

TO WHAT EXTENT HAS RECREATIONAL DRUG USE BECOME NORMALISED AMONGST THE STUDENT POPULATION AT UNIVERSITY?

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Abstract

This dissertation measures the extent to which recreational drug use has become normalised amongst the student population at university. It draws on five key dimensions to measure normalisation through the use of online self-completion questionnaires; access and availability, trying rates, rates of recent and regular use and the degree of social and cultural accommodation of such use. This dissertation assessed the extent of normalisation in comparison to previous research carried out amongst young people in this subject area. The availability of drugs has increased with over 94% of respondents having been in drug offer situations. Accessibility is still highest for cannabis with a significant increase found for 'dance drugs' cocaine, nitrates and ecstasy. Drug trying rates have also risen to 78%, again dominated by cannabis but with a significant rise in cocaine, ecstasy and nitrates. There has also been an increase in association with 'dance drugs' in relation to recent and regular use, now falling close behind cannabis. This dissertation also found a strong degree of social and cultural accommodation of drug use with over 90% having more than 10% of drug trying friends, with attitudes prevailing cannabis as the most tolerated drug. Overall the student population at university from this dissertation appear to be firmly normalised to the recreational use of cannabis, with cocaine, ecstasy and nitrates increasingly falling close behind. Only heroin, LSD and solvents had rarely been tried or used often. This dissertation therefore concludes that recreational drug use is increasingly 'becoming accommodated into the social lives of conventional young people' (Parker et al, 2002, pg 942).

¹ This Dissertation is submitted in part-fulfilment of the degree of Bachelor of Arts (Honours) Criminology, May 2011, Nottingham Trent University, Division of Criminology, Public Health and Policy Studies, BA (Hons) Criminology,

Contents

	Page
1. Introduction	3
2. Literature Review	4
3. Methodology	9
4. Results and Analysis	14
5. Conclusion and Recommendations	24
References	26
Appendix 1 – Questionnaire	30
Appendix 2 – Student’s Certificate of Ethical Compliance	35

Acknowledgements

I would like to thank my supervisor Philip Hodgson for his invaluable contributions, advice and guidance during the research and writing of this dissertation. Also, I would like to thank my parents for their endless support throughout my three years at Nottingham Trent University.

Introduction

Drugs can be defined as ‘any chemical substance, whether of natural or synthetic origin, which can be used to alter perception, mood or other psychological states’ (Gossop, 2007, pg 2). The practice of using such chemical substances to alter the way we feel is a well-established activity undertaken by many people within society (BBC, 2011). However, over time research has indicated widespread changes in the use of such controlled drugs, as well as shifts in the attitudes towards them. Over the years issues surrounding drug use have always held a firm position within society, becoming an increasingly challenging and contentious concern influenced by many distinct stages throughout history. During the 1960s a drug culture emerged creating a moral panic linked with ‘a hippie culture that proposed extravagant levels of hedonism and expressivity and opposition to the values of work and discipline’ (Young, 2009, pg 5). At this time the most popular drugs used were cannabis, amphetamines and LSD (Barton, 2003). However at the beginning of the 1970s all controlled drugs in the UK were classified under the Misuse of Drugs Act 1971, according to the observed danger they caused to users and society. Nevertheless drug use continued to increase over the years with continuation into the 1980s in which a surge of heroin users emerged (Kalunta-Crumpton, 2006). It is clear that through history many important post war drug arenas became apparent however, they involved a small minority of the population that were essentially subcultural drug scenes (Parker et al, 1998).

What was soon to arise in Britain was therefore far different to what had been experienced in previous years. The move into the 1990s saw ‘the emergence of something quite unprecedented – widespread drug use amongst very large numbers of ordinary young people’ (Parker et al, 1998, pg 1). Drug use had now become increasingly common amongst many young people in society with attitudes towards this use being widely accepted. This increase in the 1990s was primarily based around the use of cannabis but also drugs such as LSD and dance drugs, ecstasy, amphetamines and nitrates. The emergence of this dramatic increase in drug involvement amongst young people in the 1990s saw them lie at the centre of media coverage making ‘them the most written and broadcast about youth topic of the decade’ (Parker et al, 1998, pg 1). This created a ‘war on drugs’ which prompted misunderstandings and confusions about drug use amongst young people in Britain. In understanding the explanations behind this increase it is key to look beyond simple explanations such as gender and age, but instead to the contexts and conditions in which young people grow up.

‘One way of thinking about these issues and the place of drugs in late modern society is to consider the proposition that drug use has now become a ‘normal’ part of everyday life. In other words, it is ‘non-acquaintance with drugs or drug users that has become the deviation from the norm’ (Carrabine and Lee, 2009, pg 271). With Britain increasingly having one of the most drug experienced younger generations in Europe (Measham et al, 2001) it led many academics to believe that drug use in Britain had become normalised (Barton, 2003). ‘It was an attempt to make sense of young people’s experiences of growing up ‘drug wise’’ (Parker et al, 2002, pg 942). Normalisation ‘refers to human behaviour which exhibits some degree of regularity’ in which drug use has become much more conventional and integrated into many people’s lives (Blackman, 2004, pg 138). In seeking to understand the increase in drug involvement amongst many young people normalisation ‘does not suggest that drug taking is a widespread activity, it seeks to understand drug use as an action of everyday life’ (Blackman, 2004, pg 138). Parker et al (1998) developed the normalisation thesis on drugs in the 1990s, concluding that drug use has become socially accommodated amongst the lives of many young people in Britain.

The aim of this dissertation is to therefore examine the extent to which recreational drug use has become normalised amongst the student population at university, drawing on the work of Howard Parker's normalisation thesis. There are clear indications that drug use amongst youthful populations is changing and will have changed since the majority of previous research. The extent of drug use amongst British youth has now caused the view that it has a visible place within modern popular cultures rather than a deviant activity as previously perceived (Blackman, 2004). Therefore the purpose of this research is to investigate the current situation to examine whether there has been a change in drug use since the majority of studies conducted in the 1990s, extending the knowledge of the prevalence and profile of young drug users. One area that also needs further exploration is the extent to which hard drugs such as cocaine and heroin fit the normalisation thesis. The normalisation thesis developed by Parker et al (1998) only focuses on soft drugs such as cannabis and amphetamines, indicating that daily 'hard' drug use shape no part of their notion. They believe it is a completely separate subculture as the minority of hard drug users are not considered as recreational users. However, have cocaine and heroin now become more recreationally used by young people or do they still fit in with the minority? This research is also important as the results of such investigations can highlight the relevant issues that affect current drug policy in the UK and how we deal with important issues that arise from the research. Such research can emphasise the ways in which the public and policy makers need to understand the implications and options for future policy, in relation to young populations.

In order to explore these aims this dissertation will look at the student population at university, aged 18-24, to see how normalised recreational drug use is amongst this section of the population. As 45% of young people now enter higher education compared to 20% twenty years ago it makes this current research project far more representative (BBC, 2010). Also as Measham et al (2001) stated recreational drug use fits into young people's concepts of 'time out' from the stresses of growing up in an indefinite 'risky' postmodern world (Parker et al, 1998). Therefore students fit in well this with notion and will be used to measure the extent of normalisation amongst the younger generation. The aims will be applied by distributing online questionnaires amongst students at university in order to measure drug involvement and the attitudes concerned with drug use, amongst both users and non-users. It is believed that this method will accomplish the main aims of this dissertation in assessing normalisation in order to support or oppose earlier theories on this concept. Information gathered into the normalisation of drugs from existing literature will be explored and compared with findings from the student population at university.

This dissertation is divided into five chapters: the introduction, the literature review, the methodology, discussion of findings from the primary research and overall conclusions. For this dissertation, the following chapter, the literature review, will describe the concept of normalisation, discussing the relevant literature that both agrees and disagrees with the concept. Chapter 3 then goes on to explain both the primary and secondary methodological approaches underpinning this research project. Following on from this, chapter 4 discusses the findings from the primary research comparing and contrasting each measure of normalisation to existing literature on the topic of normalisation, previously discussed in chapter 2. Finally chapter 5 will conclude the overall research aim 'To what extent has recreational drug use become normalised amongst the student population at university', also outlining recommendations for future research that have been highlighted during the process of this dissertation.

Literature Review

The following chapter will introduce the background to the normalisation of recreational drug use, providing an overall discussion of the relevant literature surrounding the topic area. Application of the theory of normalisation, in explaining the unprecedented increase of drug use amongst youthful Britain throughout the 1990s, was first documented by authors Parker, Aldridge and Measham (Parker et al, 2002). This literature review chapter will look at the findings from this initial research and discuss the normalisation debate in general, illustrating further key studies that both agree and disagree with the normalisation concept. The remainder of the chapter will look more specifically at previous research conducted that investigates drug use amongst the student population, the subject of this dissertation. This research project aims to examine the extent to which recreational drug use has become normalised, adhering to the normalisation concept Howard Parker proposed during the 1990s.

An increasing body of research in the UK throughout the 1990s showed considerable changes in the behaviours and drug associated attitudes of young recreational drug users. An explanation of these changing patterns during the 1990s is the Normalisation Thesis. It is argued that recreational use is now such a familiar occurrence that it should be regarded as 'normal' instead of an activity only undertaken by minority subcultures (Manning, 2007). The normalisation thesis is a descriptive framework that attempts to explain the behavioural and drug related attitudinal change, considering both socio economic and cultural background for such change (Measham, 2004 in Ferrell et al, 2004). Instead of looking at factors such as age, gender, ethnicity, poverty and unemployment the normalisation thesis observes changes of availability and experimentation by youthful populations, within the contexts and conditions in which they grow up. A strong view now exists that drug use and its cultural practices occupy a much more visible position within contemporary popular cultures, based on this normalisation thesis (Blackman, 2004).

The key researchers in the normalisation thesis on illicit drugs in contemporary society are Parker, Aldridge and Measham. These researchers have carried out vast amounts of longitudinal research on adolescent drug use in the UK over a 15 year period, specifically the North West Longitudinal Survey (Measham et al, 1994; Parker et al, 2002). They illustrate the normalisation thesis as follows:

'Normalisation in the concept of recreational drug use cannot be reduced to the intuitive phrase 'it is 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 towards the centre of youth culture where it joins many other accommodated 'deviant' activities such as excessive drinking, casual sexual encounters and daily cigarette smoking' (Parker, 1998, p 152).

Parker et al (2002) therefore identify that drug use has gained a solid position within popular youth culture accepted through a result of social change and the journey to adulthood that the young generation experience (Measham et al, 2001). Parker et al (2002) suggests that factors such as changes in the economy and an increase in young people attending university, results in extension of period in which young people adopt their own independence and lack of responsibility over their own activities. Therefore it is suggested that the increasing rates of recreational drug use amongst the student population reflects the notion of 'time out' from the pressures of growing up, in which it is increasingly becoming normal. Even if students have not taken any drugs their familiarity and availability to access such drugs still shows a clear

picture of the extent to which drug use is normalised and accepted within society (Measham et al, 2001).

The evidence for the normalisation concept was gathered from research that began at the end of 1991 (Measham et al, 1994). The North West Longitudinal study examined the normalisation of drug use amongst 776 young people aged 14-15, measuring access and availability, drug trying rates, rates of regular use, attitudes towards drug use and the degree of cultural accommodation. Through an anonymous self-report survey Measham, Parker and Aldridge aimed to estimate the profile and prevalence of young drug users in North West England (Measham et al, 1994). Results identified that 60% of the sample had been in drug offer situations with 36% trying at least one drug in their lifetime, 31% in the past month and 20% in the past year (Ibid, 1994). Researchers also found that cannabis was the most common lifetime prevalence drug, amongst 32% of the sample followed by dance drugs such as LSD and ecstasy. They also estimated from their findings that the parameters of drug use was between 30-40%, therefore proposing that up to 200,000 of local young people have used drugs (Ibid, 1994). The principal research carried out into the normalisation of recreational drug use here indicates 'that the prevalence of drug use has risen to record levels among young people, and that it continues to be associated with a package of demographic and psychosocial characteristics' that adhere to the normalisation thesis (Measham et al, 1994, pg 309).

Research into the North West Longitudinal study continued to measure the extent of normalisation in the following years by recapturing 465 of the sample from the initial study. The aim was to monitor drug involvement to see what further changes had been made, with results giving further evidence for the normalisation debate. Parker et al's (2002) research found a significant increase in the number of those being offered drugs from 60% to 91% as well as 64.3% of the sample now reporting trying at least one drug compared to 36% previously, with cannabis still mentioned most frequently. They also found that virtually the entire sample were drug wise, with drugs 'no longer a distant phenomenon' (Manning, 2007, p 52). As well as this there was also widespread acceptance of future and continued use of drugs amongst respondents. Indicating that 'sensible recreational drug use over the time of their study seems to be becoming increasingly accommodated into the social lives of conventional young adults' (Parker et al, 2002, p 941). Howard Parker and colleagues therefore provide evidence that not only is drug use widespread, but its usage is also perceived to be normal conclusive with the normalisation thesis. It is key to point out that the normalisation thesis developed by Parker during the 1990s only focuses on soft drugs such as cannabis and amphetamines. Parker et al (1998) indicate that addiction and daily "hard" drug use shape no part of their notion as the minority of hard drug users are not considered as recreational users. Research now shows that the amount of people testing positive for Class A drugs who have been charged or convicted for acquisitive crimes has increased to around 50-60% (Mallender et al, 2002). As the general use of such drugs seems to be increasing this dissertation will therefore explore the extent to which such drugs fit into the normalisation thesis amongst the student population.

There are many other researchers that have also carried out vast amounts of research into the normalisation thesis on drugs, concluding corresponding results to the normalisation thesis. Miller and Plant (1996) surveyed 7,722 15 and 16 year olds in Great Britain finding that 42.3% of the overall sample had tried an illicit drug, with Scotland having the highest rates (Meikle et al, 1996). Further research has also established that drug trying rates amongst this age group stands between the 50-60% range (Aldridge, 1999; HEA, 1996). Studies into the

normalisation of drugs also present findings on recent and regular use, one of the dimensions included in the normalisation concept. Lifetime use of recreational drugs has found to be high in further research ranging from 40-50% of the samples surveyed (Oakley et al 1992; Thomas, 1991 cited in Aldridge et al 1999; Williams and Parker, 2000). Drug offer rates have also been shown to be common amongst this age range with further researchers concluding that around 60% of their sample had been in drug offer situations (Goddard and Higgins, 1999; Measham et al, 1994; Ogilvie, 2005). Many researchers including Williams and Parker (2000) and Cooke et al (1997) have also continued to document the existence of drug involvement that is increasingly ruled by cannabis use. Research has also suggested that more people are now using 'dance drugs' such as LSD and ecstasy that are increasingly holding a position within the normalisation thesis (Coffield and Gofton, 1994). As well as availability and drug use trends, attitudes towards recreational drug taking and cultural accommodation of drug use continues to be investigated, as an aspect also indicating normalisation. In addition to increase widespread use of cannabis the attitudes towards its use have also become increasingly broadly accepted with people believing it not harmful to their health. In contrast other drugs such as ecstasy, heroin and cocaine are seen as negative and unacceptable (Dillon et al, 2007). However as discussed earlier the offending subculture is increasingly using such class A drugs, are they now considered more acceptable in general?

It is clear that many researchers have continued to examine various aspects of the key dimensions investigated in the normalisation concept. The findings from continual research into the normalisation debate suggest results that are consistent with the shift towards normalisation of recreational drugs within society that was established in the 1990s. As Loughery and McCormick (2000) conclude from their research the youthful generation of today consistently report widespread availability of recreational drugs, seeing drug taking as 'normal' in their social environment. The relevant literature therefore shows that studies conducted 'tell a broadly similar story' (Aldridge et al, 1999, pg 1). However the concept of normalisation does not exist without criticisms from other researchers who disagree with its explanation of drug use amongst young Britain.

Shiner and Newburn (1997) criticise the normalisation thesis as they believe that the results discovered in the research does not imply the minorities reporting regular soft drug use are large enough to validate the "normalisation" term. They believe that the normalisation thesis exaggerates the degree of drug use by young people as the majority of young people actually abstain from using drugs, preferring socially expressive and pre occupying alternatives instead. Therefore they believe that it 'fails to pay sufficient attention to the normative contexts in which youthful drug use occurs' (Shiner & Newburn, 1999 in South, 1999, pg 155). In their study through interviews Shiner and Newburn (1996) in fact found that 16-19 year olds have negative attitudes towards drugs and associate their use with crime. Shiner and Newburn (1996) in fact found that 54% , their largest category, said they had never used an illicit drug at any point in their lives. However how many of these respondents would be reluctant to tell the truth? (Patton, 2005; Rouse et al, 1985). Furthermore, this research was carried out within the respondents school which may have led the participants give an answer that was socially desirable and did not represent the actual truth, questioning the validity of the research. Shiner and Newburn conclude that such results found in their study disregard the normalisation of drugs theory, believing drug use to be a minority activity.

Further researchers also criticise the normalisation thesis on drugs and the methods in which the concept is drawn upon. Studies adopt quantitative research methods that assess and produce statistical results on a variety of components in their portrayal of the normalisation

debate (Henderson, 1999 cited in South, 1999). Shildrick (2002) criticises the normalisation thesis stating that it is an over simplified explanation of young people's drug use, containing both empirical and theoretical weaknesses. Shildrick (2002, pg 47) states that the theory 'does not allow for ways in which some types of drugs and drug use may or may not be normalised for some groups of young people'. The procedures used to adopt the normalisation thesis do not allow for expansion and dimension into specific reasons and experiences that elaborate on young people's involvement with recreational drugs. Shiner and Newburn (1996) and Shildrick (2002) both agree that it cannot be concluded drug use amongst the youthful population is normal, especially from the methods implemented to generate this conclusion.

Although the majority of research surrounding the normalisation of drugs has looked at varying ages of youthful populations this research is focusing on students at university primarily ranging from 18-24. A variety of previous research into the normalisation thesis has also utilised university students as a sample as they 'provide one of the few arenas for the easy capture of young adults' on a large scale (Parker et al, 2002, pg 946). Webb et al (1996) and Makhoul et al (1998) both conducted research concerning drug use amongst university students in the UK. They discovered that 20-25% of the sample were regular users of cannabis and 10% of ecstasy. From their findings they suggested that students who choose to take drugs did so because they enjoyed it and were no different to the normal population of students who choose not to (Makhoul et al, 1998). Webb et al (1996, pg 925) concludes that 'drugs were mainly taken for pleasure and were perceived as a normal part of everyday life for many students'. Drug use had become normalised amongst a substantial amount of non-deviant university students at universities in the UK (Makhoul, 1998). Measham et al (2001) also found corresponding results to the normalisation thesis, looking at post adolescents and club culture. They found that lifetime trying rates for cannabis were nearly 100% and 70% for cocaine, with other drugs such as ecstasy, amphetamines and LSD rating between 60%-90% (Ibid, 2001). There is a well-established link between students and the clubbing culture therefore the findings on post adolescents studied in this research may be concerned with the student population. Studies on drug use amongst university students suggest that up to 60% have some involvement with drugs, doubling over the last 15 years (Parker et al, 2002). Like other studies on the normalisation concept findings from student samples also show that cannabis is the most common drug used, with 13-18% using dance drugs such as LSD and Ecstasy (Ibid, 2002).

Overall research has shown evidence to suggest an increase in drug involvement and a change in drug related attitudes amongst young people in society. Evidence tends to support the notion that 'drug use has become a 'normal' part of life in the UK' supporting the normalisation concept developed by Howard Parker and Colleagues in the 1990s (Drug Scope, 2011). It has also been suggested that this is the case amongst the student population attending university. This research will therefore go on to investigate the current situation to examine whether the gap since existing literature has had an effect amongst students at universities across the UK. To what extent has recreational drug use become normalised amongst university students studied in this dissertation? The methods adopted to investigate this notion will be discussed in detail within the next chapter.

Methodology

Introduction

In order to accomplish the research objectives and to address the research question this dissertation draws on both primary and secondary data collection methods. It was felt that through a methodological triangulation approach a well-balanced and in depth analysis could be accomplished, in addressing the chosen topic.. Both data methods were used as secondary data allows for understanding of the topic area while informing the primary research design. This chapter will therefore outline both the primary and secondary methodological approaches underpinning this research project, outlining key considerations, the format and design, advantages and disadvantages and the ethical considerations behind the chosen methods.

Secondary Research

Secondary research is generally defined as ‘the act of collecting or analysing data that was originally collected for another purpose’ (Riedel, 2002 cited in Bachman & Schutt, 2011, pg 306). Secondary research therefore permits for the analysis of accessible information that is already available on the perceptions and assumptions of the topic area, that may agree or differ to the initial argument (Sarantakos, 2005). For this dissertation secondary data analysis utilised core texts, a range of journal articles and websites related to the subject matter. Past studies that contain relevant information and conclusions about the normalisation thesis have been an imperative material in gaining knowledge towards the topic being researched. The key researchers into the normalisation thesis on illicit drugs in society, that are of vital importance towards this dissertation are Parker et al (2002) and Measham et al (1994). Studies such as this and many others discussed during this dissertation are very reliable and efficient in providing evidence in which student projects fail to ‘get close to the coverage that such data set attain’ (Bryman, 2004, pg 202).

The secondary data sources used to aid this dissertation followed Scott’s criteria for assessing the quality of documents: authenticity, credibility, representativeness and meaning (Scott, 1990 cited in Bryman, 2008). Core texts are beneficial as they offer an explanation for past research while also acknowledging relevant arguments (Bryman, 2004). Journal articles are also valuable in offering ‘a view of what is currently happening’ and therefore will also be utilised to shed light on the current debates surrounding youthful drug use (Jupp et al, 2000, pg 44). Web based research as well as online newspapers that provide a rich source of evidence will also be used to provide information on relevant changes in relation to drug use amongst the young population. Online sources provide ‘a valuable supplementary resource through which to review the emergence of new topics in areas of social concern’ (Bryman, 2008, pg 97). Caution will be practiced when using online data sources as information online can highlight problems with validity and accuracy (Noaks and Wincup, 2004) and will only be taken from recognised organisations.

One advantage of using secondary research sources such as those exercised in this dissertation is that they increase the validity of the chosen research emphasis (Hagan, 2006). Existing literature allows the researcher to examine obtainable information in a unique way permitting the research project to develop new aims, objectives and interpretations for new analysis (Jupp et al, 2000). It allows for the possibility of having access to quality information that an inexperienced research would find hard to obtain (Punch, 2005). Using a variety of different sources leads to the structure of the primary research having a clearer emphasis, that is revolved around the relevant arguments and themes in the existing literature.

High quality secondary data is reliable and accurate with representative sampling procedures that have been thoroughly imposed covering a vast sample size (Bryman, 2008). It exists in a form that is already analysed by previous experienced researchers that can be obtained for little or no time and cost expense. As Bryman (2008, pg 297) states 'secondary analysis offers the prospect of having access to good quality data for a fraction of the resources involved', in an area such as drugs.

It is also important to acknowledge that there are evidently limitations, although very few, in carrying out secondary research. According to Bryman these comprise of 'the lack of familiarity with the data' and the 'complexity of the data' (Bryman, 2001, pg 200). Becoming familiar with the content of the existing literature can take a substantial amount of time with the volume of data also presenting problems when working with the information. 'The large amounts of data are difficult to analyse in order to understand the authors intentions, goals, motives, or values' (Cargan, 2007, pg 66). Therefore a considerable amount of time may be needed to render the information to make it appropriate for new aims being tested (Allan & Skinner, 1991). With unfamiliarity it is also key to be cautious with false interpretations from other researchers work (Noaks and Wincup, 2004). Existing secondary data has been composed in an 'original format to meet a particular research purpose...which may not meet the needs of the current research' (McQueen & Knussen, 2002, pg 15). Therefore reliability can also be disputed as the data collection methods from previous literature cannot be assessed.

Secondary data sources are also considered as becoming rapidly out dated due to the time in which the texts were written (Bryman, 2008). Although an extensive body of research exists on the normalisation thesis the majority of the main research was carried out throughout the 1990s. As indicated earlier there are now clear indications that drug use amongst youthful populations is changing in many ways and will have changed since the majority of previous surveys. Therefore in light of this it was justified to carry out additional primary research to highlight changes since existing literature and to extend the knowledge of the prevalence and profile of young drug users, comparing to previous explanations concluded from existing secondary research.

Primary Research

Conducting primary based research is likely to overcome the problems faced by secondary data analysis as well as increasing the authenticity and accuracy of the results, as the researcher has primary control (Bryman, 2004). It is an effective method in contributing to the area of social science research that considers new insights into key areas. Primary research conducted for an individual's own purpose is advantageous as 'the researchers are studying what they want to study' (Davies et al, 2000, pg 59) removing the problem of key variables that may be missing from other writers works. Moreover the results and conclusions generated from this study will help to inform others who may go on to look at researching the area of normalisation. This chapter will go on to explain the advantages and disadvantages specific to the primary based research carried out for this dissertation.

Method

For this dissertation the questionnaire method was selected as 'they offer an economical and effective way of collecting large amounts of data' (King and Wincup, 2008, pg 31). Data was collected through an online self-completion questionnaire at www.kwiksurvey.com, taking approximately 5-10 minutes to complete. Online surveys 'operate by inviting prospective respondents to visit a website at which the questionnaire can be found and completed online'

(Bryman, 2008, pg 645). The questionnaire was therefore designed and a web based link was created in which respondents were directed to, to complete the questionnaire. Once participants had completed the online questionnaire data was presented in a downloadable format on Kwik Survey, which was also further edited and analysed in Excel.

Use of online surveys are advantageous as they can reach a large amount of respondents with no cost involved in the process. Carrying out self-completion questionnaires in person was considered however it was felt that this would take up more time and would cost to generate the questionnaires in a paper form. It was also felt that an online questionnaires would also be quicker to conduct as students could participate in their own time. 'The electronic online survey is advisable when resources are limited and the target population suits an electronic survey', like it does with students (Yun and Trumbo, 2000 cited in Bryman, 2008, pg 651). Online surveys were also preferred as they guarantee no interviewer effects, as with interviews and face to face questionnaires, therefore ensuring participant responses are not affected (Jupp, 2006). Questionnaires generated online also ensure that all participants remain anonymous and can only be identified through their own code name (Sue & Ritter, 2007). Previous research into drug use amongst youthful populations has also effectively used questionnaires such as Parker et al (2002) and Measham et al (1994). It was therefore decided that online self-completion questionnaires would be the most practical method to implement.

Sampling

In order to address the research aim the participants were selected using a non-probability sampling method, convenience sampling. 'A convenience sample is a sample that is selected because of its availability to the researcher' (Bryman, 2008 pg 692). Therefore this sampling method was chosen for this dissertation as participants were known to the researcher and consequently access could be gained easily, with no cost and time issues involved. The link to the online questionnaire was posted in a private group which was set up on the social networking site, Facebook. Student contacts were invited to the group in which they invited other students to participate. Students were picked from a range of universities across the country to gauge any difference in knowledge between different students making it more generalisable with a fairly diverse sample. This sampling method generated 120 participants which was felt to be large and varied enough to provide trends and views of recreational drug use amongst students.

A random sample which would give every student at every university an equal chance of being included would have been much more representative. This would have reduced any sampling error (Bryman, 2004) however, cost and time constraints made this extremely impractical. As a convenience sample was used instead of a random sample the external validity of the findings can be questioned. The degree to which they can be generalised to the student population on a whole is low as not every student at every university in the UK was used. However the aim of this dissertation was to look at small number of students to establish whether findings support the normalisation thesis so generalising much further than this is not so relevant.

Design and format

The questionnaire was carefully designed based around the research aims and objectives in order to collect key information about the normalisation of recreational drug use amongst university students. Gillham (2000) recommends that length of questionnaires should be limited so that response rate is not affected. Therefore the online questionnaire for this dissertation was designed in a format that was clear, concise, easy to look at and contained a

limited number of 18 questions. All of the 18 questions included in the online questionnaire were all closed, pre coded questions. The respondent had to select the appropriate answer in response to the question asked. The results were then automatically generated in an easy readable format ready for analysis, a further advantage of using online questionnaires (Brace, 2008). Closed questions do not allow for the respondents to elaborate on their answers however, expansion was not needed on the questions asked relating to the subject matter. So that all closed questions did not become repetitive different styles and types of questions were used to make the questionnaire more appealing. The online questionnaire was also filtered so that respondents who had specified 'no' to not trying any drug could skip to the next appropriate question, which is a further advantage of web based surveys (Bryman, 2008). The online questionnaire was also piloted amongst 10 students which proved to find no problems with the design or output of the questionnaire. A copy of the online questionnaire can be found in Appendix 1.

Disadvantages to using online self-completion questionnaires

In considering which method to adopt for this research project the limitations for online self-completion questionnaires were also considered. As with all other questionnaires the problem arises relating to low response rate. 'The significance of response rate is that, unless it can be proven that those who do not participate do not differ from those who do, there is likely to be risk of bias' (Bryman, 2008, pg 219). However in this research project the problem of low response rate was overcome by prompting the participants regularly via the sampling method discussed earlier. There also lies a difficulty in not being able to probe participants for answers and asking them additional questions. This problem was avoided by ensuring that in the design of the online questionnaires all relevant questions were included.

Online questionnaires are also completely anonymous therefore there is 'lack of knowledge of who is taking the survey and lack of control over the environment' (Russell and Purcell, 2009). However due to nature of questions being asked into drug use the aim of the method used was in fact to create complete anonymity and confidentiality, therefore it did not affect the research. Furthermore the questionnaire was only asking the student population about past drug use therefore eradicating the problem of them disclosing information that may have led to further action taken. Experimenter control over the online questionnaire was also established by making sure all participants who had access to the questionnaire were of the right age. Settings were also established that allowed respondents to only participate once. There are clear disadvantages to conducting online research however for this dissertation these have been considered in order to create anonymity, access, a diverse sample with no effects on participants.

Ethical considerations

In carrying out primary research researchers have 'a responsibility both to safeguard the proper interests of those involved in or affected by their work and to report their findings accurately and truthfully' (Noaks and Wincup, 2004, pg 38). Therefore before carrying out this research project ethical considerations put into place by the Sciences Research Ethics Committee (SREC) had to be taken into account. Firstly participants were not deceived into the research aims and were told from the start that they would be answering a series of questions on drug involvement. The questionnaire was also completely anonymous and did not ask for names or email addresses of any participant, they were only asked to give a code name so respondents could not be identified. Participants were also given the right to withdraw at any time during the research process in which the code name would be stated. The questionnaire was completely voluntary to ensure that all answers were honest. By

continuing to partake in the questionnaire the participants were giving their full consent to take part and have their provided data analysed in an undergraduate dissertation. The contact information for TALK TO FRANK was also given in case participants needed further information relating to drug use. As the participants were university students they were all over the age of 18. All ethical guidelines were followed with the research ethics in this project approved by Nottingham Trent University School of Social Science research Ethics Committee (See Appendix 2). The passages of informed consent and debrief contained within the online question are also shown in Appendix 1.

Alternative methods considered/conclusions

Alternative methods for this research dissertation were also considered. Interviews of students were contemplated as they provide in depth detail on complex issues and are a means of collecting information about beliefs, attitudes, facts, feelings and expectations on certain issues (Cargan, 2007). However it was felt that 'interviewing is less convenient than other methods, such as questionnaires' (Sarantakos, 2005, pg 186). It can be inconvenient to make interview times with people therefore questionnaires allowed respondents to complete in their own time when it suited them (Gray, 2004). Interviewing also allows for interviewer bias in which the researcher can have an influence on the answers that's the participant gives. In researching an area such as drugs participants may be reluctant to tell in interviews.

Overall triangulation 'the use of different types of data to uncover, explore and report' (Denzin, 1970 cited in Jupp, 1989, pg 34) was used through combining primary and secondary data sources. Secondary and primary data have their limitations and advantages however the use of both was beneficial, to consequently utilise the advantages of both in this research project. Therefore primary research was gathered through self-completion questionnaires as this method was the best and most realistic to adopt in order to address the research aims and objectives. Despite the weaknesses discussed in this chapter, online self-completion questionnaires proved to be cheap, quick, feasible and beneficial to the research area. The following chapter will go on to analyse the findings that were generated from the research methods adopted.

Results and Analysis

The following chapter explores and analyses the responses from 120 students who completed the online questionnaire. To test the main research aim a number of areas were addressed in order to measure the extent of normalisation, similar to that of the North West Longitudinal study in the 1990s (Measham et al, 1994). Questions were asked to measure the extent of access and availability of illicit drugs, drug trying rates, rates of recent and regular drug use, attitudes towards drug taking and the cultural accommodation of drugs. This chapter will look at the questionnaires answered surrounding these measures, to look at whether recreational drug use has become normalised amongst the student population. The chapter will discuss the relevant findings from the primary research conducted, comparing and contrasting each measure of normalisation to existing literature on the topic area. A total of eighteen questions were included in the questionnaire however, only those questions that provide evidence of the extent normalisation will be discussed.

Access and availability

The first measure that shows the extent to which recreational drug use has become normalised is access and availability of illicit drugs. Without access and availability to drugs the young population cannot become involved with their use. Over the years there have been significant increases in the availability of a substantial range of recreational drugs in the UK (Parker et al, 2002). The 1990s saw an enormous growth in access and availability of illicit drugs with almost all research studies documenting substantial drugs offers by all respondents (Goddard and Higgins, 1999: Measham et al, 1994: Ogilvie, 2005). School based surveys have recognised these trends in relation to access and availability with the majority of respondents from the age of 15 having access to drugs (Goddard and Higgins, 1999). Research shows that 60% of 14 years olds and 80% of 16 years olds have been in circumstances where drugs were offered or available (Aldridge et al, 1999: Measham et al, 1994). This research project found even further increases in access and availability of recreational drugs amongst respondents.

TABLE 1 - How easy would it be to buy the following drugs? (Percentages)

	Easy	Difficult	Impossible	Unsure
Amphetamines	26	31	1	43
Cannabis	91	3	0	7
Cocaine	61	19	2	18
Heroin	7	40	16	38
LSD	29	35	6	30
Magic Mushrooms	28	33	4	35
Ecstasy	62	20	1	18
Nitrates	69	12	1	18
Solvents	68	8	1	23
Tranquillisers	24	28	5	43

Table 1 shows that cannabis is the easiest drug to access amongst the student population in this research project (91%), followed by nitrates (69%) and solvents (68%). Results show an increase in comparison to Parker et al (2002) who found easy access to cannabis at 84.3%,

nitrates 48.8% and solvents 60.3%. Results also show a significant increase compared to findings by Ogilvie et al (2005) who reported 66% of young people knew where they could gain access to cannabis. Not one respondent reported it impossible to gain access to cannabis, a key finding from results in this research project. The most significant difference in comparison to Parker et al's (2002) research is the increase in ease of access to cocaine and ecstasy, 39.1% to 61% for cocaine and 49.5% to 62% for ecstasy. Results show that the most difficult drugs to gain access to are heroin (40%) and LSD (35%), also similarly found by Parker et al (1998) in the 1990s.

TABLE 2 - Which of the following drugs have you been offered? (Percentages)

Amphetamines	28
Cannabis	94
Cocaine	66
Heroin	6
LSD	20
Magic Mushrooms	32
Ecstasy	63
Nitrates	53
Solvents	16
Tranquillisers	20
None	6

TABLE 3 – Ever offered any drugs, cross tabulated with gender (Percentages)

Men	98%
Female	96%

Drug offer situations also 'provide the established measure of drugs availability' and were therefore investigated in this piece of research (Parker et al, 2002, pg 951). In 1991 the North West Longitudinal study found that 60% of participants had been in drug offer situations which had risen to 91% at the end of the study (Measham et al, 1994; Parker et al, 2002). This research, although slight, found a further increase in drug offer situations amongst 94% of respondents (Table 2). Parker et al (2002) also found that men are slightly more likely to be in drug offer situations than females, 93.9% compared to 92.5%. As Table 3 shows this research project also found the same pattern with 98% of men being in offer situations compared to 96% of females in the sample. The most significant finding was that a substantial 94% of respondents had been offered cannabis which was the highest amount by a significant margin, common amongst the majority of previous research (Cooke at al 1997; Williams and Parker 2000). Cocaine (66%), ecstasy (63%) and nitrates (53%) were offered most frequently following cannabis. Cocaine was found to have the steepest rise in offer situations since original findings in 1991. At the beginning of 1991 drug offers for cocaine were 8% amongst respondents, rising to 46.5% at the end of the longitudinal research (Parker et al, 2002). This has increased even further to 66% amongst respondents in this dissertation, showing the increase in availability of this particular drug. Heroin (6%), solvents (16%), tranquillisers (20%) and LSD (20%) were the drugs that were found to be offered the least to

participants. There has been a clear decrease in the number of people being offered LSD and amphetamines from 76% to 28% for amphetamines and 56.3% to 28% for LSD.

Although the sample in this research project is smaller and therefore less representative findings however, in relation to access and availability, show that accessing dance drugs such as ecstasy and nitrates is proportionally higher than found in previous research. This could be conclusive of the student sample who commonly partake in the activity of clubbing and therefore would be higher in comparison to the overall population. 'Most young people, even clubbers, obtain their drugs through social networks and friends of friends chains connected to small dealers' making it a key measure of normalisation. (Parker et al, 2002, pg 944) 'The routinization of breaching the law in respect of recreational drug use is a robust measure of normalisation' (Parker et al, 2002, pg 945). Overall access and availability to recreational drugs amongst this cross section of the population shows respondents are increasingly in more drug offer situations with a rise in access to stimulant dance drugs.

Drug trying rates

The second measure looked at in order to indicate normalisation is drug trying rates. As discussed earlier it became apparent that drug trying rates in the 1990s took a sudden increase amongst many young Britain's throughout the UK. It came to be believed that young people were now seen as the most drug involved in Europe with many researchers at this time recognising this trend. Miller and Plant (1996) found that 42.3% of 15-16 years olds in Britain had tried at least one illicit drug in their lifetime. Further researchers found this rate to be higher at the end of the 1990s ranging between 50% and 60% (Aldridge, 1999; HEA, 1996). As Parker et al (2002, pg 946) states 'All these studies variously suggest that the majority of university students, up to 60 percent, have some drug experience, a figure which has doubled over the past 15 years', increasing further in this research project.

TABLE 4 - Have you ever tried any illicit drug? (Percentages)

Yes	78
No	23

At the end of the North West Longitudinal study researchers found that 64.3% of the sample reported trying at least one drug compared to 36% at the beginning (Parker et al, 2002). As table 4 shows results from this dissertation indicate a further increase with 78% of respondents trying at least one drug in their lifetime. Only 27 (23%) participants out of 120 had never tried an illicit drug. Parker et al (2002) also found that there was a slight difference between drug trying rates amongst gender, 79% for men and 73% for women. This research project found a larger gap between gender and drug use, 87% for males and 72% for females, as shown in table 5 below.

TABLE 5 - Have you ever tried any illicit drug cross tabulated with gender? (Percentages)

	Male	Female
Yes	87	72
No	13	28

TABLE 6 - Which of the following drugs have you ever tried? (Percentages)

Amphetamines	19
Cannabis	76
Cocaine	43
Heroin	3
LSD	7
Magic Mushrooms	13
Ecstasy	38
Nitrates	46
Solvents	4
Tranquillisers	13

In relation to trying rates of specific drugs table 6 shows that the most common drug respondents have tried, by a vast margin, is cannabis (76%) followed by nitrates (46%), cocaine (43%) and ecstasy (38%). The drugs used least by participants in this research project were heroin (3%), solvents (4%) and LSD (7%). As Williams and Parker (2000) and Cooke et al (1997) established cannabis is persistently found to be the most common drug tried by young people, with Parker et al (2002) also finding that 69.9% of respondents had tried it. This research thus shows a further increase in cannabis becoming normalised and therefore exposing its position as 'undoubtedly the most widely used drug in the UK' (ISDD, 1994, pg 28). As with cannabis showing to be the most common drug tried by the younger generation it is also found by many researchers, including this research project, to be the first drug to be normalised. Tables 7 and 8 show that cannabis was the first drug to be tried by respondents in this research at the age of 14, followed by solvents, nitrates and LSD at 16. Amphetamines, cocaine, heroin, ecstasy and tranquillisers were all tried at the highest age of 20+.

Cocaine and ecstasy drug trying rates have also vastly increased from 24.6% and 28.5% previously found in the North West Longitudinal Study to 43% and 38% found in this dissertation (Parker et al, 2002). Makhoul et al (1998) also found that only between 13 -18% of undergraduates at university had ever used dance drugs such as ecstasy and cocaine, considerably lower compared to these results. At the end of the North West Longitudinal study only a slight increase had been found in relation to drug involvement with cocaine. However, this has seen to take a sudden increase in this research, overtaking ecstasy trying rates, which has not been discovered in any other research surrounding normalisation. Both drugs have increasingly become available popular recreational drugs associated with access to bars and night clubs, which may be the significance with students in this sample. With research showing a decrease in access and availability to amphetamines and LSD, this research project has therefore also shown a decrease in trying rates of such drugs from 41.8% to 19% and 28.8% to 7% respectively.

TABLE 7 - At what age did you try each of the following drugs? (Percentages)

	13 and under	14	15	16	17	18	19	20+	N/A
Amphetamines	0	1	0	3	4	5	4	6	75
Cannabis	5	27	20	17	6	8	10	3	3
Cocaine	0	1	1	4	11	15	5	18	44
Heroin	0	0	1	0	0	0	0	2	97
LSD	0	1	1	2	2	2	1	1	89
Magic Mushrooms	0	2	3	1	2	4	2	4	81
Ecstasy	0	1	1	6	11	10	9	12	51
Nitrates	0	10	9	23	8	8	1	3	40
Solvents	0	1	1	3	0	2	0	1	91
Tranquillisers	0	0	0	1	3	4	2	6	83

TABLE 8 – Average age of first use

Amphetamines	20+
Cannabis	14
Cocaine	20+
Heroin	20+
LSD	16
Magic Mushrooms	18
Ecstasy	20+
Nitrates	16
Solvents	16
Tranquillisers	20+

More recently researchers have disagreed with the normalisation thesis, documenting a decrease in drug trying rates amongst the younger generation (Balding, 1999; Plant & Miller, 2000). Shiner and Newburn (1999) also criticised the normalisation thesis stating that the majority of young people (54%) in fact abstain from using illicit drugs. However this research has clearly found similar and even further increases in drug trying rates, 78%, in comparison to previous research. It has found evidence of further drug taking in general and amongst particular drugs including a significant increase in dance drugs such as ecstasy and cocaine.

Recent and regular use

Studies into the normalisation of drugs also present findings on recent and regular use, one of the dimensions included in the normalisation concept. One aspect looked at amongst the student population in this sample is the type of drug user in relation to particular drugs. Previous studies on university students have shown that 10% of respondents report using

dance drugs such as ecstasy and cocaine as ‘often’ (Makhoul et al, 1998; Webb et al, 1996). This study found similar results to Makhoul et al (1998) with 8% of respondents using cocaine and 9% ecstasy, regularly every month (Table 9). Also, 27-29% of those that had involvement with dance drugs cocaine, ecstasy and nitrates classified themselves as occasional users (Table 9). Dance drugs such as these have been found to be popular in the night club scene with Measham et al (2001) finding that LSD, amphetamines and ecstasy were the most popular drugs taken by this subculture. This research shows a fall in the number of students regularly using LSD and amphetamines with cocaine and nitrates now taking their place as a popular regular drug to use. This shows an increase in popularity of cocaine as was foreseen by Parker et al (2002) at the end of their research. However Measham et al’s (2001) study cannot specifically be generalised to the whole student population as the study was particularly focused on participants of a club culture. In relation to cannabis student studies by Makhoul et al (1998) and Webb et al (1996) also found that between 20-25% of the sample stated they were regular users. As Table 9 shows this research project found that 41% of respondents were regular users of cannabis with 16% using every month and 10% every week, showing the common use of this particular drug.

TABLE 9 - How often do you take each specific drug? (Percentages)

	Never	Tried Once	Every day	Every week	Every month	Occasionally	Used to Use them
Amphetamines	72	13	0	0	2	8	5
Cannabis	5	14	4	10	16	41	10
Cocaine	46	12	0	1	8	27	6
Heroin	97	0	0	0	1	0	2
LSD	88	6	0	0	1	3	1
Magic Mushrooms	78	12	0	0	0	3	6
Ecstasy	52	4	0	1	9	29	5
Nitrates	42	11	0	0	5	29	13
Solvents	91	3	0	0	0	3	2
Tranquillisers	85	5	0	0	0	9	1

TABLE 10 – When did you last take each specific drug? (Percentages)

	Past 3 years	Past year	Past Month	Past week	Only tried once	Never
Amphetamines	10	6	1	2	9	71
Cannabis	22	33	15	23	4	3
Cocaine	9	29	12	3	6	41
Heroin	1	1	1	0	0	96
LSD	3	2	2	0	5	88
Magic Mushrooms	9	7	1	0	3	79
Ecstasy	7	26	12	4	3	48
Nitrates	26	18	13	0	3	39
Solvents	7	2	0	0	0	91
Tranquillisers	5	8	1	1	3	81

When looking at regularity and type of user it is also key to look at the last time they took each specific drug. Past research advocates that recent drug use increases with age from 15 escalating further into the early twenties, with around 20% of mid adolescents partaking in recent drug use (Goddard and Higgins, 1999). Similarly as found with previous research this research found that cannabis was the most frequent drug used with 33% using in the past year, 15% in the past month and 23% in the past week (Table 10). With the increase in popularity and availability of cocaine found from this research it was not surprising that it was the second most frequent drug used recently, with 29% reporting taking in the last year (Table 10). In Parker et al's (2002) research only 16.2% of respondents had taken cocaine in the last year, which had increased from an astonishing 0.4% at the start of the study in 1991 (Measham et al, 1994). Both nitrates and ecstasy as other dance drugs fall closely behind cannabis and cocaine with 26% taking ecstasy and 18% taking nitrates in the past year compared to 14.5% and 10.3% found by Parker et al (2002). Again, while there has been an increase in past year drug use of dance drugs such as nitrates, ecstasy and cocaine, notably amphetamines and LSD use has declined.

Findings on recent and regular use has again found cannabis as the most commonly and widely used drug amongst this sector of the population. There has again been an increase in association with 'dance drugs' such as cocaine, nitrates and ecstasy with rates of recent and regular use now falling close behind cannabis. However, as with previous research, caution has to be taken when questioning recent and regular use as many researchers have reported under reporting as a problem in this area. As Patton (2005) found the type of drug can significantly affect the level of under reporting by participants, with drugs such as cocaine and heroin less likely to be reported due to stigma compared to other drugs such as cannabis. Therefore without these problems further exploration of student drug use amongst this sample may find more significant recent and regular use of the drugs considered in this project.

Social and Cultural accommodation of drug use

As well as access and availability, trying rates and recent and regular use, a key measure indicating normalisation is the attitudes towards recreational drug taking and the cultural accommodation of such use. According to Parker et al (2002, pg 947) 'an essential measure

of the scale of normalisation is the extent to which recreational drug use is personally and socially accommodated by abstainers and ex triers'. Therefore like Howard Parker and colleagues this research project also provides evidence that not only is drug use widespread, but that's it usage is also perceived to be normal conclusive with the normalisation thesis. One of the questions looked at in this research assessed the percentage of users and non-users who have friends who have tried drugs. Table 11 shows that the 28% of respondents had 60-80% and 80-100% of friends who have tried drugs in their lifetime, the highest categories. Only 8% of the sample had less than 10% of friends trying drugs during their life, showing how normalised drug trying amongst this cross section of the population is. This was conclusive with the results found by Parker et al (2002) who found that only 6.1% of the sample did not have a friend who had tried drugs.

TABLE 11 - What percentage of your friends have tried drugs? (Percentages)

Less than 10%	8
10-20%	10
20-40%	10
40-60%	16
60-80%	28
80-100%	28

TABLE 12 – What percentage of your friends have tried drugs cross tabulated with ever tried drugs (Percentages)

	Users	Non users
Less than 10%	0	37
10-20%	6	22
20-40%	9	15
40-60%	18	7
60-80%	33	7
80-100%	33	11

In their research Parker et al (2002) also found that respondents who had used drugs were more likely to have friends that also had. By cross tabulating percentage of friends who have tried drugs with drug trying rates this research project also found the same pattern, as shown in Table 12. Significantly none of those respondents that have tried drugs have friends that haven't. On the other hand 37% of respondents that are non-users have less than 10% of friends that have tried drugs. The same conclusion can also be seen at the opposite end of the results. Table 12 shows that 33% of those that have tried drugs have between 80-100% of friends that also have, compared to only 11% of abstainers. While there is a clear difference between non trying and trying respondents who have friends that have tried drugs results still suggest the majority of respondents have at least one friend with some drug experience. As Parker et al (2002, pg 947) stated we 'expect to find this potential accommodation in younger Britons' as was found in this research.

This research project also aimed to look at those respondents who have never tried drugs, and their reasons behind this choice. As pointed out earlier Shiner and Newburn (1997) suggested

that the majority of young people abstain from using drugs as they have negative attitudes towards drug taking and associate their use with crime. However, in this research project it was found that the main reason for abstaining from drug use was due to health, amongst 44% of respondents (Table 13). The same view was also found amongst non-users and cautious drug triers in previous literature (Parker et al, 2002).

TABLE 13 - If you don't take drugs what is the main reason for this? (Percentages)

Cost	7
It's Illegal	15
Health	44
Know others who have had a bad experience	11
Risk of death	4
Worried about arrest	4
Reputation	7
Worried about becoming addicted	7

As the majority of respondents in this research project have tried at least one drug it is also key to look at the main reasons behind this (Table 14).

TABLE 14 - For those that take drugs what is the main reason for this? (Percentages)

Peer Pressure	4
Excitement	6
Boredom	4
Enjoyment	30
Everyone else does	3
Curiosity	50
To feel better	1
Value for money	0

Webb et al (1996, pg 925) in their research concluded that 'drugs were mainly taken for pleasure and were perceived as a normal part of everyday life for many students'. As Table 14 shows this research found that the main reason for students taking drugs was curiosity (50%) followed by enjoyment (30%). These results were also conclusive with the normalisation Makhoul et al (1998) established, finding that those who choose to take drugs did so because of enjoyment and were no different to the normal student population who didn't. To explore drug attitudes further to measure the extent of normalisation respondents were also asked which drugs they found to be most acceptable, table 15 shows the results.

TABLE 15 - Which of the following drugs do you believe to be most acceptable?
(Percentages)

Amphetamines	0
Cannabis	78
Cocaine	1
Heroin	0
LSD	0
Magic Mushrooms	3
Ecstasy	2
Nitrates	14
Solvents	3
Tranquillisers	0

By a significant margin this research found that cannabis was the most accepted drug by respondents (78%) followed by nitrates at 14%. The drugs found to be least acceptable in this project were amphetamines, heroin, LSD and tranquillisers with not one respondent stating they believed they were the most acceptable drug. Dillon (2007) also found the use of cannabis to be the most accepted drug with people believing it is not harmful to their health. In contrast other drugs such as ecstasy, heroin and cocaine were found to be seen as negative and unacceptable, drugs that were also found to be between 0-2% accepted by respondents in this project. Parker et al (2002, pg 958) also found that 'cannabis was the drug which received most tolerance or accommodation' in their research. As well as this dissertation showing that cannabis use has become increasingly widespread, it has also therefore shown that the attitudes towards its use have become increasingly accommodated into the lives of many students in this study. Overall questions into the attitudes and accommodation of drug use in this research project emphasise that drug use is contained amongst the lives of many students and their social networks, with the various questions showing again the extent to which normalisation is present in this study.

The overall findings and conclusions into the extent of recreational drug use amongst the student population will be drawn together in the following chapter.

Conclusion and Recommendations

The aim of this dissertation was to examine the extent to which recreational drug use has become normalised amongst the student population at university. The use of primary data collection, in the form of online questionnaires and secondary data analysis permitted these themes to be explored in relation to drug offers and availability, drug trying rates, rates of recent and regular use and finally social and cultural accommodation of such use. These methods were adopted in order to draw conclusions and determine the extent to which recreational drug use has become normalised. As discussed in the literature review the majority of previous research surrounding this topic area agrees with the notion that recreational drug use has become normalised amongst the younger generation, indicated through the same key dimensions (Parker et al, 1998). As documented in the previous chapter this dissertation discovers further increases indicating that recreational drug use 'is continuing to be gradually further accommodated into the lifestyles of ordinary young Britons' within society (Parker et al, 2002, pg 959).

As shown in the results section, the respondents in this dissertation showed increased rates of access and availability of drugs, however for a much wider range of substances. Cannabis still remains the most widely accessible and available drug to this section of the population however, there has been a significant rise in access to stimulant dance drugs with nitrates, ecstasy and cocaine becoming easily available. Trying rates amongst the student population in this dissertation also continue to rise, finding the highest in comparison to previous research, again showing the same trend of dominance of cannabis and a rise in cocaine, ecstasy and nitrates. An increase has also be found in relation to these drugs concerning recent and regular use. As Parker et al (2002) noted drugs such as these are becoming increasingly popular as they are socially energising with short term after effects that are less likely to affect university. While dance drugs such as these are having an increasing focus drugs such as LSD and amphetamines are being left behind. The drug taking found in this research project commonly suggests that this cohort are engaging in recreational use for time out, taking an uncertain and risky journey to adulthood (Williams and Parker, 2001). As shown in the previous chapter results showed that the most accepted drug by respondents was cannabis. It was also found that the majority of respondents had someone within their social network that had tried drugs.

It is clear that findings from this research project advocate that recreational drug use is normalised amongst the student population in this dissertation. As found by existing literature, this research project has therefore found that the vast majority of respondents have taken drugs and is a frequent activity amongst many students. As illustrated by the original research it has been found that drug use has gained a solid position within popular youth culture, integrated into the lives of many young students (Parker, 1998). While it is clear that overall recreational drug use as a deviant activity has become normalised is it difficult to establish which specific drugs fit into the normalisation concept. As found with previous research cannabis has met the normalisation in all key dimensions especially in being the most accepted drug amongst this section of the population. However, while evidence shows an increase of drug involvement with stimulant drugs, which are moving towards normalisation as predicted, there use still remains relatively low as Shiner and Newburn (1997) argued. As only a minority are using such drugs with not many stating they are acceptable compared to cannabis, it is therefore difficult to draw conclusions that such drugs have become normalised. Therefore 'compared with cannabis the case is not proven' (Parker et al, 2002, pg 960), however, these figures could continue to upsurge as already shown since

previous findings. As stated earlier there can also be problems with reporting drug use due to the stigma attached to particular drugs (Patton, 2005) . Less stigma is attached to drugs such as cannabis, which could therefore affect the level of reporting (Ibid, 2005).

To what extent has recreational drug use become normalised amongst the student population at university? In addressing the overall question of this research project it can be concluded that normalisation of overall drug taking has occurred however, it is still difficult to tell exactly which specific drugs have become normalised within society for this sample of the population. Concluding the normalisation concept in relation to particular drugs relies on a variety of context factors such as popularity of drug at the time, specific time of the study, the area being investigated and stigma attached to the drugs. Therefore, while it has become apparent that drug taking is widespread amongst respondents in this study this however does not directly infer outright normalisation. The results shown from this research project show that drug taking is a common, extensive activity accepted as normal by a vast majority, inferring that normalisation, of some drugs, has occurred.

To explore the notion of normalisation of recreational drugs in more detail it would have been influential to carry out such research on a longitudinal basis, which was not practical due to time and money constraints. Carrying out longitudinal research would have provided 'a moving picture of young people's relationships with drugs right across adolescence' (Aldridge et al, 1999, pg 2), allowing for patterns of drug use over time to see how influences cause changes to occur. Using both students in comparison to non-students using this longitudinal method would also be beneficial, testing whether 'being a student' is the cause of such normalisation and thus increases the strength of the research. Furthermore in an attempt to explore the extent of normalisation amongst specific drugs it would be significant to specially explore the attitudes towards each drug separately. As attitudes of drugs is a key indicator of normalisation exploring this further would provide stronger evidence for the case on stimulant drugs.

Overall this dissertation certainly highlights the increases in recreational drug use amongst the student population, with significant rises found for particular drugs. Such research is influential in highlighting relevant issues that affect current drug policy in the UK and how changes can be made in in light of such findings. With the changes in the rise of such drugs as cocaine and ecstasy it places the government in a difficult position as it 'challenges the war on drugs discourse which prefers to link drug use with crime and personal tragedy and utilises this discourse as a reason for not calling truce' (Manning, 2007, pg 92). Therefore findings such as this show that the young people of today are continuing to use drugs recreationally, highlighting the need for the government to stem the problem of such 'non deviant' drug users, which is no doubt set to continue....

'It cannot be denied that drug use is of enormous contemporary importance, whether a symbol, social problem or fashion accessory. The whole issue and persistence of drugs as a feature of everyday life has become and will remain normalised' (South, 1999, pg 6-7)

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Appendix 1

Questionnaire

Informed Consent

The aim of this research is to examine the extent of recreational drug use amongst a student population between the ages of 18-24.

You are being asked to fill out a voluntary questionnaire lasting 5-10 minutes. There will be a series of questions asking about availability and access to illegal drugs, drug trying rates, recent and regular use and attitudes towards drug taking.

The questionnaire is completely anonymous and will not ask for the names or email addresses of any participant, you will only be asked to give a code name. You have the right to withdraw at anytime without giving a reason to do so in which you must state this code name.

* 1.
Please provide a code name below:

<< Back Next >>

* 3. Age?

- 18
- 19
- 20
- 21
- 22
- 23
- 24

[Reset](#)

* 6.
How easy would it be to buy the following drugs?

	Easy	Difficult	Impossible	Unsure
Amphetamines (Speed)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Cannabis	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Cocaine	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Heroin	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
LSD	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

* 7. Which of the following drugs have you been offered?

- Amphetamines (Speed)
- Cannabis
- Cocaine
- Heroin
- LSD
- Magic Mushrooms

* 9. Which of the following drugs have you ever tried?

- Amphetamines (Speed)
- Cannabis
- Cocaine
- Heroin
- LSD
- Magic Mushrooms
- Ecstasy(MDMA)
- Nitrates (Poppers)
- Solvents (GLUE)
- Tranquillisers

[Reset](#)

<< Back Next >>

* 10. At what age did you try each of the following drugs?

	13 and under	14	15	16	17	18	19	20+	N/A
Amphetamines (Speed)	<input type="radio"/>								
Cannabis	<input type="radio"/>								
Cocaine	<input type="radio"/>								
Heroin	<input type="radio"/>								
LSD	<input type="radio"/>								
Magic Mushrooms	<input type="radio"/>								
Ecstasy(MDMA)	<input type="radio"/>								
Nitrates (Poppers)	<input type="radio"/>								
Solvents (GLUE)	<input type="radio"/>								
Tranquillisers	<input type="radio"/>								

[Reset](#)

<< Back Next >>

11. When did you last take each specific drug?

	Past 3 years	Past year	Past month	Past week	Only tried once	Never
Amphetamines (Speed)	<input type="radio"/>					
Cannabis	<input type="radio"/>					
Cocaine	<input type="radio"/>					
Heroin	<input type="radio"/>					
LSD	<input type="radio"/>					
Magic Mushrooms	<input type="radio"/>					
Ecstasy(MDMA)	<input type="radio"/>					
Nitrates (Poppers)	<input type="radio"/>					
Solvents (GLUE)	<input type="radio"/>					
Tranquillisers	<input type="radio"/>					

[Reset](#)

<< Back Next >>

* 12. How often do you take each specific drug?

	Never	Tried once	Every day	Every week	Every month	Occasionally	Use to use them
Amphetamines (Speed)	<input type="radio"/>						
Cannabis	<input type="radio"/>						
Cocaine	<input type="radio"/>						
Heroin	<input type="radio"/>						
LSD	<input type="radio"/>						
Magic Mushrooms	<input type="radio"/>						
Ecstasy(MDMA)	<input type="radio"/>						
Nitrates (Poppers)	<input type="radio"/>						
Solvents (GLUE)	<input type="radio"/>						
Tranquillisers	<input type="radio"/>						

[Reset](#)

<< Back Next >>

* 13. What sort of influence has university had over your drug use?

- Increased drug use
- Decreased drug use
- Stayed the same

[Reset](#)

<< Back Next >>

14. Has your drug taking ever led to involvement with the police?

- Yes
- No

[Reset](#)

<< Back Next >>

* 15. What is/was the main reason for you taking drugs?

- Peer Pressure
- Excitement
- Boredom
- Enjoyment
- Everyone else does
- Curiosity
- To feel better
- Value for money
- N/A

[Reset](#)

<< Back Next >>

* 16. What percentage of your friends have tried drugs?

- Less than 10%
- 10-20%
- 20-40%
- 40-60%
- 60-80%
- 80-100%

[Reset](#)

<< Back Next >>

* 17. If you don't take drugs what is the main reason for this?

- Cost
- Its illegal
- Health
- Know others who have had bad experiences
- Risk of death
- Worried about arrest
- Reputation
- Worried about becoming addicted
- N/A

[Reset](#)

<< Back

Next >>

* 18. Which one of the following drugs do you believe to be most acceptable?

- Amphetamines (Speed)
- Cannabis
- Cocaine
- Heroin
- LSD
- Magic Mushrooms
- Ecstasy(MDMA)
- Nitrates (Poppers)
- Solvents (GLUE)
- Tranquillisers

[Reset](#)

<< Back

< Finish Survey >

Thank you for taking part in this questionnaire into the extent of recreational drug use amongst students. If you have any questions or concerns about this research then I can be contacted via email: n0216428@ntu.ac.uk. If you would like to withdraw your data at any time please email me with you code name.

If you need any further information relating to drug use or help with drugs then contact **TALK TO FRANK** on 0800 776 600 or visit their website at www.talktofrank.com.

Appendix 2

Student's CERTIFICATE OF ETHICAL COMPLIANCE

Please tick all the relevant boxes and sign this Certificate and attach it your assignment or dissertation **when you submit it for assessment**. Please ask your supervisor to countersign this Certificate.

1. I confirm that the research for this assignment/dissertation was approved by the SREC before primary data collection began.	
2. I confirm that the research was conducted wholly in accordance to the information I gave the School Research Ethics Committee when I applied for ethical approval, and the project did not subsequently change in any way that affected this information.	
3. I confirm that the research was conducted wholly in accordance with one or more standard protocols which I also attach (where relevant).	
4. I confirm that the research was conducted wholly in accordance with the relevant guidance and guidelines as indicated in the application form for ethical approval.	

Signed _____ (Student)

Date _____

I confirm that, to the best of my knowledge, the research was conducted in line either with the specified guidance and protocol(s) or the information provided in the application for ethical approval.

Countersigned _____ (Supervisor)

Date _____