SPECIAL FOCUS

Chillin, buzzin, getting mangled, and coming down

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Abstract

Aims: This paper examines differentiated normalisation through the lens of young drug users from a marginalised neighbourhood where drugs are readily available, prevalence rates are high, and a flourishing drugs market operates. Methods: This paper draws from the ethnographic fieldwork component of a research study aimed at exploring patterns of drug use, associated drug-related harms and the operation of the local drugs economy in the risk environment of a Dublin neighbourhood (O’Gorman et al., 2013). The study uses a critical interpretivist methodology to explore the role and meaning of drug use from the users’ perspective. Findings: The narratives of these marginalised young people illustrate how drug use and drug choices are shaped by different intentions, avowed identities and diverse structural, temporal and socio-spatial settings. Their routines and drug repertoires echo the (mainly) reasoned consumption choices, the cost–benefit analyses and the emphasis on pleasure and fun ascribed to recreational drug users, including those who underpin the normalisation concept. However, their drug using practices continue to be rendered deviant due to their experience of social exclusion; exclusion from consumption-orientated lifestyles and from the nighttime economy; and their inclusion in the informal drugs economy. Conclusion: Normalisation is relative (not just differentiated) to the social status of the drug user. A reconstructed normalisation thesis inclusive of class (and race, and gender) could explore why the use of similar drugs and similar drug using behaviours by different social groups is differentially accommodated and accepted by mainstream society.

Introduction

The spatial clustering of the drug-related harms associated with injecting heroin use in marginalised urban neighbourhoods emerged as a key theme of drugs research in the 1980s and 1990s (see Hartnoll, 1995; Parker, Bakx & Newcombe, 1988; Pearson, 1987). In the communities affected, residents shared a historical experience of social exclusion including multiple and interconnected deprivations such as poverty, unemployment, educational disadvantage and poor housing (ACMD, 1998; Buchanan, 2006; Foster, 2000; O’ Gorman, 2000). Rhodes’ (2002) concept of the risk environment provided a useful framework for exploring the socio-spatial clustering of drug related harms shaped by adverse political, economic and social policies (O’Gorman, 2004). Nonetheless, dominant public and political discourses continue to construct ‘problem drug use’ as a function of individual and cultural pathology (Fraser & Moore, 2008; Moore, 2012), ignoring the structural underpinnings of problem drug use (Buchanan, 2006; Seddon, 2005) and the problematisation process itself (Bancroft, 2009; Moore, 2012).

Since the 1990s, new patterns and trends in drug consumption have emerged and evolved in response to local and global changes in drug production and distribution, as well as shifts in consumer demand influenced by accessibility, affordability, quality, cultural trends, etc. (Agar, 2003; EMCDDA, 2013; UNODC, 2013). Drug use has become a more prevalent phenomenon across age, gender, class, and ethnic groups (EMCDDA, 2013). The consumption of an assortment of licit and illicit substances – typically the combined use of alcohol, cannabis, stimulants and hallucinogens – has become a regular feature of weekend and festive socialising in diverse youth cultural worlds (EMCDDA, 2012).

The normalisation thesis developed by Parker and colleagues at the University of Manchester (Measham, Aldridge, & Parker, 2001; Measham, Newcombe, & Parker, 1994; Parker, Aldridge, & Measham, 1998) sought to conceptualise this new phenomenon of recreational drug use as a non-deviant practice. The core elements of this concept posited that recreational drug use has become normalised and accommodated into the social and cultural practices of different social groups and a common feature of youth cultural worlds among users and non-users alike. These recreational drug users were presented as rational actors, accommodating sensible drug use within their cultural and
leisure pursuits and calculating cost – benefit risk assessments
of their drug choices from a range of less physically addictive
drugs. Crucially, they were deemed ordinary, conventional
young people – conformists who did not reject mainstream
values outside of their drug use.

The situated context of recreational drug use within a
‘leisure-pleasure landscape’ (Parker et al., 1998, p. 25)
explained in the work of Hunt, Evans and Kares (2007),
Pennay and Moore (2010) among others, emphasised the fun,
joys and pleasure of drug use and an embedding of narratives
of ‘illegal leisure’ within consumption-oriented lifestyles and
burgeoning night-time economies bolstered by the commodifi-
cation of leisure goods and the marketing of drug referenced
products (see Blackman, 2004; Taylor, 2000).

Although South (1999, p. 6) noted that ‘something
profound’ had happened in relation to the place of drugs in
everyday life since the 1980s; analysing the nature of that
‘something’ remains a contested process. The normalisation
thesis as an explanatory tool has received its share of critique,
including retrospective reflections by some of those involved
in the original studies (see Aldridge, Measham, & Williams,
2011; Measham & Shiner, 2009; Measham, Williams, &
Aldridge, 2011). Key aspects of the critiques suggested that
the thesis over simplified young people’s perceptions of drug
use and exaggerated its extent (Shiner & Newburn, 1997);
misrepresented drug use as uniform and homogenous (Pennay
& Moore, 2010; Shildrick 2002); and queried its undifferen-
tiated use of the term ‘drugs’ (Shiner & Newburn, 1997,
p. 524). Researchers working with marginalised drug users
noted how the thesis excluded other forms of drug use and
obscured the ways in which traditional patterns of inequality
impact on youth drug use (Shildrick, 2002) and suggested a
more differentiated understanding of normalisation whereby
different types of drugs and different types of drug use may be
normalised for different groups of young people (MacDonald
& Marsh, 2002; Shildrick, 2002).

The questionable value of the normalisation thesis for
exploring drug use in marginalised communities reflected
my own misgivings with the concept. As the thesis began to
gain currency in the drugs field, I was in the throes of
conducting the fieldwork for my PhD; a multi-site
ethnographic and qualitative study of heroin users situated
within the context of a marginalised risk environment in
Dublin (O’ Gorman, 2004). I attended a seminar Trinity
College Dublin where Howard Parker presented findings
from the North West England Longitudinal Study. I recall,
prompted by the entry in my fieldwork diary from that
evening, a frustration with the study’s overt concern with
recreational drug users as ‘otherwise law abiding young
citizens’ and the caution that ‘the problem drug-user heroin
scene’ might influence the recreational drug scene (1998,
p. 8). For me, then as now, this view appeared to disregard
the social, spatial and structural embeddedness of problem-
atic drug use and the subsequent unlikelihood that recrea-
tional users would ‘cross the Rubicon’ dividing recreational
drug use from problematic heroin use (see Parker et al.,

Inadvertently, or not, the thesis had served to deepen the
polarity between drug users regarded as deserving or
underserving (MacGregor, 1999); integrated or marginalised
(Eisenbach-Stangl, Moskalewicz & Thom, 2009); normal or
deviant (Redner Snitman, 2002) and the ongoing construc-
tion of a deviant outsider (Becker, 1957) in the regard of the
social audience (Erikson, 1964).

These concerns mirrored the structure versus agency
debates regarding patterns of drug use (see Measham &
Shiner, 2009). The privileging of agency over structure in the
initial normalisation thesis and the capacity for recreational
309) seemed to reinforce the image of the deviant ‘other’ and
the ‘disordered citizen’ (Pennay & Moore, 2010, p. 569)
whose drug use was associated with irrational and undiscipl-
lined behaviour and linked to the loss of agency and identity
(Fraser & Moore, 2008; Fraser & Valentine, 2008; Pennay
& Moore, 2010).

The movement of illicit drug use from the margins
of youth subculture into the mainstream and its broader cultural
accommodation in the wider society (Parker et al., 1998;
Parker, Williams, & Aldridge, 2002) suggested a diminution of the stigma associated with illicit drug use. However, the
management and negotiation of stigma as an ongoing multi-
layered process at the micro level has been a key focus of both
the normalisation literature and its critics. Shiner and
Newburn (1997, p. 523) argued that young people sought to
neutralise their guilt and shame about using drugs by
subscribing to the normative discourse that ‘drugs are bad’. Redner Snitman (2008, p. 456) illustrated the micro-politics
that drug users engage in, such as ‘othering discourses’, to
challenge the stigma attached to them. Pennay and Moore
(2010) illustrated the variations in how users within a
friendship network negotiated the stigma associated with
drug use from avow ing the need for self-regulation to
valorising the pursuit of pleasure. Green and Moore (2013)
noted how methamphetamine smokers managed stigma by
concealing their use from their peers.

Arguably, stigma and identity are differentiated by drug
type and the social status of the user (see Bancroft, 2009;
Seddon, 2005). Marginalised young people in excluded
neighbourhoods manage a stigmatised identity as part of
their everyday world (Buchanan, 2004; Buchanan & Young,
2000) and, as observed by Byrne (1999, p. 121) ‘are barded
by the space they occupy’. Adding a drug using identity to this
mixture elevates the level of stigma they experience.

These issues led to additional questions for my own
research journey and an exploration of the ‘problematizing
process’ (Moore, 2012) – how and why certain types of drug
use and drug users are problematised over others and the role
class, power and social exclusion play in this construct.
Linked to this was the pondering as to what happens to drug
use on the margins when recreational drug use moves to and
becomes normalised (with all the caveats noted above) in the
mainstream.

Methods
This paper draws from a research study aimed at exploring
patterns of drug use, associated drug-related harms and the
operation of the local drugs economy in the risk environment
of a Dublin neighbourhood (O’ Gorman et al., 2013). The
study takes a critical interpretivist approach developed over
time by the Principal Investigator (PI) to understand the lived experience of drug use at a neighbourhood level (see O’Gorman, 2005, 2008, 2014a,b, 2015). This methodology is a sociologically grounded mixed-method approach based on the collection and analysis of ethnographic (street conversations) and qualitative data (in-depth interviews and focus groups) situated within an analysis of drug trend indicators, local socio-economic data and the prevailing political and policy environment. This research approach uses induction and triangulation to validate and cross-check data and arrive at an in-depth understanding of drug consumption practices and drug-related harms at the individual and community level.

This paper draws from the ethnographic fieldwork component of this study which aimed to examine drug use from the user’s perspective – their intentions, choices, boundaries, and risks – as well as getting a sense of users’ lives and the role and meaning drugs play in their lives. The Principal Investigator worked with a team of four privileged access community fieldworkers who had ready access to local drug scenes and users (see Griffiths, Gossop, Povis, & Strang, 1993) to conduct a series of ethnographic observations and conversations with residents and drug users in their natural locations (Bourgois, 1995; Hobbs, 2001; Pearson, 1992). Over 180 h of ethnographic fieldwork were conducted with members of the fieldwork team working in pairs usually in batches of three hourly sessions at different times and days to try and capture a broad as possible sense of drug use in the area.

Fieldworkers took notes (where possible) and after each session and this information was synthesised and interrogated in a series of group discussions facilitated by the PI as part of an inductive analytical process seeking to identify key themes and issues. In presenting the findings, quotations are used for illustration and participants’ names are anonymised.

Contacts were established with approximately 30 young adults aged 17 – 24 who had a public presence in the community at the time of the research. Two-thirds of the drug users we encountered were male, reflecting the gendered pattern of public space.

Ethical approval for this study was obtained from the Human Research Ethics Committee, University College Dublin, Ireland. The ethos underpinning this community research methodology seeks to minimise the traditional power imbalance between the researchers and the researched; maximise our understanding from the perspective of the affected communities; and to ensure that dignity and respect underpin the social relations of the research process. Time was taken to build trust and rapport with the participants and to discuss the aims of the research study so participants could make an informed judgement about whether they wish to participate or not. Informed consent was negotiated verbally on an ongoing basis and participants assured they could withdraw at any time. Care was taken to ensure participants and their input was anonymised.

The study began in July 2012 with the bulk of the fieldwork being conducted between then and December 2012: the findings reflect the local drugs situation at that time.

Findings

The young participants describe themselves as being from ‘the schemes’ (social housing) and from ‘the street’. They do not necessarily represent drug users in the general population, or even drug users in their neighbourhoods, though they do represent young active drug users who have a public presence in the neighbourhoods – a presence which is perceived as problematic by the state and many people in their community.

About two-thirds of the thirty or so young people who participated in the fieldwork were ‘lads’ – males aged between 17 and 24 years – into ‘street drinking’, taking drugs and hanging around their neighbourhood. About half were early school leavers, the rest had completed school. Eight were linked in with local state run training programmes, the remainder were unemployed. Almost all were living at home and receiving a ‘jobseekers’ welfare payment’ – between 80 and 100 euros per week depending on their age. From that, they deducted ‘me Ma’s money’ for their food and lodgings, a contribution towards their children’s keep, if they were parents, then phone and internet bills, after which there was little left.

As a community, the neighbourhood under study had disproportionately experienced the structural violence of the state (see Wacquant, 2008) in terms of its poor policy outcomes and disproportionate levels of educational disadvantage, unemployment, poor housing, ill health, imprisonment, etc. The area benefited little from the 1996 to 2006 economic boom – an era of almost full employment with one of the highest rates of GDP (Gross Domestic Product) per capita in the world (Murphy & Kirby, 2011). The subsequent Great Recession and the enforcement of a post-bust austerity programme by the European Troika (European Commission, European Central Bank and the International Monetary Fund), and a compliant national government, disproportionately affected the more vulnerable and less well off (Caritas, 2014). By 2011, people in the neighbourhood had experienced a significantly disproportionate increase in unemployment and the area was ranked among the most deprived in the state (O’ Gorman et al., 2013).

The neighbourhood had been one of a number of marginalised areas of Dublin city beset by epidemic levels of heroin use among young people in the 1990s (O’ Gorman, 2014a). In addition to active street drug markets, the area had gained a national reputation as the organisational base for the wholesale distribution of drugs and experienced high levels of drug-related violence and deaths associated with the operations of the drugs economy (O’ Gorman, 2014b). Here, as in other marginalised communities, with limited opportunities in the formal economy and the increasing retrenchment of the welfare state (particularly the decreased level of social and economic supports for young people), a ready supply of labour for the drugs economy could be found (O’ Gorman, 2005).

Doing differentiated normalisation

The young research participants had few externally imposed structures and routines to their days and a lot of free time with few financial resources. Hanging out in their friendship groups accounted for a significant part of their everyday
world. On the street, they congregated at different ‘hot spots’ - in the car-park of the cluster of local shops and the post-office; sitting on the low church wall; and, in the front gardens of gable-end houses, as well as in more secluded spaces in fields and parks nearby – the waft of cannabisingers in the air around them.

The drug-using repertoire of this group contained a few core substances that were easily accessible and affordable in the locality. These reflected the main drugs used in the general population (see NACD, 2011). Alcohol was their first drug of choice, mainly cans of cheap beer which, as Jason described, were ‘cheaper than a litre of milk’. Occasionally at the weekend they would access cheap spirits, mainly vodka which was favoured by the young women. Alcohol along with ‘weed’ (herbal cannabis) and ‘tablets’ (mainly benzodiazepines and the so-called ‘Z drugs’ – Zimovane, Zopiclone, etc.) formed the baseline of their consumption. Research observations and conversations indicated that all three drugs (alcohol, cannabis and tablets) were culturally accommodated within the neighbourhood. A particularly strong level of acceptance of cannabis use was noted, among users and non-users alike ‘everybody smokes it’; ‘sure a joint is like a cigarette’; and ‘it’s only a relaxer’. Similar views were voiced about the use of tablets:

Yellies (Diazepam 5 mg) and bluesys (Diazepam 10 mg), everybody takes them and that’s an everyday drug, not just at the weekend.

On an almost daily basis, the lads would hang out in the streets where they lived smoking a few joints.

Drug intentions: agency and structure

Patterns emerged from the young people’s drug stories which indicated that their drug use and drug combinations, although diverse and complex, contained elements of functional and rational action with regard to their drug choices and drug use intentions. These actions were mediated by temporal and spatial settings as well as structural opportunities and constraints and on a daily basis the young people negotiated an intricate interplay between structure and agency which shaped their drug consumption practices. Patterns of drug use were shaped by availability and accessibility (for example, having to travel to another area to score would act as a deterrence); affordability (depending on their current financial situation); the reputed quality of the substance (the mitigation of bad ‘come downs’ was an ongoing concern); and the responsibilities they had for that day (such as housework, child care, odd jobs, welfare appointments) with a further differentiation between drug use that was regarded as appropriate or functional for weekdays and weekends.

During the week, their drug-taking intent is to ‘chill’. For this, the combination of ‘weed and tablets’ was regarded as ‘a lovely mix’; ‘from Monday to Thursday it’s just the weed and tablets’. As Keano described ‘a few roche’ [Diazepam] and a bit of hash, just all day have a lovely buzz’.

For these young people, the weekend usually ‘kicked off’ on Thursdays and heralded a shift in their drug consumption practices. Then their decision-making processes became more nuanced illustrating a negotiation between current and desired mood and whether they wished to enhance or dispel their current mood. For example, all were in agreement that if they wished to enhance an existing good mood ecstasy was the drug of choice. As Kev described ‘the happy feeling is the time for the Es’. Or, if they sought a particular effect (up, down or ‘straightener’) a range of drug combinations would be considered.

Four categories of intention were identified along a continuum of effects – ‘chillin’, ‘buzzin’, ‘getting mangled’ and ‘coming down’. Each intention was embedded in a set of polydrug combinations to achieve the desired effect:

- ‘Chillin’ – a combination of one or more of cannabis, alcohol and ‘tablets’;
- ‘Buzzin’ – alcohol with ecstasy, cocaine and/or NPSs;
- ‘Getting mangled’ entailed a higher level of polysubstance use mixing larger quantities of stimulants and hallucinogens; and
- ‘Coming down’ which was eased with combinations of herbal cannabis and tablets (see Table 1).

The young people’s focus on pleasure seeking, on ‘coming up’ and having a good time was balanced by their concern with mitigating potentially severe ‘come downs’. In this respect, they perceived quality to be less about the level of high a substance could achieve and more about the level of low they experienced after using it. At the time of the fieldwork, NPS (new psychoactive substances) had gone out of favour with the young people after a period of popularity. Following the introduction of drug control legislation in Ireland in 2010 prohibiting the sale of ‘legal highs’, NPS ‘went underground’ and onto the illegal drugs market and at the time of the fieldwork were treated with caution by the group, as Johnno described ‘you can get a bad buzz off it’. In their wake, ecstasy had re-emerged as a drug of choice though it too had previously been disregarded for poor quality, as Damo related: ‘back about 2 years ago the Es were rubbish but these are wooah’. Others related equally enthusiastic verdicts: ‘a bag of E dust and you’d be boomoo – hits you straight in the eyes [all laugh]’; and ‘that’s all we do now again is just yokes [ecstasy]’. The high benefit-cost ratio, in terms of the level of effect in relation to its cost, was an additional attraction:

The most popular drug at the weekend would be Es, it is the cheapest drug you can get and it’s the most get out of it drug you can get (Keith).

The leisure–pleasure landscape

Different drug intentions required different settings. Weekday drug use (cannabis, tablets and alcohol) took place mainly at home, in a front garden (the layout of the neighbourhood was of small terraced houses with small front and back gardens), or on the street with a few mates. At the weekends, small groups would meet in someone’s home for a few ‘uns’ [cans of beer] or ‘shots’ [of spirits]: ‘you’d have to get a few into you before you’d go out’. Hectic social media communication would begin as the evening progressed and plans developed. Lynne described how they would start texting and ‘facebooking’ each other checking to
see who was ‘up for a good one’; enquiring: ‘are you getting a few bombs [ecstasy pills]’; and texting around their friendship group: ‘are you on it?’; ‘are you on it?’; ‘are you on it?’ in the lead up to a meeting.

Moving on up to ‘buzzin’ and ‘getting mangled’ was a more collective group activity and required a different setting - a house party in a ‘free gaff’ (that is, where there was no adult in a supervisory role in a house or apartment); a derelict house; or an isolated park or field where music and dancing would enhance the experience and they could get ‘completely out of it’. Anna described:

We would do E, sniff [cocaine], and speed - the three of them together - it’s a lethal [brilliant] buzz.

The young people had little access to the venues of the formal nighttime economy to hang out or party. They were not interested in frequenting the local ‘old man booters’ [pubs] and related how they were refused admittance to clubs who seemed to set arbitrary entrance policies - ‘over 25s’, ‘regulars only’, etc. when they sought access. In any case, the young people reported that alcohol was more affordable as a take-out and they preferred the freedom of creating their own entertainment spaces.

Across the Rubicon

Despite being open to drug experimentation, having access to heroin and crack cocaine in their neighbourhood, and experiencing the type of social exclusion associated with dependent use, these young people had not strayed across ‘the Rubicon’ into the territory of using drugs associated with dependency (MacDonald & Marsh, 2002; Parker et al., 1998). Their narratives of differentiation illustrated a fierce resistance to the inclusion of heroin, crack cocaine, or intravenous drug use into their drug-using repertoire. Dekko summed up their bounded drugs repertoire as ‘Es, weed, tablets - everything bar crack and heroin’ which enabled them to clearly differentiate themselves from the ‘junkies’ in their neighbourhood - older habitual drug users with a history of intravenous drug use and a preference for ‘tablets’, alcohol, methadone, heroin and crack cocaine (O’Gorman et al., 2013). Their aversion to these drugs and a mode of administration (IV drug use) they equated with being ‘strung out’ underpinned their scathing descriptions of dishevelled junkies ‘goofing off’ around the neighbourhood despite knowing many of the ‘junkies’ personally as neighbours and/or family members. Their strongly held view that ‘gear [heroin] would get you strung out and leave you like a junkie’ was so common that they found it difficult to identify a peer that had crossed this Rubicon:

No [in response to my question about heroin use] there was very, very few maybe you could get one out of ten lads that probably had a taste for it, but it’s still the older generation, crack as well (Dave).

Naah [to using needles] - couldn’t tell you anyone my age who is using needles (Keith).

Availability and access

The area the young people lived in was a key site for the drug distribution trade for Dublin city and access and availability to of a range of drugs was not a difficulty, although cost often was. All the males in the group had varying degrees of involvement with the drugs economy, although their employment in the sector was on a rather ad hoc basis and they were contacted for work as and when needed by the local distributors to sell, store, bag and/or distribute drugs and money. Their consequent erratic levels of disposable income among the group added a further layer of complexity to the social relations of their drug use. For example, there was a high level of drug sharing among the friendship groups and ‘sorting out’ peers who were short of money [either by giving money or drugs], in the anticipation that this ‘gift’ would be reciprocated in turn. ‘If you’re short, friends will sort you out’. As Mikko described:

You would be offered a sniff of coke or an E. Like one E is a fiver (E5), no one is going to - like I wouldn’t go back to them and say ‘have you got that fiver?’

Involvement in the drugs trade had downsides. For many of the young people, building up a drug-related debt put them at risk of drug-related violence. Such debts would start to build up by getting ‘a lay on’ [credit] from someone at a higher level of the drugs market if they had no money, as Ronan described:

R: You don’t even need money for drugs you just go out and you see the right person and you say yeah ‘give us that until next week’.

AO’ G: How much tick [credit] would you get?

R: Depends on who it’s off, how much they can afford and how much you know the person

AO’ G: So would you go around to a few people?

R: Nah that’s the worst thing - loads of people do - they are planning on getting out with not playing - that’s why people get a batter [hit] - if I get some off him, then him, then him then I’d have to watch for five people instead of just getting it off him and watch for him.

Unpaid debts were punished, Desi considered that ‘you get a box around for owing 50 euro’. The young people reported harsh punishments being meted out to enforce the servicing of drug-related debts including severe beatings and shootings. Overall, violence was seen to be an accepted and normalised means of resolving disputes.

A further downside of their contact with the drugs economy was that it brought them to the attention of the...
Gardai [police]. Johnno related how they received: ‘a lot of hassle and hidings [beatings]’ and were in effect over-policed:

They class a crime as loitering just standing around doing nothing and we’re saying ‘what do you want us to do, there is nothing to do’.

The level of drug-related harm experienced by these young people through their engagement with the drugs economy added to and exacerbated the risk environment they inhabited.

Discussion

The narratives of the marginalised young people doing a form of differentiated normalisation, illustrate how drug use and drug choices are shaped by different intentions, avowed identities and diverse structural, temporal and socio-spatial settings. Their routines of ‘chillin’, ‘buzzin’, ‘getting mangled’ and ‘coming down’ echo the (mainly) reasoned consumption choices, the cost-benefit analyses and the emphasis on pleasure and fun of recreational drug users, including those who underpin the normalisation concept.

This marginalised group were situated within a high-risk environment which traditionally has facilitated the use of the types of drugs associated with dependency. The concern of Parker et al. (1998) of a potential erosion of the cultural barriers that separated mainstream recreational drug use from the more problematic forms of drug use engaged in by marginalised young people has not come to pass. Indeed, as reported here, the opposite has occurred – the young people have adopted the normative practices assigned to mainstream recreational drug use.

The roots of this cultural shift at the margins can be traced to the young people’s conscious construction of an alternative drug-using identity in opposition to that of the ‘strung out junkies’ in their neighbourhood. This identity rested on three key elements. First, their fierce resistance to the drugs and mode of administration associated with being ‘strung out’ (in this case heroin, crack cocaine and intravenous drug use). Second, the wide social distance they created from them by contributing to the othering and stigmatisation of the ‘junkies’ through name-calling and ‘slagging’ [insulting teasing] their behaviour; and thirdly, their emphasis on rational agency via narratives of drug using choices. In adopting this identity, they perform an antithesis to the problematised drug user associated with their neighbourhood – typically constructed as being incompatible with reason, rationality and discipline and linked with loss of identity and agency (Fraser & Valentine, 2008; Pennay & Moore, 2010). By stigmatising other drug users (similar to the process described by Rodner Szntman, 2008), they essentially deflected the stigma associated with chaotic drug use from themselves.

This group’s construction of a drug using identity was observed to be based on fun and pleasure, and weighing up the costs and benefits of using different drugs against concerns about after-effects, and their social responsibilities – much similar to the considerations of mainstream drug users. Yet, by inhabiting a high-risk environment their consumption practices remain outside the framework of the normalisation thesis and its derivatives. The concept of normalised drug use is inseparable from the context of commodified leisure whereas these marginalised youth have a largely de-commodified existence and they are excluded from the licensed leisure economy through lack of resources and the cultural habitus to pass muster of the nightclub security. Their ‘leisure – pleasure landscape’ (Parkers et al., 1998, p. 25) and the cultural spaces of consumption available to them (unlicensed raves, parks, fields, house parties) are situated outside of the licensed leisure night-time economy. And, as Measham (2004a,b) notes, these de-commodified spaces have become criminalised in contrast to the process of commodification of criminal culture in licensed leisure spaces.

These young people are additionally criminalised by their participation in the drugs labour market which, somewhat ironically, supplies the licensed nighttime economy with its fuel for illegal leisure. Though, the mainstream and marginalised drug users rely heavily on social networks and friends to access drugs. For the recreational users ‘sorting friends out’ is constructed as a sign of trust and friendship rather than as a criminal offence (Aldrigde et al., 2011). They purchase their drugs through layers of friendship and acquaintance networks ‘friends, and friends of friends’ (Parker, 2000, p. 6) and by and large are cushioned by several degrees of separation from direct contact with the drugs economy. As Aldrigde et al. (2011) note their contact with ‘drug dealers’ is very rare and drugs are exchanged in private spaces rarely monitored by the police. In contrast, the young marginalised people are active in the drugs economy rendering them subject to drug-related violence from the operators of the drugs economy and the officers of the state.

Despite their uptake of mainstream recreational drug consumption practices, the marginalised youth’s exclusion from the means of production and consumption and their inclusion in the drugs economy perpetuates the public and political perception that they are not otherwise conforming to the values of a neo-liberal society. Their position is redolent of Young’s analysis (1999, p. 86) of marginalised young people caught up in a ‘bulimic world of cultural inclusion and social exclusion’ and by continuing to be constructed as deviant they remain suitable objects of surveillance and control by the state (Matza, 1964) and subjects less deserving of welfare protection (MacGregor, 2012).

Conclusion

The concept of normalisation presented a new frame of reference for perceiving drug users as being controlled rather than chaotic, disciplined rather than disorganised, and proactive recreational consumers of drugs and drug-referred goods (music, film, fashion, etc.) rather than passive dependent addicts. The concept rested on the notion that the sensible use of certain types of drugs by otherwise conforming youth had become culturally accommodated in the mainstream. Arguably these normative views were linked to the potential for recreational drug use and its associated cultural lifestyle to be appropriated for commodification within the free market economy.
Inadvertently, by privileging certain types of drugs and certain types of drug-using behaviours, the normalisation thesis exacerbated the othering of young people on the margins. Both normalisation and differentiated normalisation focused on the drugs being used at the expense of the power and status of its users. Despite these marginalised young people adopting the cultural practices of mainstream recreational use, they remain outsiders.

Normalisation is relative (not just differentiated) to the social status of the drug user. A reconstructed normalisation thesis inclusive of class (and race, and gender) could address issues of exclusion and inclusion and incorporate a class analysis into exploring why the use of similar drugs and similar drug using behaviours by different social groups is differentially accommodated and accepted by mainstream society.

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Declaration of interest

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Notes

1. Names of participants have been changed to protect their anonymity.
2. The term ‘tablets’ was used to describe an assortment of medication prescribed largely for the treatment of insomnia and anxiety, such as the benzodiazepines alprazolam/Xanax®, diazepam/Valium®, flurazepam/Dalmane®, temazepam/Restoril® etc. and the ‘Z’ drugs such as zolpidem/ambien®, zopiclone/zimovane®.

References

EMCDDA (European Monitoring Centre for Drugs and Drug Addiction). (2012). The drugs situation in Europe, Lisbon: EMCDDA.
Understanding and responding to drug use: The role of qualitative research (pp. 137 - 142). Lisbon: European Monitoring Centre for Drugs and Drug Addiction.


