drug users; as in 'in order to argue that the status of an act has moved from 'deviant' to 'normal', it is necessary to show that, as well as being widespread, the act has come to be accepted as normal by the relevant audiences' (Shiner and Newburn, 1999, pg. 151). These respondents represent 65% (N=100) of the sample.

In order to successfully investigate whether regular recreational drug use is socially accommodated, both abstainers and ex-triers were asked to indicate their views towards the statement: "Sensible' recreational drug use which does not lead to addiction is acceptable'. The results were rather

overwhelming with 71% of respondents indicating that they either 'agreed' or 'strongly agreed' with the statement. Respondents were then given the option to elaborate if they felt it was necessary and the views expressed by many demonstrated accommodating attitudes. One respondent said:

'People have the right to do what they want, so if that involves drug use and not abuse then I don't have a problem with them'.

(Participant 028)

Another respondent also importantly differentiated between 'hard' drug misuse and 'sensible' recreational drug use, and displayed an accommodating attitude only towards the latter. They stated:

'Some drugs, cocaine and heroin, are extremely addictive and I would not like friends or family taking them. Other drugs such as cannabis, MDMA/Ecstasy and LSD are much less dangerous and I wouldn't mind their use'.

(Participant 003)

Respondents were then asked to indicate their views towards people that take 'harder' drugs, to further investigate attitudes. 91% of respondents indicated that they were either 'against' or 'strongly against', 'people that take 'harder' drugs'. Given the high proportion of respondents who believe that 'sensible recreational drug use which does not lead to addiction is acceptable', and also the extremely high number of respondents who are against 'harder' drug use, it is evidently clear that a high volume of young adults within the sample hold accommodating attitudes towards 'sensible' recreational drug use only. They are heavily against 'harder' more dependant drug use, but do not appear to find recreational drug use to be problematic, nor deviant; a clear indicator of normalisation.

As previously underlined, a key criticism of the normalisation thesis outlined by Shiner and Newburn (1997; 1999), was that many drug users themselves were concerned by and/or ashamed of their drug use. The current research therefore focused upon this and investigated the attitudes of regular drug users. Respondents were asked 'Do you think that your drug use poses any problems (i.e. addiction/dependency, problems with family, overdose, health problems)?' Of the 52 current drug users within the sample, 86.5% did not believe that their drug use posed any problems. Respondents were also given the ability to elaborate if they felt it was necessary and the views expressed by many clearly demonstrated that users were far from concerned. One respondent said:

'I know I won't get addicted. It's not like most people seem to think. Of course hard drugs lead to addiction, but taking softer drugs recreationally isn't a big deal cos you are fine the next day. Taking an ecstasy pill isn't a problem and neither is smoking a [cannabis] joint.

(Participant 084)

Similar views were expressed by many other current drug users, thus the majority of the sample who are drug users do not appear to believe that their drug consumption poses any problems. Social accommodation is crucial tenant of drug normalisation and the research has clearly demonstrated that 'sensible' recreational drug use appears to be accepted and importantly is not demonised by young adults; thus it seemingly appears to be increasingly normalised.

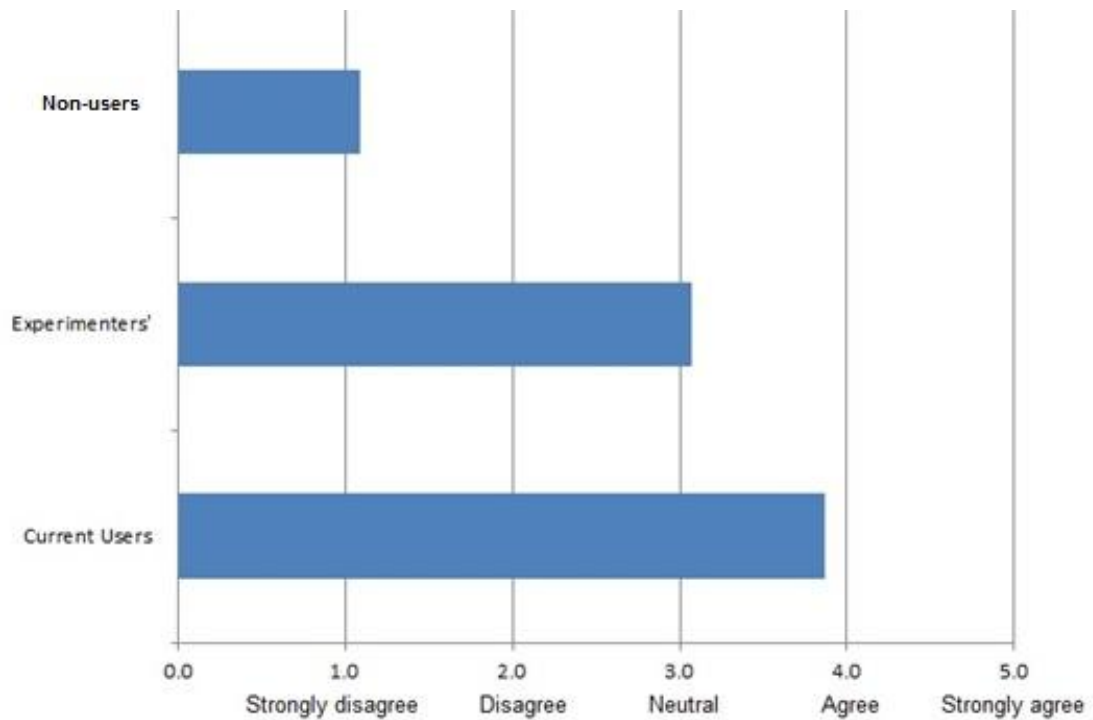
Cultural Accommodation

The final dimension of drug normalisation which the current research has investigated is concerning recreational drug use becoming culturally accommodated. Given its ambiguity, 'assessments of the extent to which the realities of recreational drug use are being accommodated in cultural understandings of normality are very difficult to make' (Parker, Williams and

Aldridge, 2002, pg. 949), thus precise and definite indicators of cultural accommodation are difficult to acquire. This section shall investigate respondent's views towards the 'blurring of the licit and the illicit' (Parker, Willaims and Aldridge, 2002, pg. 949) and shall then move towards examining whether drugs remain to be culturally accommodated in the 'going out' social worlds, as the literature review previously outlined.

Parker and colleagues noted that an essential indicator of recreational drug use becoming culturally accommodated was through the blurring of the licit (e.g. alcohol) with the illicit (e.g. cannabis and cocaine) (Parker, Williams and Aldridge, 2002).The current research investigated this, and all respondents were asked to indicate their views towards the statement: "Sensible' drug use is just a recreational activity; the same as drinking alcohol'. Figure 5 below illustrates the central tendency of responses; results were highly mixed.

Figure 5: Attitudes of Current Users, Ex-triers and Non-users



As Figure 5 reveals, attitudes towards the statement vary significantly based upon individuals own situation regarding recreational drug use. For the majority of regular drug users there is little difference between consuming drugs and drinking alcohol, whereas for abstainers and 'experimenters', there is clear dissimilarity. The blurring of the licit and illicit proposed by Parker therefore no longer appears to be the case, since it is typically only drug users who regard recreational drug use to be 'on par' with alcohol consumption.

Cultural accommodation was further investigated by asking the 97% of respondents who go on 'nights out'; how often they see drug consumption. 54% of respondents indicated that they 'frequently' or 'very frequently' see recreational drugs being consumed, while a further 29% of respondents said that they did 'occasionally'. Only 15% had 'rarely' seen the use of drugs whilst the remaining 2% had 'never'. As a result, it is evident that recreational drug use still appears to hold a strong footing in the nocturnal leisure industry. Indeed as the previous sections have highlighted, the regular use of recreational drugs is confined to a limited number, but almost all young

adults in this study have indicated that they often see drugs being consumed on 'nights out'. 'Nights out' are a central part of young adults culture and given the strong indications that drugs are regularly and openly used on nights out; it can be strongly argued that recreational drug use is indeed culturally accommodated.

Now that the five central dimensions of normalisation have been thoroughly examined, the final section shall draw together the conclusions which have been established from the research analysis.

Conclusion

Now that the findings of the research have been thoroughly analysed and various conclusions have been reached; this final chapter shall move towards providing an adequate response to the central question: To what extent has recreational drug use become normalised amongst young adults in contemporary society? This final chapter shall initially begin by wholly reviewing the conclusions reached from the various dimensions investigated and shall finally provide a singular response to the central research aim.

As the results section previously demonstrated, the current research has brought forth evidence which both resembles and contrasts Parker and colleague's original study. Overall, illicit drugs evidently remain increasingly available and the overwhelming volume of drug offer situations clearly demonstrates this. Evidence has also suggested that drugs remain easily accessible through the informal network of 'sorting'. This method of acquisition not only allows drugs to be accessed easily; it also acts as both a physical and symbolic barrier between user and 'real' dealers (Parker, Williams and Aldridge, 2002). The clear blurring of the line between the user and dealer is a central aspect of drug normalisation as it helps facilitate illicit drugs move away from its conventional association with deviancy. Regular drug use indeed remains to be an activity confined to a limited population, but as the sample has revealed, young adults who have never consumed some form of illicit drug are the significant minority; a clear indication of the normative nature of drug usage.

With regard to individual drugs, the current research has revealed how both amphetamines and LSD no longer appear to be situated within the normalisation concept. Both drugs have seen a significant reduction in both offer situations and trying rates, and they no longer appear to be so accessible. Unfortunately it was not possible to definitely assess attitudes towards the use of both drugs, but their clear unpopularity suggests that they no longer appear to be drugs which match the normalisation criteria. Cocaine however has done the complete opposite and is evidently beginning to move away from its traditional 'hard' drug classification and towards becoming a

drug which could very soon have a place within the conceptualisation. Originally Parker and colleagues (1998) excluded cocaine from the thesis, as it was a drug 'which went hand in hand with heroin or crack cocaine' (Aldridge, Measham and Williams, 2011, pg. 222) and although it is still not possible to argue that it has become normalised, it has certainly moved a considerable distance away from being a drug which is primarily linked with deviancy and dependency; as it is now one of the most commonly consumed drugs. Given the indistinctness, and the inability to objectify, it is difficult to categorically assess which drugs are more normalised than others; however given the research findings, whereby it often stood alone from all other illicit substances; cannabis appears to be the most normalised drug. With overwhelming high trying rates, clear evidence of the prevalent availability, as well as widespread accommodating attitudes, whereby nearly half the UK population have advocated decriminalisation (BBC, 2001); it is certainly the drug which is undoubtedly the most normalised.

Given the overwhelming findings, whereby seven in ten young adults within the sample have consumed an illicit drug; the minority of young adults who do not engage in the consumption of recreational drugs, are likely to be associated with, or at least be acquainted with other young adults who have previously, or currently consume drugs recreationally. Recreational drug users are therefore essentially friends or 'friends of friends' of many young adults, and as South (1999, pg. 4) argues it is the 'acquaintance with peers who are or have been drug experimenters or users' which has enabled recreational drug use to 'shift from the realm of the esoteric to being ordinary facts of everyday life'. As the current research has clearly outlined, young adults within the sample do not tolerate the use of harder drugs; that remains to be deviant, thus still carries stigma; but the majority of attitudes displayed towards the 'sensible' use of recreational drugs is far from negative; but is instead accepting. Overall the evidence acquired from the sample does suggest that recreational drug use has become increasingly normalised amongst young adults in contemporary society. Indeed, it would be both bold and irrational to suggest that recreational drug use is simply the norm; but as

the evidence acquired suggests, recreational drug use has moved even further away from its traditional association with deviancy and has become further situation into popular mainstream youth culture. Of course for some young adults, it remains to be an unacceptable activity which they do not tolerate; however for the majority, 'sensible' recreational drug use is simply 'part and parcel' of young adult's contemporary culture.

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