

Drug Use and Social Change

Secondary Analysis of the British Crime Survey (1994-8)
and Youth Lifestyles Survey (1998/9)

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Thesis submitted for the degree of PhD in Social Policy



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Abstract

During the second half of the twentieth century illicit drug use went from being something that was very unusual to something that most young people had at least some experience of. This apparent transformation has been attributed to the advent of post-modernity and is said to require a new explanatory framework. Established perspectives, it is argued, have been rendered obsolete as drug use has moved from the margins to the mainstream of British youth culture and as traditional distinctions between users and non-users have disintegrated. Based on two large-scale nationally representative household surveys, this thesis examines the evidence for such claims. It begins by developing an empirically grounded classification of drug use, before going on to consider how young adults' use of illicit drugs varies according to a range of characteristics. Significant differences are noted on the basis of demographic characteristics, broader lifestyle choices and position in the life-course. These differences show that recreational drug use typically occurs in the context of a distinctly hedonist lifestyle which is heavily concentrated among young people in the early stages of the transition into adulthood. Alongside active participation in the night-time economy, regular binge-drinking and frequent drunkenness, drug use appears to provide young people with a means of making sense of their position in the social structure and celebrating freedom from adult roles and responsibilities. It follows from these findings that increases in drug use have been facilitated by the cultural and structural changes associated with development of modernity, particularly the extension of early adult transitions and the growing emphasis on leisure. That said, increases in drug use have not taken the sudden or dramatic form that is sometimes suggested and this implies a certain degree of continuity. It also indicates that established perspectives have rather more to offer than is generally supposed.

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Acknowledgements

One way or another I have been thinking about this project for almost ten years, during which time I have accrued a great many debts of gratitude. The original study was funded by the Economic and Social Research Council (R000222872), which, along with the Research, Development and Statistics Directorate at the Home Office, also provided access to the necessary data. Particular thanks go to Tracey Budd, Claire Flood-Page, Victoria Harrington and Siobhan Campbell (all of RDS) and to Nina Stratford (National Centre for Social Research) for their patience in answering my numerous queries about the data; and to Chris Hale (University of Kent) for his advice about the analysis.

At the outset of the study I was based at Goldsmiths College, University of London, but subsequently transferred to the London School of Economics and Political Science. I am grateful to both institutions for supporting my studies and to Tim Newburn for fulfilling the role of supervisor throughout. Tim has been extremely generous with his time and played a key role in helping me negotiate the stresses and strains that go with combining part-time study and full-time work. As well as discussing findings, sharing insights, providing references, lending books and commenting on drafts, he gave encouragement when I got frustrated at my slow progress and left me to get on with it when that was what was needed.

The LSE has proved to be a particularly rewarding place to work and study. I have benefited greatly from contact with fellow PhD students and colleagues in the early(ish) stages of their academic careers, particularly Anne Brunton, Rachel Condry, Rod Earle, Iman Heflin, Mercedes Hinton, Derek King, Nisrine Mansour, Phillip Noden, Periklis Papandreou, Declan Roche, Kate Steward and Coretta Phillips. Among other things, they have listened to endless versions of the same sentence, shared war stories and provided much needed reassurance. I have also received considerable support from senior academics in the Department of Social Policy and the Mannheim Centre for Criminology and am especially grateful to Stan Cohen, Dick Hobbs, David Downes, Anthony Hall, Frances Heidensohn, John Hills, Nicola Lacey, Jane Lewis, David Piachaud, Judith Rumgay, Robert Reiner, Paul Rock, David J. Smith, Peter Townsend and Anne West for the

collegiality they have shown me. Thanks also to John Wilkes for keeping everything afloat and for helping to make my time at LSE much more comfortable than it might otherwise have been.

Finally, many thanks to my family, both biological and social. To mum and dad for starting me off and making me do my home-work; to nana for being impressed by whatever I did; to Peter, Francesca, Matteo and Nicolo for keeping an eye on me from afar; to Deborah for showing me the way; to Ralph, Tony, Horace, both the Pauls, AFC Hampton, Brixton Wonderstuff and West Brompton Albion for providing an escape route to the beautiful game; and to Nicoline for keeping me going and bringing the sunshine.

1

Introduction

This greater use and acceptance of illegal drugs among the young represents one of the most profound transformations to take place within British youth culture since 1945. Previous chapters have shown that illicit drug use has been a feature of a range of subcultural groups throughout the post-war decades, though the practice was always confined to a comparatively narrow section of the youth population. By the early 1990s, however, the situation had changed dramatically (Osgerby, 1998, 179).

Fashions in drinking, smoking and other forms of mind altering substance use continually change. Accordingly, each thesis, report or book on this subject tends to have a relatively short shelf-life and to become a historical, rather than current, contribution in a matter of weeks or months (Plant and Plant, 1992, 1).

There can be no doubt that Britain's relationship with illicit drugs changed dramatically during the second half of the twentieth century. Nor can there be any doubt that this was a period of profound social change more generally. But how exactly are recent developments in drug use to be understood and to what extent can they be considered symptomatic of broader social and cultural forces? In an attempt to answer these questions, this thesis offers a detailed assessment of recent patterns and trends in illicit drug use. The analysis is based principally on two large-scale, nationally representative surveys and concentrates on young adults as the main consumers of illicit drugs. As well as addressing a range of fairly immediate questions, the empirical analysis is used to reflect on some of the broader theoretical developments that have taken place within the sociology of drug use. Particular attention is given to what is described as the 'new orthodoxy', which centres on the claim that illicit drug use has changed so dramatically that it must be understood in a wholly new way. Such a position, it will be suggested, not only ignores important areas of continuity, but also underestimates the value of some established perspectives.

One of the earliest sociological accounts of Britain's changing relationship with illicit drugs was provided by Jock Young in *The Drugtakers*. Published in 1971, this book has come to

recognised as one of the most influential criminological texts of its time and was recently admitted into Halovine's *The Classic Collection*. According to Steven Taylor (2002, 01:00), the collection's founder and editor: '*The Drugtakers* not only became a classic in the sociology of crime and deviance but also seems as relevant today as when it was published in 1971'. Despite the plaudits, this book is rarely cited in much that is now written or said about drug use. This may come as no great surprise. After all, when *The Drugtakers* was first published such behaviour use was still relatively unusual and was widely associated with bohemians, beatniks and counter cultural revolutionaries. With the arrival of the 'chemical generation' and the 'democratisation' of drug use such imagery may seem to belong to a bygone age. Add to this the 'inevitable half-life of sociological fashions' and the 'ingrained impatience with the old which condemns every set of ideas to limited vitality' (Downes and Rock, 1988, 167) and it is perhaps inevitable that a book written more than forty years ago should no longer command much attention.

Whatever the reasons, dissatisfaction with established theories has become increasingly apparent and a new perspective has emerged which emphasises the widespread and widely accepted nature of drug use among ordinary young people. Matthew Collin and John Godfrey (1997) charted the development of this new perspective, arguing that it was the death of Leah Betts that provided the catalyst for change. Leah died on November 16 1995, less than a week after taking ecstasy at her 18th birthday party, and her death sparked one of the most pronounced moral panics of the decade: tabloid newspapers sought out the 'murderers' who supplied Leah with ecstasy and encouraged their readers to 'shop a dealer'; a video including images of Leah's funeral was distributed to schools as a warning to other young people; a billboard campaign showed a photograph of Leah accompanied by the word 'Sorted' over the caption, 'Just one Ecstasy tablet took Leah Betts'; the *Sunday Times* (November 19 1995) declared: 'This is a nightmare for parents'; and within six months drugs had become the major worry for British parents (*The Times Education Supplement*, March 10 1996). Although not the first to be linked to ecstasy, Leah's death was said to have made such an impact because it challenged widely held assumptions about the sort of people who take drugs. According to Colin and Godfrey (1997, 295-6):

Leah Betts...was white, affluent, a college student, an English Rose, and lived not in the metropolitan sleaze of London or Manchester, nor the sink estates of Scotland, but in a sleepy village in the heart of the Tory south-east: a daughter of middle England. Anykid...More than anyone, Betts transformed the image of the druggaker forever. Broadsheet press editors, who for years had been recycling 'Agony of Ecstasy' headlines, realised this, and descended into a miasma of soul-searching. They had discovered that the people who took Ecstasy were their sons and daughters...It was as if they had stumbled on an alien universe that had somehow existed for years, unknown and unseen, within their own society. They found a culture that had previously been invisible, a world where drugs were good not bad; normal, not deviant.

It was not just the mass media that was encouraged to rethink old orthodoxies. According to Harry Shapiro (1999, 18): 'By itself, rave culture has revitalised the sociological literature on youth culture, and in particular has provoked a revisionist view of its history challenging the hegemony of the key writers of previous decades'. As part of this challenge a group of academics and researchers based at the University of Manchester developed the claim that drug use was undergoing a process of normalisation, which could not be understood in terms of existing perspectives and which demanded a new explanatory approach (Parker et al., 1995, 1998, 2001 and 2002; Measham et al., 1995, 1998 and 2001).

But just how realistic are these claims? This question provides the basis for much of what is to follow and will be assessed on the basis of the 1998 British Crime Survey (BCS) and the 1998/9 Youth Lifestyles Survey (YLS). Both surveys will be used to answer a series of fairly immediate questions. How widely are illicit drugs used? Who uses them? Why do people use drugs? How does illicit drug use relate to drinking and smoking habits? And, what happens to young people's drug use as they move into early adulthood and start to 'settle down'? Given the age of the data, the answers that are provided might be dismissed on the grounds that they were 'out of date' even before the analysis was completed. This objection is worth considering in some detail because it serves to illustrate some of the central themes of the thesis. Such a critique is not only misplaced, but also encapsulates much that is problematic about recent academic and cultural commentary. Drug use has not changed greatly during the last eight years or so, but has rather been subject to considerable continuity. The BCS has reported that levels of drug use have been fairly stable since 1998 though the general trend has been one of moderate decline (Ramsay and

Partridge, 1999; Ramsay et al., 2001; Aust et al., 2002; Chivite-Matthews, 2005; Roe and Man, 2006). Even if greater change were evident, there would still be considerable value in what Stanley Cohen (2002) has called 'historical reconstruction'. It is not just that such reconstruction helps to explain how we have got to where we have, but that it also has implications beyond the immediate and topical. We must, as Cohen insists, look beyond the ephemera to gain deeper insight into the social processes that are at work in any given situation or at any given time. Above all, this requires that empirical analysis is related to broader social theory so that we can move from the particular to the general (Bourdieu and Wacquant, 1992; Bryman, 2001). In short, therefore, the following analysis is offered both as a reconstruction of the way things were towards the end of the twentieth century, but also as a basis for thinking more generally about 'contemporary' patterns of drug use. As well as being important in their own right, the immediate questions described above will be used as springboard for assessing how recent trends in drug use can be explained by broader processes of social change. Particular attention will be paid to the development of modernity, be it 'post' or 'late', and to the claim that new perspectives are required because established theories have been rendered obsolete.

The following discussion is presented in seven chapters, which can be divided into three broad sections. Chapters two and three set the scene by providing a summary of the relevant literature and describing the data and methodology. The literature review provides a detailed summary of the new orthodoxy which permeates contemporary academic and cultural commentary on drug use. One of the main criticisms that will be levelled at recent academic work is that it is too ready to dismiss the insights provided by established perspectives. To provide the basis for this argument, detailed consideration will be given to early developments in the sociology of drug use. The methodology chapter provides technical details about the surveys and the analysis, alongside a discussion of broader epistemological issues. The results of the empirical analysis are then presented in four consecutive chapters. In the first of these chapters a social classification of illicit drug use is developed which provides the basis for the rest of the analysis. As well as preparing the way for what follows, chapter four is important in its own right because it begins to delineate the social meaning of different types of drug use and to explore related decision-

making processes. The remaining empirical chapters concentrate on the social distribution of drug use and on identifying the most powerful predictors of use. Each chapter may be thought of as exploring different, and sometimes competing, theoretical traditions: chapter five focuses on the demography of drug use and pays particular attention to claims that drug use is the result of social dysfunction; chapter six concentrates on lifestyle perspectives which view drug use as a form of consumption; and chapter seven explores the potential contribution of developmental criminology by focusing on life-course influences. Finally, the concluding chapter considers the broader theoretical and practical significance of the analysis as a whole.

The sociology of drug use

...if ever there was a time when the answers [to the many questions about the past, present and future place of drugs in our society and culture] were straightforward, it is surely not today...Drug use may still represent a route to 'unreality' and a means to slip away from the constraints of routine, but today, in many more different ways for many more different people, drug use is *actually a part* of the 'paramount reality' of everyday life (South, 1997, 1 and 4, original emphasis).

The sociology of drug use first came to prominence in the 1960s and early 1970s, with the rise of new deviancy theories. In Britain, at least, this proved to be little more than a passing phase and interest in drug use faded as criminological preoccupations shifted. Remarkably little work was carried out in this field from the mid-1970s to the mid-1990s and it is only fairly recently that sociologists have begun to compensate for their previous lack of engagement. After such a long period of neglect, during which drug use became much more widespread, it is perhaps unsurprising that considerable emphasis was then placed on the need for new perspectives. This chapter begins by reviewing new deviancy theories and their contribution to the sociology of drug use, before going on to describe more recent developments. In considering the latter, I will begin to identify a degree of chronocentrism, whereby disciplines tend to forget their past and become caught up in a recurring cycle of new beginnings (Rock, 2005). One of the main arguments that will be developed in this, and subsequent, chapters is that the call for new perspectives has resulted in too great a willingness to discard contributions from the past and yet, ironically, that recent offerings contain many unacknowledged echoes of earlier work.

New deviancy theories

Early developments in the sociology of drug use were, for reasons that will become clear, closely linked to the fluctuating fortunes of new deviancy theories. These theories rose to prominence during the 1960s, but enjoyed only a relatively short period of ascendancy, the end of which represented a watershed in the development of both the sociology of drug use

and criminology more generally. By the mid-1970s, British criminology had been reshaped by neo-Marxist perspectives which were primarily concerned with the link between capitalism and crime (Downes, 1988). Expressive deviance was considered peripheral to such weighty concerns and subjects such as drug use and sexual deviance received little criminological attention. With this development the sociology of drug use pretty much fell into abeyance and was not revived on any significant scale until some twenty years later.

New deviancy theories were very much a product of their time, sharing in the general spirit of protest and rebellion that characterised the 1960s. Emerging against a background of Civil Rights activism, anti-war demonstrations, student sit-ins and the rise of modern feminism, these theories presented a serious and sustained challenge to the 'correctionalist' orientation of mainstream criminology (Matza, 1969). New deviancy theorists rejected their allocated role as assistants in the quest to free society from 'troublesome activities' and dismissed the idea that there was a distinct, unambiguously deviant, minority whose behaviour could be explained as a result of individual pathology or social dysfunction. Instead, they advocated an 'appreciative' stance which was committed to faithful representation and to understanding the world as it was seen by the subject. From this perspective, much of what had previously been taken for granted became contested and many of the old certainties began to fall away: deviance was considered to be meaningful behaviour involving choice; rule breaking was viewed as commonplace rather than exceptional; and the continuity between normality and deviance was emphasised (Plummer, 1979).

New deviancy theories had what Heidensohn (1988, 67) describes as 'a pantheon of respectable and ancient founding fathers', including Karl Marx, George Herbert Mead and Alfred Schutz. As a leading exponent of symbolic interactionism, Mead laid the foundations for the social anthropology of deviance, which came to prominence during the early part of the twentieth century under the auspices of the Chicago School and provided the basis for what came to be known as the appreciative stance (Downes and Rock, 1988; Sumner, 1994). Crucially, the Chicago sociologists rejected the widely accepted notion that delinquency was the result of individual pathology, arguing instead that it was a

functional response to deprivation and to the experience of growing up in the city. For those living in the 'zone of transition' in particular, deviance was said to provide a surrogate order, replacing the workings of conventional institutions. The survival of the Chicago School's legacy owed much to the work of Edwin Sutherland, a one time student at the University, who went on to develop the theory of differential association. According to Sutherland (1939), deviance is a way of life that is passed from generation to generation and is based on norms that are learned within a delinquent or criminal subculture. While maintaining that deviance emerges out of mundane social settings, he also emphasised that meaning and motive are central to the formation of deviant projects.

Explanations of crime that were rooted in the concept of pathology were further challenged by the American sociology of deviation which came of age in the late 1930s (Sumner, 1994). While the Chicago sociologists had shifted the focus away from individual pathology to social disorganisation, the likes of Frank Tannenbaum and Edwin Lemert went on to reject the notion that crime was the result of social dysfunction. In doing so, they began to map out the territory that would later be explored by new deviancy theorists. In *Crime and the Community*, Tannenbaum (1938) rejected the contrast that was often drawn between the criminal and the community as the embodiments of 'good' and 'evil', arguing that deviation grew out of everyday conflicts of interest and that crime was generated by the values of the community and its methods of social control. Pointing to a variety of criminogenic influences in American society, including a history of endemic conflict, rapid social change and the exaltation of 'pioneer' values such as individualism, competition and acquisitiveness, he argued that the law had come to be experienced as a foreign, external imposition and that distinctions between the legitimate and the criminal had become decidedly blurred. It was, after all, the community that provided criminals with their ideas, purpose and methods - 'whether these be graft, political pull, or the use of the machine gun' (1938, 25). Attempts at social control, moreover, simply served to make matters worse as the 'dramatization of evil' played a key role in producing criminal careers: 'The young delinquent becomes bad because he is defined as bad and because he is not believed if he is good' (1938, 19).

These themes were picked up by Edwin Lemert. Emphasising the ubiquity of deviance and the proximity of 'respectable citizens' to criminal activity, Lemert (1948, 1951) challenged the legitimacy of distinctions between 'normal' and 'abnormal' human behaviour and between 'normal' and 'pathological' personalities. While acknowledging that some rule breaking might be a symptom of 'intra-psychic' conflicts, he argued that deviance was primarily generated by social situations, particularly those involving cultural conflict. In highlighting the importance of social reaction, Lemert distinguished between 'primary' and 'secondary' deviance. Primary deviance describes rule-breaking which is ubiquitous and managed within a socially acceptable identity. Interaction with significant others was considered key here. On the one hand, it may lead to the normalisation or acceptance of the deviation as peripheral to identity, but, on the other, may stimulate a symbolic re-organisation of the self so that the deviance becomes systematic and significant: 'When a person begins to employ his deviant behavior or a role based upon it as a means of defence, attack or adjustment to the overt and covert problems created by the consequent societal reaction to him, his deviation is secondary' (1951, 76). This analysis had important implications for social control. Arguing that psychiatry was irrelevant or even dangerous to a scientific account of the origin and organisation of most deviations, Lemert felt that reform movements, along with public reactions, 'may create more problems than they solve' (1951, 4).

The ideas developed by Tannenbaum and Lemert received relatively little attention until David Matza and Howard Becker helped to propel them into the mainstream of American sociology. Matza has been credited with providing 'the most developed all-round position possible within the framework of interactionist or phenomenological sociology of deviance' (Sumner, 1994, 241). In his early work, with Gresham Sykes, he criticised the dominant theories of the time for creating the misleading impression that delinquents and wider society exist in an antagonistic relationship with one another. Matza and Sykes (1961) argued that delinquents commonly support the same set of norms and values as everybody else and are attracted to delinquency, not because of a deeply held oppositional morality, but because of an exaggerated adherence to widely held 'subterranean' values such as the pursuit of adventure, excitement and thrills. In developing these arguments Matza (1964,

1969) achieved a 'partial critical break' with subcultural strain theory, which he criticised for being overly deterministic and for over-predicting rates of delinquency (Downes and Rock, 1988, 144). For Matza (1964, 28), delinquency could be characterised in terms of a gradual process of 'drift':

The delinquent is neither compelled nor committed to deeds nor freely choosing them; neither different in any simple or fundamental sense from the law abiding, nor the same...He is committed to neither delinquent nor conventional enterprise...the delinquent transiently exists in a limbo between convention and crime, responding in turn to demands of each, flirting now with one, now with the other, but postponing commitment, evading decision. Thus he drifts between criminal and conventional action.

This formulation did retain some elements of strain theory, however. Noting that drift may be facilitated by the 'subculture of delinquency', Matza described how failure in the status system of the wider society and feelings of powerlessness may create a mood of fatalism whereby the delinquent is rendered 'irresponsible' and is released to drift in and out of delinquency. That said, he was careful to avoid the determinism of existing approaches and his emphasis on free will, drift and the similarity of delinquents and non-delinquents 'swamped the neat boundaries between this subculture and that which were the hallmark of existing approaches' (Downes and Rock, 1988, 144). While the 'subculture of delinquency' allowed delinquency, moreover, it did not demand it and this sense of ambiguity reflected the role of 'techniques of neutralization' which enabled individuals to violate norms without surrendering allegiance to them. Arguing that deviation requires a mastery of guilt, Sykes and Matza (1957) identified five neutralization techniques: denial of responsibility, 'it was an accident'; denial of injury, 'no one got hurt'; denial of the victim, 'he was asking for it'; condemning the condemners, 'the police are just as bad'; and appeal to higher loyalties, 'I did it for my mate'. Through the application of these techniques, apparently deviant acts could be rationalised (1957, 668):

In this sense, the delinquent both has his cake and eats it too, for he remains committed to the dominant normative system and yet so qualifies its imperatives that violations are "acceptable" if not "right".

The importance of Matza's work lay partly in its ability to explain aspects of delinquency which defied existing theories. While the emphasis on free-will and drift helped to explain the typically 'mundane' and episodic nature of delinquency, the proposed proximity of delinquent's values to those of conventional society helped to account for the relative ease with which many individuals mature out of delinquency as they move into adulthood, start to work and have families of their own.

Alongside the work of Matza, the labelling perspective raised a number of problems and suggested a few themes that linked together all the main new deviancy enterprises of the 1960s (Plummer, 1979). The labelling perspective did not constitute an explanation or theory of deviance so much as provide a series of sensitising concepts. Labelling theorists were less concerned with addressing the 'causes' of delinquency than with identifying the ways in which social reaction influences deviant phenomena. Howard Becker was hugely influential in the development of this perspective and, in *Outsiders*, produced one of the most widely cited American criminological writings of that or any other time. According to Becker (1963) the process by which things are defined as deviant is a 'moral enterprise', reflecting the economic, political and organisational needs of 'moral entrepreneurs'. Most famously, he declared (1963, 9):

Social groups create deviance by making the rules whose infraction constitutes deviance, and by applying those rules to particular people and labelling them as outsiders. From this point of view, deviance is not a quality of the act the person commits, but rather a consequence of the application by others of rules and sanctions to an 'offender'. The deviant is one to whom that label has successfully been applied; deviant behaviour is behaviour that people so label [original emphasis].

By approaching social reaction as a variable rather than a constant the labelling perspective broke with established criminology. Labelling theorists noted that an audience often reacts to apparently deviant acts in a way which normalises them or accommodates them into the fabric of accepted life and that gross reaction tends to occur only where such acts are deemed inexplicable, disorganised or threatening. Proclamation of a deviant label was considered to be a key moment in this process, for 'when rule-breaking receives a reply from the outside world it must be defended, ended or disguised' (Downes and Rock, 1988,

172). While public labelling may discourage future deviance, as rule breakers feel shame and fear, labelling theorists also highlighted the risk of amplification. Being labelled deviant, they argued, may stimulate a symbolic reorganisation of the self around the deviant label and create problems which the individual resolves by retreating into errant subworlds, populated by those who are similarly beset, and which offer 'modest refuge' from a 'hostile discouraging world' (Downes and Rock, 1988, 174). According to Downes (1988, 181) the labelling perspective brought about 'the most fundamental reorientation of the field', not because its insights 'were utterly novel, but because they expressed, with exemplary elegance, the sterility of analysing deviance and control as two utterly distinct topics'.

Although the new deviancy theories emerged as a very American phenomenon their effects extended to Britain. The expansion of British criminology during the 1960s saw the emergence of a new generation of academics who, inspired by the American sociology of deviance, challenged the administrative and correctionalist orientation of the discipline (Downes, 1988, 175). Having established the National Deviancy Symposium in 1968, which was known subsequently as the National Deviancy Conference, they went on to develop the 'sceptical approach to deviance'. This approach drew heavily on the work of Becker and Matza, but was more overtly political and stretched the 'meaning and viability of the radical conception of deviance to its absolute limit' (Sumner, 1994, 262; see also Cohen, 1971).

Most significantly, perhaps, the sceptical approach to deviance generated a much more collective version of deviancy amplification theory than had previously been offered. Leslie Wilkins (1964), a British social statistician, planted the seeds for this development just as the labelling perspective was coming to prominence in America. According to Wilkins, deviants tend to become structurally isolated, with the result that information about them is relayed back to the majority over distance and is subject to distortion. This promotes inappropriate reactions in wider society, which combine with the response of the deviant minority, to create 'spirals of deviancy' that amplify minor indiscretions. Jock Young (1971) absorbed this model into his analysis of drugtaking (see below) and Stanley

Cohen (1972, 9) incorporated it into the notion of a 'moral panic' which he famously developed in order to explain social reactions to youth cultures.

New deviancy theories and the sociology of drug use

The rise of new deviancy theories was accompanied by growing interest in the sociology of drug use and the proximity of these developments reflected an underlying compatibility. New deviancy theorists frequently expressed unease about the extension of social control into morally ambiguous areas and tended to focus on examples of rule breaking that were designed to elicit a liberal response (Cohen, 1971). As a 'victimless crime' illicit drug use provided an ideal vehicle for such concerns, while the new deviancy theories were, in turn, particularly well suited to the study of drug use. This symbiosis was evident from the way in which new deviancy theorists absorbed drug use into their general conceptual frameworks (see Matza and Sykes, 1961 and Cohen, 1971) and from the crucial contribution that some of them made to the emerging sociology of drug use.

Reflecting his experiences as a jazz musician and activist in the campaign to legalise marihuana, Howard Becker (1963; see also 1955) devoted two chapters of *Outsiders* to the moral career of the marihuana user. Both chapters were based on interviews conducted during the early 1950s with 50 users, half of whom were professional musicians. Becker rejected the idea that marihuana use could be explained in terms of psychological traits and developed the hypothesis that users learn to view marihuana as something that can give them pleasure. Focusing initially on the process by which people become marihuana users, he argued that (1963, 58):

...an individual will be able to use marihuana for pleasure only when he goes through a process of learning to conceive of it as an object which can be used in this way. No one becomes a user without (1) learning to smoke the drug in a way which will produce real effects; (2) learning to recognize the effects and connect them with the drug use (learning, in other words, to get high); and (3) learning to enjoy the sensations he perceives.

Turning conventional wisdom on its head, Becker maintained that deviant motivations grow out of deviant behaviour: as an individual learns to use marihuana for pleasure, vague

impulses and desires are transformed into a certain motivation which could not have been present earlier because it depends on actual experience. The second chapter considered what happens once an individual has learnt to use marihuana and identified three stages of use represented by the beginner, the occasional user and the regular user. Each stage was said to mark a distinct shift in the individual's relationships with the larger society and the subculture within which marihuana use occurs. In order to continue or increase their use of marihuana, Becker argued, individuals must contend with powerful forces of social control which seek to limit access to the drug, ensure that its use must remain hidden from non-users and define its use as immoral. Participation in the user group helps to disable these attempts at control in the following ways although the membership of such a group was deemed to make marihuana use possible rather than necessary:

1. A source of supply becomes available through participation in a group in which marihuana is used, 'ordinarily a group organized around values and activities opposing those of the larger conventional society' (1963, 62). As well as offering opportunities for initial and occasional use, participation in such a group provides the basis for regular use as it offers access to a steady source of supply.
2. Through participation with other users and experiences with the drug, users realise they can keep their use secret with relative ease and thus control based on the fear of discovery is undermined. While occasional use is scheduled around situations free of non-users, regular use is not limited in this way as it rests on a confidence that marihuana can be used 'under the noses' of non-users without them knowing or on a lifestyle in which contact with non-users is minimised.
3. Participation in user groups also offers ways of circumventing conventional moral controls as it provides access to a whole series of rationalisations and justifications - 'conventional society allows much more harmful practices such as the use of alcohol', 'the drug is beneficial not harmful' and 'its use can be controlled'. By acquiring the view that conventional moral notions about drugs do not apply to a specific drug, users may reorganise their moral notions so as to permit its use.

Becker's work helped set the tone for much of what was to follow. His focus on subcultural perspectives was developed by Harold Finestone whose essay 'Cats, kicks and colour' has been described as being 'much more important, substantive and prophetic' than Becker's work on marihuana use (Sumner, 1994, 193). Finestone (1964) studied the world of Chicago's young, black, heroin users and described a section of African American culture which posited 'cool' and 'kicks' as an adjustment to segregation and discrimination. Out of the frustration and rage experienced by the 'sacrificed generation', the 'cat' emerged as the personification of an expressive social movement which rejected the values of the dominant culture and developed a sense of superiority over the 'square' world. Adopting an aesthetic of sharp clothes and cool jazz, the 'cat' chose to live by the 'hustle' rather than work: heroin offered him (the 'cat' was invariably described as being male) the ultimate 'kick' as it provided a vehicle through which he could place himself beyond the comprehension of the 'square'.

Other writers went on to develop Becker's interest in social control and it was here that the sociology of drug use coincided most strongly with new deviancy theories. Edwin Schur (1965) argued that for 'crimes without victims', such as homosexuality, prostitution, abortion and drugtaking, laws were bound to meet with very limited success. A claim which was echoed by Troy Duster (1970, 244):

Drug use is engaged in privately, not publicly, and there is no party to the act who has an interest in being the plaintiff. For these reasons the law will not be effective in bringing about a change in behaviour or morality of the law violators. Thus, millions of dollars are spent in a fruitless attempt to stamp out the problem, that could better be used upon some constructive programme. At the very least, the negative gain would involve the elimination of the pursuit of an impossible task.

Duster described how, in America, moral outrage against drug use was applied selectively against socially vulnerable groups: while the middle-class, white addict was regarded as a medical problem, the lower-class black addict was viewed as an object of extreme hostility. Schur (1963, 1969), meanwhile, was particularly concerned with the way in which American drugs policy created illicit heroin markets, arguing that prohibition had secured a kind of monopoly for suppliers who were prepared to break the law. By generating high prices, he argued, illicit markets had almost completely driven heroin users out of

‘respectable’ society, pushing them into a subculture of crime and addiction: ‘By defining him as a criminal, we have pushed the addict in the direction of becoming one’ (1969, 213). Like Alfred Lindesmith (1965), Schur favoured the ‘British System’ which treated addiction as a sickness and supplied heroin free of charge through legally designated channels. This medically oriented policy, he argued, helped to keep the situation within manageable limits as, in Britain, the number of heroin addicts was relatively small, there was virtually no illicit market in heroin and little or no associated crime. A similar perspective was offered by Leslie Wilkins (1965) who used the notion of deviancy amplification to explain differences in heroin use in Britain and the USA.

Building on the foundations provided by Becker and others, Jock Young (1971) formulated the most fully developed analysis of drugtaking from the new deviancy perspective. In *The Drugtakers*, he was principally concerned with the ‘social meaning of drug use’ and set about challenging the ‘absolutist monolith’ which dominated contemporary thinking and which considered drug use as a disease found at the edges of society among the ‘sick’ and undersocialised. According to Young such a perspective exaggerated the importance of drugtaking to those involved and mistakenly sought to explain users’ behaviour solely in terms of the pharmacology of the substances that they used. In opposing such claims, he rejected the idea that there is anything inherently deviant about drug use and adopted a relativist position (1971, 50):

To act in a certain way then can be *simultaneously* deviant and normal depending on whose standards you are applying. In this perspective, the smoking of marihuana may be normal behaviour amongst young people in Notting Hill and deviant to, say the community of army officers who live in and around Camberley.

From this stand-point drug use could not be explained away as the result of pathology, either individual or social, as it was considered to be meaningful behaviour, involving choice. As an alternative, Young developed a subcultural perspective based on a socio-pharmacological approach. Society, he argued, is made up of a large number of groups or subcultures which offer solutions to the problems that are generated by the social position of its members. While different groups have different problems, drugs offer a common means of problem solving. Psychotropic or mood-altering substances are valued because

they are pharmacologically suited to realising certain culturally defined aspirations: they may, for example, provide a source of relaxation and enjoyment or they may help users forget their workaday worries. A specific form of drug use starts because it is available and pharmacologically suited to a given problem but, thereafter, its effects are restructured by the relevant subculture, so that: 'The *meaning* of drugtaking has to be sought in the context of the group's values and worldview' (1971, 124). Where a problem has no apparent solution individuals may start to use substances in a way which differs from that envisaged within their culture of origin. Crucially, however, any new solutions will be related to the culture of origin as the old provides a 'moral springboard' for the new.

While emphasising the importance of the group's values and worldview, Young noted that a broader focus is required if the phenomenon of drugtaking is to be explained. We must, he argued, look beyond the 'immediate origins' of such behaviour to identify its 'structural origins'. That is, we should relate the subculture to the 'total society' and seek to explain the 'immediate origins' of drugtaking in terms of broader social processes. In developing this analysis, Young (1971, 124) focused on the notion of subterranean values, arguing that 'drugtaking is almost ubiquitous in our society...it is only the type and quality of psychotropic drugs used which varies'. Alcohol, he argued, is commonly used to gain access to that area of subterranean values which is typically integrated into, and subsumed within, the cycle of productivity, while other drugs, in the hands of those who disdain the work ethic, provide a route to 'more radical accentuations of subterranean reality' (1971, 137).

Drawing heavily on the labelling perspective, Young placed social reaction at the centre of his theory of drugtaking. Modern industrial societies, he argued, are prone to deviancy amplification because they are highly segregated and specialised. The police, psychiatrists and other 'experts' mediate contact between the community and deviant groups, leaving 'normal' citizens with little direct contact with such groups and dependent on the mass media for information. This introduces an important source of misperception as the mass media is shaped by an institutionalised need to create moral panics. The media, along with 'moral crusaders', experts and law enforcement agencies play a leading role in initiating

social reactions against drugtakers. Motivated by a mixture of self-interest, moral outrage and apparently 'humanitarian' impulses, these groups approach drug use from an absolutist perspective. Crucially, they either have little direct contact with drugtakers or have the type of contact that reinforces, rather than challenges, stereotypes. Consequently social reaction is 'phrased in terms of stereotyped *fantasy* rather than accurate empirical knowledge of the behavioural and attitudinal *reality* of their [deviant] lifestyles' (1971, 182). Accordingly, the fantasy stereotypes of the powerful have a self-fulfilling quality and may be translated into reality as a result of deviancy amplification. Amplification may occur as social reactions increase the problems faced by deviants (anomie induced), inspire a sense of gross social injustice (rebellion induced) or increase their isolation from 'normal' society, thereby freeing them to develop their own norms and values (isolation induced).

The final chapter of *The Drugtakers* is given over to policy considerations and presents a powerful critique of the medical and legal imperatives that directed drugs policy. Without wholly rejecting the role of medicine, Young argued that social problems, such as drug use, require social solutions. He accepted, in the final analysis, that health risks constitute the most fundamental criterion of drug abuse, but insisted that harmfulness was not sufficient to justify criminalisation (1971, 222):

This is not to suggest that individuals should be forced to avoid actions which endanger their lives. Merely that they should be aware of the consequences of their actions. I am in complete agreement with J.S. Mill's dictum here. Namely that: 'the only purpose for which power can be rightly exercised over any member of a civilized community against his will is to prevent harm to others. His own good, either physical or moral, is not sufficient warrant.

From this starting point, Young went on to call for the restriction of legislation on the grounds that drug laws had proved damaging and unworkable. To legislate against victimless acts carried out privately and willingly, he argued, is fruitless and counter productive because it creates a black market, increases drug prices and adulteration and invites criminal involvement. While recognising that laws may be useful in protecting users, Young emphasised that they cannot direct or stamp out consumer demand or illicit supply. In order to avoid a vast amount of unnecessary misery and hardship, he concluded, policy should concentrate on adjusting drug users' habits by suggesting alternative drugs or

safer methods of use: 'We must learn to live with psychotropic drug use; it is only by treating citizens as responsible human beings that any sane and long-lasting control can be achieved' (1971, 222). This, in Young's view, meant avoiding scapegoating and deviancy amplification in favour of what has come to be known as harm minimisation. Most presciently, his rules for a 'sane and just policy' included the following:

- *Maintain cultures*: subcultures which involve drug use often have a body of stipulations and controls which govern such behaviour and it is vital that drug use is enmeshed in a system of norms and controls if negative effects are to be avoided. To control the amount, type and administration of drugs requires sound knowledge accumulated over time and it is strongly dysfunctional to harass and undermine existing drug subcultures. In the cure of addiction or the treatment of bad trips, non-professional people from the respective subcultures are often more successful than medical professionals whose values are alien and knowledge sadly inapplicable.
- *Positive propaganda*: most information fed to the public about the nature and effects of drugs is inaccurate and this results in widespread scepticism. As young people learn from the experience of friends that the dangers of drug use are routinely exaggerated the credibility of much of the literature and of traditional authority figures is lost. Members of drug subcultures become cynical about outside information. Given that law enforcement has failed to curb drug use authoritative facts about the effects of drugs should be fed into the drug subculture itself, for it is this subculture that has the only viable authority to control the activity of its members. Information aimed at controlling drug use must be phrased in terms of the values of the subculture, not in terms of the values of the outside world.

From scepticism to normalisation

The Drugtakers represented the culmination of new deviancy theories engagement with the sociology of drug use. Once these theories were displaced by more overtly political

perspectives, criminological interest in illicit drug use began to fade. Such was the extent of this collective disengagement that the chapter on drugs in the first edition of the *Oxford Handbook of Criminology* began with a quote lamenting the dearth of sociological research in the area (South, 1994). Just a few years later, however, in the equivalent chapter for the second edition, it was noted that this 'deficiency has been greatly remedied in the intervening period' (South, 1997, 925). From the early 1990s, a plethora of national and local surveys began to show that somewhere between a quarter and a half of young adults had used an illicit drug at some time in their lives (ISDD, 1994). While cannabis was by far the most widely used illicit drug, these surveys also began to chart the influence of 'rave', which was evident in the increasing use of amphetamines and the return of the psychedelics, such as ecstasy and LSD. With widespread and increasingly diverse forms of illicit drug use, several commentators began to emphasise the need for new perspectives (Ruggiero and South, 1995; Shapiro, 1999; South, 1997; 1999).

The call for new perspectives has been developed most fully by Howard Parker, Fiona Measham and Judith Aldridge on the basis of the North West Longitudinal Study (Measham et al., 1994, 1998 and 2001; Parker et al., 1995, 1998, and 2002; Williams and Parker, 2001). These authors have been particularly critical of dominant psychological perspectives, which, they contend, have little to offer because they were developed at a time when drug use was atypical and tended to be limited to delinquent and disordered young people. Although their rejection of 'positivist psychology' and its preoccupation with 'risk factors' is reminiscent of new deviancy theories, Parker et al., pay very little attention to this earlier body of work. Neither Howard Becker nor Jock Young are specifically mentioned in their review of sociological perspectives, although the general value of the appreciative stance associated with deviancy theory and interactionist perspectives is noted. In the final analysis, established theories were said to struggle to function in the context of widespread recreational drug use, with the result that (Parker et al., 1998, 20-21)¹:

¹ The terms recreational and problem drug use have been used throughout this thesis because they help to distinguish between different patterns of use even though the distinction between them may be blurred. Recreational drug use describes that which is geared towards pleasure or leisure and is often used to denote the use of ecstasy and other 'dance' drugs (www.drugscope.org.uk). Problem use is that which results in

...we have no tailor-made theoretical perspective to answer the *why* questions...The disciplines which would have been expected to explain such significant increases in adolescent drug use have simply been left behind by the pace of social and behavioural change. We thus face the daunting task of attempting to construct such an explanatory framework ourselves.

In an attempt to provide such a framework, Parker et al., went on to develop the claim that illicit drug use is becoming normalised among young people. Their position was stated in its most authoritative and straightforward form when they claimed: 'Over the next few years, and certainly in urban areas, non drug-taking adolescents will be a minority group. In one sense they will be the deviants...for many young people taking drugs has become the norm' (1995, 26). A revised and rather more cautious formula was provided subsequently, based on the claim that (1998, 153):

Normalisation in the context of recreational drug use cannot be reduced to the intuitive phrase 'it's normal for young people to take drugs'; that is both to oversimplify and overstate the case. We are concerned only with the spread of deviant activity and associated attitudes from the margins *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...So normalisation need not be concerned with absolutes; we are not even considering the possibility that most young Britons will become illicit drug *users*. It is quite extraordinary enough that we have so quickly reached a situation where the majority will have tried an illicit drug by the end of their teens and that in many parts of the UK up to a quarter may be regular recreational users.

With this move the authors of the normalisation thesis became rather more circumspect about the extent of the processes they described. At first, they linked normalisation to the rise of ecstasy culture, claiming that drug taking 'involves a wide range of drugs, *especially* dance drugs' (Measham et al., 1994, 310, original emphasis) and suggesting that the arrival of the 'rave' and 'pay party' scene in the late 1980s was 'the watershed whereby drugs moved from subcultural status to become part of mainstream youth culture' (Parker et al., 1995, 24). A few years later, however, they noted that their thesis referred primarily to the use of cannabis, nitrates and amphetamines and only 'equivocally' to LSD and ecstasy

social, psychological, physical or legal problems due to intoxication, regular excessive consumption or dependence (Lloyd, 1998). This term is often used in connection to the most harmful drugs, particularly heroin and crack cocaine.

(Parker et al., 1998, 152). The previous emphasis on the 'normalization of recreational drug use' (Measham et al., 1994, 310) gave way to the 'normalization of "sensible" recreational drug use' as it was noted that stimulant-dance drugs are consumed sparingly and that the excesses of recreational poly-drug use, which are accepted in the partying - clubbing scene, 'are not as acceptable outside this semi-private setting' (Parker et al., 2002, 941 and 960). Regular users who move into combination drug repertoires were said to form a 'a discrete minority' (Parker et al., 1998, 154) and to present a 'conundrum' for the normalisation thesis: 'outside club land, their poly-drug use and 'risky' nights out potentially clash with the notions of responsible, sensible recreational drug use which is at the core of our conceptualization' (Parker et al., 2002, 947). Nonetheless, the dance drug scene continued to be considered part of the normalisation process, 'not in its origins but because it is now sustained by migration from the adolescent drugs pathways we have described' (Parker et al., 1998, 154).

As they refined their arguments, Parker et al., delineated the main elements of the normalisation thesis more clearly than before. Reflecting the behavioural focus of their earlier work, they noted that significant increases in availability and accessibility had provided the basis for unprecedented increases in drug trying and drug use: 'young Britons have become, in less than a decade, such determined consumers of 'recreational' drugs that we can begin to talk about the normalisation of *this* type of drug use' (1998, 151, original emphasis). That a quarter of the young people in the North West cohort had become regular drug users was considered to be 'a remarkable proportion and a robust measure of normalisation' (1998, 154). The normative nature of drug trying was also said to be evident from the disintegration of traditional distinctions between users and non-users. While socio-demographic characteristics were no longer considered to serve as strong predictors of illicit drug use, it was also argued that such behaviour can not be explained in terms of academic failure, delinquency or low self-esteem. Rather than viewing drug use as the result of individual pathology, the authors of the normalisation thesis emphasised the rational nature of young people's decision making processes, which, they claimed, are based on recognisable cost-benefit assessments.

Alongside the continued behavioural focus, the normalisation thesis came to pay much greater attention to attitudinal and cultural dimensions. According to Parker et al., (1998) the extent to which abstainers and ex-triers accommodate recreational drug use is an essential dimension of normalisation. Because drugs no longer belong to an unknown subcultural world, abstainers cannot simply escape encounters with drugs and drug users. As a result, nearly all young people are 'drugwise' and most abstainers become pragmatic, accommodating their peers' drug use providing it does not cause harm to others. Important changes have also been noted in relation to young people's future intentions. Occasional drug trying in adolescence by well-adjusted young people has traditionally been interpreted as an example of 'normal' adolescent experimentation, rule testing and rebelliousness (see, for example, Plant and Plant 1992). While recognising that these notions still have some value, the authors of the normalisation claim that recreational drug use within the North West cohort continued to escalate into young adulthood and persisted beyond traditional markers (Parker et al., 1998; Williams and Parker, 2001). They thus identify open mindedness about future drug use, often by young adults who abstained throughout their adolescence, as a further dimension of normalisation. The apparent liberalism of youth is, moreover, contrasted with the 'shock' and 'outrage' that is said to characterise adult reactions (Measham et al., 1994, 311; Parker, et al., 1998).

In the more recent versions of the normalisation thesis considerable emphasis has been placed on the cultural and social accommodation of the illicit. According to Parker et al., (1998, 2002) British youth culture has accommodated and, perhaps, even facilitated recreational drug use by absorbing and accommodating the language and imagery of drugs via the fashion, media, music and drinks industries. The blurring of the licit and the illicit, which is exemplified by young people's 'pick-and-mix' approach to drinking and recreational drug use, constitutes an important aspect of normalisation. There are, in addition, said to be multiple indicators that recreational drug use is being accepted as a 'liveable with' reality by wider society: the use of illicit substances such as cannabis and cocaine alongside alcohol as part of weekend relaxation is now routinely referred to in television dramas and serials; drug-taking adventures are a key source of inspiration for stand up comedy and youth movies; drugs realities are discussed in youth magazines in

wholly practical ways; and drug-taking by film and popular music stars is increasingly described in neutral rather than condemnatory ways.

Theorising change and explaining normalisation

In their attempts to explain the normalisation of drug use, Parker et al., drew on recent theories of social change. This is significant because it constitutes a decisive break with criminology and the early sociology of drug use, giving rise to a very different understanding of normalisation. According to the labelling perspective, normalisation represents one of a number of possible outcomes when an audience is confronted with instances of rule-breaking. By virtue of its reaction, the audience may redefine stigmatised or 'deviant' behaviour so that it need no longer be managed as deviant. As a result, rule-breaking may take the form of 'normal trouble', whereby 'improper activities' are frequent enough to be 'simply shrugged off or ignored' (Cavan, 1966, 18) or may even become 'the standard, taken-for-granted substance and form of acts within the setting' (Rock, 1973, 84). Such is the ability of the audience to redefine deviant phenomena that it generates possibilities for subcultural formation: being labelled 'deviant' creates problems which those who have been so labelled may solve by joining together to form subcultures that provide social support for deviant behaviour and protection against the outside world (Downes and Rock, 1988; Braithwaite, 1989). This is precisely what Becker (1963) described when he explained how membership of a marihuana-using-group provides access to the drug, as well as to rationalisations and justifications that enable members to circumvent conventional moral controls.

What Parker et al., (1998 and 2002) mean by normalisation is very different, not least because they reject the link with subcultural formations. Drawing on developments in Cultural Studies (see Redhead, 1993 and 1997), they argue that the 1950s to 1980s were, if anything, characterised by 'subcultural' drug use, but that new patterns of consumption reflect the fragmentation of subcultural youth scenes. Because recreational drug use has gone from being a small minority to a majority activity, subcultural theory is said to struggle and, because normalisation concerns the accommodation of previously 'deviant'

activities into the mainstream, it is said to sit uncomfortably with subcultural explorations. Whereas the labelling perspective and early sociology of drug use viewed normalisation as a contingent process based on negotiation between social actors in bounded situations, Parker et al., seem to see it as a pre-given product of macro-social forces. Given the 'moribund' nature of existing perspectives, they felt 'obliged to turn to more general perspectives on adolescence and social change' (1998, 30) and this led them to link the normalisation of drug use to post-modernity.

Post-modern theory has been described as complex, diverse and as lacking a critical consensus (DeKoven, 2004). While some theorists maintain that the term post-modern should be reserved for a particular aesthetic style or form of representation, others insist that it should be used as a 'periodizing concept'. Even among the latter there is considerable disagreement over the timing of this development, with the emergence of post-modernity being variously ascribed to the early twentieth century, to the aftermath of World War II, to the 1970s or 1980s. To some theorists, post-modernity represents a new historical era, which signifies a change that is just as radical as the transition from traditional to modern society; to others, including Jean Francois Lyotard (1984) and Jean Baudrillard (1988), it marks the collapse or exhaustion of modernity; and yet others maintain that the key elements of modernity are assumed and incorporated within post-modernity (DeKoven, 2004). Despite the absence of a critical consensus, it is possible to identify common themes in post-modern social theory. Post-industrialism and the rise of the information society, the growth of consumerism, and the apparent triumph of liberal-democratic capitalism in the wake of the Cold War all feature strongly in this body of work and have been heavily implicated in the shift from modernity to post-modernity (Dodd, 1999). From a sociological perspective, moreover, post-modern society can be understood in terms of fragmentation and de-differentiation. Whereas modernity was predictable and uniform, post-modernity is fluid and diverse: boundaries and distinctions created through social differentiation have been blurred and structural analysis, based on concepts such as class and sex, is said to have lost its validity.

Some of the tensions that are evident in post-modern social theory are also reflected in the contrasts that are drawn between post-modernity and late modernity. The concept of post-modern society implies a break with modernity and this has been viewed by some as a radical break which signifies the start of an entirely new epoch. Others have been considerably more cautious, preferring to use terms such as 'high modernity' or 'late modernity' to emphasise that recent developments represent changes within modernity (Giddens, 1990, 1991; Beck, 1992). As well as challenging the idea of a revolutionary break with the past, these theorists reject the theme of de-differentiation. Social structures, they note, continues to play an important role, though collective ties based on work, class and family are said to have weakened considerably. The demise of these ties, it is claimed, has given rise to a process of individualisation which means that people must now reflexively construct their own social identities. As work, occupation and family have receded into the background, consumption and lifestyle are said to have become increasingly central to our sense of self.

The finer points of debates about post-modernity and late modernity need not concern us unduly. What is of most concern here, is the way these concepts have been used to explain the changing nature of illicit drug use. In the initial version of their thesis, Parker et al., (1995) linked normalisation to post-modernity, which, they noted, revolved around the question of whether 'advanced' post-industrial societies are being reshaped into a new formation that is so different from that which came before, in the 1960s and 1970s, that we can usefully talk about the end of an epoch rather than the evolution and development of the same sort of social structure. They went on to suggest that post-modernity is characterised by a fracturing of moral authority, increased globalisation, an emphasis on consumption rather than production and a reshaping of class and gender relations. Crucially, the apparent disintegration of traditional social class and gender distinctions led them to conclude that: 'perhaps drugs consumption best depicts what is under way; for illegal drugs have become products which are grown, manufactured, packaged and marketed through an enterprise culture whereby the legitimate and illicit markets have merged' (1995, 25). In their subsequent work, Parker et al., (1998, 157) sought to side-step theoretical debates about the nature of modernity, preferring to concentrate on the

‘universally agreed implications of growing up in modern times’. At this stage, they suggested that the normalisation of recreational drug use was consistent with Ulrich Beck’s (1992) notion of individualisation and the risk society. Nonetheless, their emphasis on the ‘dramatic’ and ‘unprecedented’ nature of recent trends and the disintegration of traditional gender and social class distinctions sat more comfortably with the concept of post-modernity than late modernity. Within a few years, moreover, they had returned to their previous emphasis on ‘post modern times’ (Parker et al., 2002, 959).

A critique of the normalisation thesis

The normalisation thesis has been challenged on a number of fronts, with criticisms being levelled in five main areas: the prevalence of drug use, trends in drug use, attitudes to drug use, decision making processes and political/ideological implications (Shiner and Newburn, 1996, 1997, 1999; Shiner, 2000; Pearson and Shiner, 2002). Some early criticisms were implicitly absorbed into later versions of the thesis (Barton, 2003; and see below) and may seem less pertinent now than when they were first made. Much of the critique has gone unanswered, however, and significant disagreements remain.

One of the main criticisms of the normalisation thesis is that it exaggerates the extent of illicit drug use. Using data from the North West cohort, the BCS and YLS, Shiner and Newburn (1997, 1999) showed that young people were fairly evenly divided between those that had used illicit drugs and those that never had. They also highlighted the dynamic nature of drug use, demonstrating how lifetime measures² exaggerate the extent of such behaviour. When measures based on shorter timeframes were used evidence of normalisation became even more elusive and regular use, however it was defined, remained a minority activity (see also, Ramsay and Percy, 1996). This pattern was especially pronounced in relation to some substances and early versions of the normalisation thesis were criticised for downplaying distinctions between drugs and for simplifying the decisions that young people make about what to use and what not to use. In particular, it was suggested that the impact of the rave scene had been overstated.

² Such measures indicate whether an individual has ever used a drug at any time in their life.

Critics of the normalisation thesis have also rejected the proposed link with post-modernity on the grounds that it fails to make sense of recent trends in drug use (Shiner and Newburn, 1999). Drawing on the international evidence, they note that rates of youthful drug use fell in the USA throughout the 1980s and that a similar decline has been evident in some European countries. Even in Britain, increases in drug use have not taken the sudden or spectacular form that is sometimes suggested. The YLS has been credited with providing the 'most persuasive evidence of increased drug use' (Parker et al., 2002, 946), but actually points to a fairly modest increase and even this is likely to be an exaggeration. Separate waves of the YLS were administered in England and Wales in 1992/3 and 1998/9 though they were not strictly comparable because the second wave focused on a slightly wider age group than the first and introduced a new method of data-collection that encouraged higher rates of disclosure (Graham and Bowling, 1995; Flood-Page et al., 2000)³. Even so, there was little evidence of a striking increase in drug use: the 1992/3 survey found that 24 per cent of 14-25 year olds had used an illicit drug in the previous year, while the 1998/9 survey found that 27 per cent of 12-30 year olds had done so. Far from pointing to ever increasing levels of use, moreover, other recent surveys have indicated that drug use has reached a plateau and, for some substances, has even begun to fall (Ramsay and Partridge, 1999; Ramsay et al., 2001; Aust et al., 2002; Department of Health, 2003; Chivite-Matthews, 2005; Roe and Man, 2006)⁴.

³ The 1992/3 YLS was based on paper aided personal interviewing (PAPI) and the 1998/9 survey was based on computer aided self-completion interviewing (CASI). This presented a problem if comparisons were to be made as CASI is generally considered to give more accurate information. In order that trends could be assessed, 804 respondents to the 1998/9 survey were given the same paper questionnaire as had been used in 1992/3. Comparisons confirmed that offending had been disclosed at a higher rate by the CASI respondents. Unfortunately, drug use was excluded from the analysis which compared results from the two surveys based only on the PAPI responses (Stratford and Roth, 1999; Flood-Page et al., 2000).

⁴ The most recently published figures from the BCS indicate that, between 1998 and 2005/6, the proportion of 16 to 24 year olds who had used an illicit drug in the last year fell from 32 per cent to 25 per cent, though the prevalence of Class A drug use remained largely unchanged (Roe and Man, 2006). Notable differences were evident between substances: amphetamine, hallucinogen and cannabis use became less common during this period; cocaine use became more common; and ecstasy use remained stable. Although the most marked changes were evident in relation to cocaine and amphetamines they went some way towards off-setting one another: the proportion of 16 to 24 year olds who had used amphetamines in the last year decreased from 10 per cent to 3 per cent, but the proportion who had used cocaine increased from 3 per cent to 6 per cent.

A lack of comparable data for previous decades makes it difficult to assess change over a longer period, but critics of the normalisation thesis have argued that recent surveys can be used to make some comments about the likely nature of long term trends. Assuming that most people who use drugs do so during adolescence and early adulthood - and all the indications are that they do - then changes over time will be reflected in differences between age cohorts. According to Shiner and Newburn, (1999, 149) the trend implied by such differences 'is one of evolution over an extended period rather than of a sharp, fundamental structural shift...and do[es] not support the contention that changes in patterns of drug use since the 1950s are indicative of major epochal change'. This interpretation is further supported by the limited historical evidence that is available. As the 1950s came to a close, the apparent availability of heroin and cannabis within the bohemian jazz cultures of London's West End prompted the Ministry of Health to establish the Inter-Departmental Committee on Drug Addiction, headed by Sir Russell Brain. In its initial report, published in 1961, the Brain Committee concluded that drug supply in Britain was almost negligible, but gave a revised opinion four years later when it noted a marked growth in use (South, 2002). This growth was based largely on marijuana and continued through to the end of the decade and beyond. As Young (1971, 11) reflected:

...ten years ago the occurrence of marijuana-smoking [in Great Britain] was minute and largely limited to first generation West Indian immigrants. Since that time there has been an unparalleled growth in use, occurring largely among young people, to such an extent that the Wootton Report estimated that between 30,000-300,000 people in Britain had used marijuana. There can be little doubt that the actual number is considerably larger than the latter figure and that this number is steadily growing.

By the early 1970s, marijuana use had become sufficiently common for Young (1971, 50) to suggest that it 'may be normal behaviour amongst young people in Notting Hill'. From around this time a handful of surveys also began to document evidence of fairly widespread drug use among young people in various other locations. An early survey of higher education students in Leicester found that nine per cent reported having used an illicit drug at some time in their lives (Binnie and Murdock, 1969). A few years later, a survey of 17-24 year olds in Cheltenham indicated that a fifth had used cannabis, LSD or amphetamines (Plant, 1973) and a study of medical students in Glasgow indicated that 14 per cent had

used illicit drugs (McKay et al., 1973). Another university-based study found that a third of respondents had used illicit drugs (Kosviner and Hawks, 1977) and a second Glaswegian study of 16-24 year olds contacted through schools, hospital casualty departments and STD clinics reported that 31 per cent had done so (Fish et al., 1974). In the early 1980s, the first British Crime Survey indicated that 16 per cent of 20-24 year olds in England and Wales had used cannabis (Mott, 1989), while a survey commissioned by the *Daily Mail* newspaper reported that 28 per cent of 15-21 year olds in London had done so and that 10 per cent had used amphetamines (NOP Market Research Ltd, 1982). During the second half of the decade, national data suggested that around a quarter to a third of young people had tried solvents or illegal drugs by their twentieth birthday (ISDD, 1993 and 1994).

None of this is to deny that the second half of the twentieth century saw very substantial increases in drug use. Nor is it to deny that the late 1980s and early 1990s witnessed a significant degree of diversification, whereby increases in the use of established drugs like cannabis and amphetamines were accompanied by the rise of ecstasy and LSD use, albeit from an extremely low baseline (ISDD, 1994). Nonetheless, the key point to emerge from this review of British drugs surveys is that recent increases are part of an extended historical trend. To suggest that the 1980s or 1990s witnessed an unprecedented upsurge in drug use is to ignore the very substantial increases that occurred in previous decades.

As well as challenging the normalisation thesis on the basis of levels and trends in drug use, critics of this perspective have also emphasised the importance of the normative context in which such behaviour occurs. According to Shiner and Newburn (1997, 519):

At the heart of the normalisation thesis, we would suggest, is a confusion between normalcy and frequency. There has been a tendency for self-reported behaviour to be taken at face value and for insufficient emphasis to be placed on the normative context of that behaviour. Normative behaviour is not necessarily the most frequently occurring pattern, but is that which conforms to popular expectation. This distinction is, however, often ignored in discourse about youthful drug use. It is important to recognise that social norms, as prescriptions serving as common guidelines for social action, are grounded in values and attitudes rather than behaviour... From this perspective, what young people think is at least as important as what they do.

The normative context of drug use was initially explored on the basis of depth interviews with young people (Shiner and Newburn, 1996, 1997; Shiner, 2000). According to Shiner and Newburn (1996, 1997) the young people they spoke to generally viewed drug use with concern and managed it as a problematic, or potentially problematic, activity. Although some made positive associations between drug use and, for example, increased confidence, many expressed the kind of restrictive views which are often held to be characteristic of the adult world. Such views were strongest among non-users and reflected concerns about health implications, fear of addiction and losing control, financial cost, potential damage to relationships with significant others (including parents) and the perceived link with criminal activity. Although non-users generally felt that challenging drug-using behaviour by their peers was inappropriate and likely to be counter-productive, there was considerable evidence of peer selection: that is, of young people seeking out and developing friendships with people that are like them (Coggans and McKellar, 1994) and of non-users avoiding meaningful relationships with their drug using peers.

Surprisingly, perhaps, the young people who had used drugs expressed similar views to those who had not. Users revealed many of the same concerns as non-users and described clear rules about what, where, why, and how much people should use. According to Shiner and Newburn (1996, 1997) the principal difference between young drug users and non-users was the development, by the former, of neutralisation techniques which allow them to continue using drugs without abandoning their affiliation to consensus values. These techniques of neutralisation commonly focused on the differences between substances - the substances being used are not harmful, they are not really drugs and not enough is being used to get addicted. What was being implied by such claims was that there are no serious consequences from the drug(s) being used and that, by extension, the user was making rational and responsible choices.

Whilst highlighting the embedded rationality of young people's decisions about drugs, Shiner and Newburn (1996; see also Shiner, 2000) went on to challenge the idea that such decisions involve rational calculation of costs and benefits. In doing so, they drew on the phenomenology of Alfred Schutz (1966, 1972). Schutz emphasised the habitualised nature

of human action, claiming that choice, involving dramatic rehearsal and calculation, only occurs rarely and almost never in the context of everyday life. As well as being costly, calculation is superfluous because knowledge about the world is 'automatically at hand' and offers a limited number of relatively rough but sufficient rules of thumb, or recipes, for typical behaviour in repeated typical situations. Because most situations are familiar, typical courses of action are generated routinely and individuals only begin a formal process of information collection when, and if, their existing rules of thumb break down. This does not mean that human behaviour is irrational, however, because recipes involve the 'automatic' anticipation of consequences and, as such, are pre-calculated: they can, and should, be traced back to the logic of selection embedded in the meaningful orientation of action (Srubar, 1993). In their application of these ideas, Shiner and Newburn argued that young people make decisions about drugs without dramatic rehearsal and calculation based on 'rules of thumb', which are generated routinely as part of everyday life. These rules of thumb are, they noted, based on images, ideas and information which come from a variety of sources including magazines, newspapers, television programmes, parents and friends.

In his later work, Shiner (2000) described how young people's rules of thumb change as they move through their teenage years and become more familiar with drugs and drug users. Although some of the youngest participants in this study - who were 12 years old - knew older drug users, drug use was very unusual within their peer networks and their rules of thumb were based on a normative perspective in which drug use was viewed in wholly negative terms and drug users were considered to be dangerous outsiders. From the early teens, increased contact with drugs and drug users provided young people with new information which challenged this normative perspective. As a result some of the older participants in the study adapted their rules of thumb and incorporated neutralisation techniques which accommodated their own drug use and/or that of their friends.

The normative context of drug use has also been examined on the basis of recent public attitude surveys. Pearson and Shiner (2002) focused on perceptions of drug-related harm and found that not all adults conform to the conservative characterisations presented in much of the sociological literature. Indeed, their analysis called into question the very idea

of a generation gap because it suggested that young people's judgments about harmfulness come to resemble those of adults ever more closely as they move through adolescence. As familiarity with drug users increased, cannabis was more clearly distinguished from other illicit drugs so that, by the mid-teens, young people's perceptions of drug-related harm were remarkably similar to those of adults. Both groups appeared to be thoroughly convinced of the harmfulness of heroin, cocaine and ecstasy and considered cannabis to be considerably less harmful than other illicit substances. On this basis, Pearson and Shiner noted that young people who use any other illicit drug than cannabis do so in a general context in which the vast majority of their peers, as well as their elders, are thoroughly convinced of the potential harmfulness of their actions. As such, they concluded that any shift towards normalisation has been much more limited and ambiguous than is allowed for by the existing literature. Gould and Stratford (2002) also considered perceptions of harm, but they did so as part of a more general focus on legal and moral dimensions. They found that attitudes to cannabis are becoming more liberal and pragmatic, but that this is not the case in relation to heroin and ecstasy. While suggesting that there is some evidence to support the normalisation thesis in relation to cannabis, these authors noted that attitudes to this drug are becoming more liberal across all age cohorts, including adults. A pattern which they explained in terms of increasing levels of use and familiarity, dating back to the 1960s.

Finally, while the normalisation thesis has been challenged primarily on the basis of empirical considerations, concerns have also been raised about its political or ideological implications. Based on their empirical observations, Shiner and Newburn (1999) argued that the discourse of normalisation reinforces adult concerns about the problematic nature of youth and runs the risk of feeding 'respectable fears' (Pearson, 1983). They concluded by calling for a set of ideas, and a way of expressing them, which is sensitive to changes in patterns of drug use and to differences between youth subcultures, but which also takes seriously the non-user and the concerns that many young people continue to have about illicit drug use.

Reactions to the normalisation 'debate'

Reactions to the normalisation 'debate' have tended to divide into two distinct positions. While many commentators have readily accepted the idea that illicit drug use is undergoing a process of normalisation, others have sought to negotiate a middle path between this perspective and its critique. Despite the attempts that have been made to find a compromise, the first position has tended to predominate and the normalisation thesis has become something of an academic orthodoxy (see Coffield and Gofton, 1994; Hirst and McCamley-Finney, 1994; 6 et al., 1997; Hammersley et al., 2003). With the diffusion of this thesis, moreover, some of its more tentative aspects are in danger of being forgotten and a much fuller and far-reaching process of change has been envisaged, leading to claims that the use of ecstasy and cocaine has 'become normalised' (Hough, 2001, 431) and that: 'For British youth Ecstasy has become a milestone on the road to adulthood like cutting your teeth, riding a bike and losing your virginity' (Wright, 1998, 231). It is, perhaps, even a little misleading to talk of a 'debate' in this context because to do so implies a degree of exchange that has been largely absent. The authors of the normalisation thesis have 'scarcely addressed' the detailed criticisms of their work (Ramsay and Partridge, 1999, 57) and, though they may have absorbed some elements of the critique, they have not done so explicitly. On the few occasions these authors have directly considered the critique they have sought to deflect criticism by attempting to undermine and discredit the studies on which it is based (see Parker et al., 1998, 2002; Measham et al., 2001).

Similar silences can be found outside the immediate confines of the normalisation debate. Those who have drawn on the normalisation thesis have sometimes presented it as though it were uncontested, with little, if any, mention of alternative positions (see, for example, Shapiro, 1999; Hammersley et al., 2003). Where the critique has been acknowledged, moreover, it is sometimes caricatured and dismissed on quite spurious grounds. One recent reviewer implied that this critique was opposed to the 'qualitative paradigm' and complained that it was weakened by its 'moralistic tone' (Blackman, 2004, 145-6). At the end of an otherwise balanced account, another reviewer suggested that criticisms of the normalisation thesis have been overtaken by events because non-drug using adolescents

are now in a minority (Barton, 2003). Even if we ignore the way this suggestion simplifies the critique, it is difficult to sustain in view of recent trends (see earlier) and yet the reviewer maintains: 'It may be the case that the work of the Manchester group identified the beginnings of a social change, and one that seems to be gathering pace at a rapid rate' (Barton, 2003, 122).

The possibility of synthesis was first raised by Nigel South. He considered the critique to be 'convincing', but was equally persuaded by the 'intellectual and cultural dimensions' of the normalisation thesis and of the need for a 'new perspective' (1999, 6). The apparent tensions in this position were eased by his description of what the 'essentials' of such a perspective might be:

- drug use is, undeniably, of enormous contemporary importance, whether as symbol, social problem or fashion accessory;
- data, however challenged, indicate socially significant changes in patterns and degree of use over the past twenty years;
- while prevention efforts, peer influence and other factors will probably restrain and perhaps even stabilise rates of increase in drug use it is unlikely that they will reverse recent changes;
- the availability of drugs will not be significantly diminished;
- hence, the whole issue and persistence of drugs as a feature of everyday life has become and will remain 'normalised'. While drug use has not itself become the true norm, it has moved some way from the status captured by the term 'exception to the norm': from 'exceptionality' to being part of everyday life.

For South, the most significant thing about illicit drugs in late modernity is not simply the question 'how many people actually use them?', but is the sheer volume of related social

activity. Regardless of whether we use drugs, he argues, we all live in an environment saturated by references to, and images of, them. As a result drugs 'are simultaneously officially damned yet dragged ever more firmly into the everyday discourse of social life' (1999, 7).

Christopher Wibberley and Jason Price (2000) also challenged what they considered to be the unduly polarised nature of the normalisation debate. Suggesting that individuals have tended to take one 'side' or the other, they argued: 'Both sides of the debate over-egg the pudding in order to strengthen their case - leaving room for both sides to criticize the other's argument' (2000, 161). Based on the results of a school survey conducted in the Greater Manchester area, these authors went on to note: 'The conclusion that can be drawn is rather ambiguous in that it is *not abnormal* to have either tried or not tried an illicit drug by the end of compulsory schooling in the UK' (2000, 160). In a further development, such ambiguity has given rise to talk of 'differentiated normalisation', which, it is argued, 'allows for the ways in which different types of drugs and different types of drug use may be normalized for different groups of young people' (Shildrick, 2002, 36; see also: Pilkington, 2005).

Beyond academia

Elements of the normalisation thesis have gained considerable currency well beyond the boundaries of academia. Most notably, perhaps, an emphasis on the widespread and widely accepted nature of illicit drug use among young people has become a familiar feature of our cultural commentary more generally. Around the time that the normalisation thesis was first published, Irvine Welsh began to chronicle the adventures of the 'chemical generation' in a series of novels and short stories under such titles as *The Acid House* and *Ecstasy*. More or less simultaneously, a series of eye witness and journalistic accounts of ecstasy culture began to appear, among the most notable of which were those produced by the late Nicholas Saunders (1993 and 1995) and Matthew Collin with John Godfrey (1997). The interest of the mainstream media also started to increase as a new generation of young writers entered the profession having worked on a range of specialist magazines such as *i-*

D, *Mixmag*, *Jockey Slut* and *Muzik* (Collin with Godfrey, 1997)⁵. Dance pages were introduced into the weekly music press, club reviews appeared in newspapers, dance resources were posted on the Internet and new legal dance radio stations such as *Kiss FM* were established in London and Manchester. Crucially, this growing familiarity with ecstasy culture began to be reflected in mass media representations of drugs and drug users. *The Guardian* (July 25 1995) noted the 'opening of a generation gap', claiming that 'drug taking has become an integral part of youth culture and a significant part of the lives even of schoolchildren'. A message which it repeated following the death of Leah Betts (November 17 1995):

An underground movement, which started in 1988 with the advent of house music in this country, has almost invisibly expanded into a giant culture. The secret is out; the adult world has had thrust upon it the attitudes and the lifestyle of a generation it does not understand.

The events of January 1997 provided a further milestone in the development of this new media perspective. The New Year revelry had barely died down when Brian Harvey, then member of British band *East 17*, sparked one of the biggest drugs stories of the decade by speaking openly about having used 12 ecstasy tablets in one night, claiming that the drug is 'harmless' and 'makes you a better person' (*The Mirror*, 17 January 1997). The backlash against him was both swift and unforgiving. He was criticised by the Prime Minister in the House of Commons, furiously condemned by much of the media and isolated by the pop-music establishment. *East 17*'s records were banned by several radio stations and, ultimately, Harvey was sacked from the group. Amidst the controversy Noel Gallagher, mastermind of super-group *Oasis*, made the following statement to the press: 'As soon as people realise that the majority of people in this country take drugs, then the better off we'll all be...Drugs is like getting up and having a cup of tea in the morning' (*New Musical Express*, January 29 1997). Although condemned by some, Gallagher received considerable support for his intervention, some of it from unlikely quarters. In an article in the *London Evening Standard* (January 31 1997) entitled 'Why Noel is right about Drugs' A.N. Wilson, the normally conservative commentator, wrote:

⁵ Collin and Godfrey's own career trajectories reflect this process. They had both worked for *i-D* magazine and *The Face*, but, by the time *Altered State* was published, Matthew Collin was writing for *The Observer* and was international editor for *Time Out*, while John Collin was series producer of Channel 4's *Eurotrash*.

Whatever we would like to be the case, what he says is actually right. For the generation under the age of 40, drug-taking *is* normal. You do not need to watch 'concerned' television documentaries about housing estates in the North of England where tabs of LSD change hands for less than a small round of drinks, nor watch police raids at 'raves' where the dancers have all taken Ecstasy, to know this is the case.

In the media coverage that has followed, normalisation has tended to provide the assumptions around which stories are constructed, rather than giving them their explicit focus. In the week that three members of the pop group *S Club 7* were cautioned for smoking cannabis, *The Guardian* (March 23, 2001) claimed: 'Out in the real Britain, you'd be struggling to find a 21-year-old who hadn't puffed on a reefer at least once'. Almost as if to endorse this claim, revelations soon followed that Prince Harry had smoked cannabis when he was 17-years old. Under the headline 'Prince Harry Drugs and Drink Shock' *The Sunday Express* (January 13 2002) noted that: 'It is all a long way from the innocent days when the Prince of Wales himself made headlines all over the world after he sneaked out of Gordonstoun for a small glass of cherry brandy', before concluding:

[Prince William and Prince Harry] were both the sons of a mother who wanted them brought up as normal children.... The revelation that Harry last year dabbled in soft drugs may ironically be the best evidence that he is a truly normal wayward teenager.

Conclusion

Since first coming to prominence some 40 years ago, the sociology of drug use has developed sporadically. In Britain, Young's (1971) classic work on *The Drugtakers* was followed by a lengthy period of neglect which lasted almost quarter of a century. When academic interest in this area was finally rekindled it coalesced around a new orthodoxy which can usefully be understood in terms of a paradigm shift. Claims that established theories have been rendered obsolete have been matched by calls for new perspectives which recognise the normalisation of illicit drug use. Such claims have been widely endorsed and criticisms have tended to be ignored or deflected. The new orthodoxy raises important questions about both the nature of social reality and the representation of this reality and these questions provide a key focus for what is to come.

The following analysis grew out of the initial critique of the normalisation thesis and builds on this work in a number of ways. Where the critique previously focused on levels of use and trends over time, the current analysis concentrates on the social distribution of drug use in order to assess claims about the disintegration of traditional distinctions between users and non-users. What has, up to now, been an implicit part of the critique will also be made explicit. Whereas the normalisation thesis has been predicated upon the rejection of established perspectives, the critique has drawn on the earlier work of Becker, Matza and Schutz. In doing so, it implies that previous work has rather more to offer than is often claimed and this suggestion provides a central theme of my analysis. By highlighting the value of established perspectives, I will show that the normalisation thesis does not represent the radical departure that some have claimed. Indeed, this point has already begun to be made, albeit in a very general way. In its rejection of 'positivist psychology' and explanations that are rooted in the notion of pathology, the normalisation thesis reflects a long-standing criminological tradition which can be traced back through new deviancy theories and the American sociology of deviation to the pioneering work of the Chicago school. Further parallels will be noted in the course of the chapters that follow.

3

Methodology

Science does not aspire to godlike certainty: that would be more characteristic of religious fanaticism. All it provides is the best explanations in the light of the available evidence (Smith, 1994, 1046).

Recent research has paid considerable attention to estimating the extent of drug use, particularly among young people. While these efforts have substantially improved our knowledge in this area, the preoccupation with prevalence has meant that other important areas of analysis have been neglected. Little attention has been given to the social origins of drug use, for example, and to underlying causal processes. These are both areas I seek to address in this study. My analysis is based on two large-scale, nationally representative surveys covering the general household population of England and Wales - the 1998 British Crime Survey (BCS) and 1998/9 Youth Lifestyles Survey (YLS), with some additional use of the 1994 and 1996 sweeps of the British Crime Survey. In using these surveys, I have concentrated on establishing which of a range of characteristics are most important in predicting drug use and on distinguishing spurious relationships from those that are more direct. Given the design of the surveys, even these more direct relationships can not necessarily be considered causal, though causal inferences can be made on the basis of them (see Bryman, 2001). The range of potential predictor variables included in the analysis covered demographic characteristics, lifestyle indicators and life-course measures, which meant that both the symbolic meaning and structural location of drug use could be considered.

This chapter begins by assessing the self-report methodology that was used to elicit information about drug use, before going on to provide details about the specific surveys that were used and the analysis that was conducted. Particular attention is paid to demonstrating how recent cross-sectional surveys can be used to make judgements about the likely nature of change over time and the likely nature of life-course developments. There then follows a broader epistemological discussion which outlines what I describe as a

reflexive approach to quantitative social research. This approach seeks to defend quantitative methods by addressing some of the main criticisms that have been levelled at them. Such matters may seem remote from the rest of the thesis, but raise important questions about the relationship between theory and method. One of the main themes of the thesis is that new deviancy theories and related developments in the early sociology of drug use continue to offer considerable insight into contemporary drug use. This claim is developed almost entirely on the basis of the type of quantitative approach that new deviancy theorists opposed, however, and thus there is a potential dissonance between my method and my theory. The reflexive approach I describe represents an attempt to ease such tensions by sensitising quantitative methods to the new deviancy critique.

Measuring drug use

The early sociology of drug use was heavily influenced by the criticisms that new deviancy theorists levelled at the methods of mainstream criminology. These theorists rejected the then widely held view that social science should be conducted according to the methods of natural science and the impact that such thinking had on the early sociology of drug use was evident in the preference for ethnographic methods and the lack of interest in quantification (see, for example, Becker, 1963; Young, 1971). Recent developments have taken a quite different turn, however, with much greater emphasis being placed on quantitative methods. There has been no shortage of qualitative research into the meanings people attach to drugs and drug use (see, for example, Coffield and Gofton, 1994; Hirst and McCamley-Finney, 1994; Henderson, 1997; 6 et al., 1997; Wibberley, 1997; Shiner and Newburn, 1996, 1997; Measham et al., 1998; Parker et al., 1998; Shiner, 2000; Hinchcliffe, 2001; Pearson, 2001), but this work has tended to be overshadowed by an 'explosion' of drugs surveys (Ramsay and Percy, 1996, 3).

With the increased use of surveys, the self-report methodology has emerged as the principal measure of illicit drug use. Pioneered in the United States, this approach was initially developed as an alternative to criminal justice and treatment records, which, it was recognised, provide very little insight into levels and patterns of use in the general

population (Ramsay and Percy, 1996; Harrison, 1997). Although self-report surveys have obvious advantages over such sources they also have their own difficulties and limitations. As Fielding and Fielding (1986, 12) have noted, 'the most advanced survey methods themselves only manipulate data that had to be gained at some point by asking people', and particular doubts have been raised about the ability of surveys to provide accurate measures of illegal and stigmatised activities such as drug use. In addition to the standard difficulties of sampling bias, measurement error and faulty recall, respondents may be reluctant to disclose sensitive information about potentially embarrassing or self-incriminating behaviour (Harrison, 1997), while some may choose to exaggerate their levels of involvement in such activities (Plant and Plant, 1992).

Given the particular difficulties associated with measuring illicit drug use, the validity of the self-report methodology has been subject to fairly extensive assessment. As well as being tested on samples of known drug users, this approach has been assessed by checking responses against other sources of information, including official records (such as those kept by criminal justice and treatment agencies) and reports from family, friends and counsellors. Biological tests have provided the most important benchmark, however, with urine analysis and hair testing being the most commonly used. Although these tests are assumed to be more accurate than self-report methods, they have their own limitations. Urine analysis can only detect illicit drugs for a fairly brief period after they have been consumed, varying from two days to four weeks depending on the substance, while hair testing is surrounded by concerns about contamination and a lack of clarity over dosage. Crucially, the accuracy of hair analysis varies between substances and inconsistencies have been noted between this method and urine analysis (Harrison, 1997).

Existing research indicates that the self-report methodology is a reasonably valid measure of drug use in the general population, but is less accurate in relation to specific subgroups (see Harrison, 1997). Early studies routinely produced validity rates of between 70 per cent and 90 per cent, encouraging a high degree of confidence. More recent studies, based on arrestees and individuals in treatment, have raised some doubts about the efficacy of the self-report methodology, however, though these doubts have more to do with the specific

context than the method per se. The self-report methodology appears to be least reliable in criminal justice settings which is, perhaps, unsurprising given that there are clear disincentives to honest reporting in this setting. Arrestees risk being heavily penalized if their drug use is known to the authorities and consequently are likely to be less candid than the general population. Among individuals in treatment, the self-report methodology has been found to be more reliable at intake than follow-up, possibly reflecting a desire among respondents not to disappoint the service or risk being excluded from future treatment.

A range of other indicators support the suggestion that self-report measures are reasonably valid when used in relation to the general population. Questions about non-existent 'dummy' drugs are routinely included in most surveys and responses to them suggest that there is very little over-reporting (Ramsay and Percy, 1996; Flood-Page et al., 2000). In addition, drugs surveys on both sides of the Atlantic have demonstrated a high degree of internal consistency (Johnston et al., 1995; Parker et al., 2002), while longitudinal studies have shown that relationships between variables persist over time (O'Malley et al., 1984) and that individuals are reasonably consistent in their reporting of drug use. Researchers in North America have reported quite modest recanting rates for illegal drug use though they suggest that concealment may increase with age (Johnston and O'Malley, 1997). In Britain, Parker et al., (2002) report very high rates of inter-year consistency across their longitudinal study despite some evidence of biographical reconstruction, particularly in relation to solvents. They noted that at 14 years old sniffing solvents was defined as a drug experience, while at 17 years old it was thought of as a childish act and sometimes went unreported.

According to Harrison (1997) some general conclusions may be drawn about the validity of self-reported drug use in a survey environment. It is reasonably clear that rates of disclosure vary according to the nature of both the drug use and the survey. Several studies have confirmed the social desirability hypothesis by showing that drug use involving the most heavily stigmatised substances, such as heroin, is the least validly reported. In addition, the more recent the drug use the greater the bias as respondents are generally less willing to report drug use that occurred in the very recent past. The degree of

confidentiality afforded to respondents has also been found to influence the accuracy of self-report data and it is generally the case that maximizing confidentiality improves validity. Self-administered questionnaires tend to produce higher prevalence rates (and ostensibly, more valid data) than interviews in which the respondent has to say their response out loud. More specifically, Computer Assisted Self Interviewing (CASI), which allows respondents to provide answers via a keyboard, yields higher rates of disclosure than pencil-and-paper surveys, presumably because it provides a heightened sense of privacy (Lynn and Purden, 1994; Lessler and O'Reilly, 1995; Flood-Page et al., 2000). The presence of third parties has also been identified as an important influence on respondents' willingness to disclose drug use, although the precise nature of this influence varies according to the nature of the relationship. While the presence of a spouse is associated with higher levels of reported drug use, the presence of other adults (particularly parents) consistently suppresses levels of disclosure (Aquilino, 1997).

In summary, four main points stand out from existing research into the validity of the self-report methodology. First, most studies show quite high congruence between self-reported drug use and biological test results. Second, despite its obvious limitations, the self-report methodology provides the most accurate measure of drug use currently available. Third, the self report methodology is most reliable in relation to 'recreational' drug use. And fourth, the validity of this approach is increased through careful design and by maximising respondent privacy and confidentiality.

The self-report methodology

The first detailed survey of drug use in Britain was conducted in 1969 by the Office of Population Censuses and Surveys on behalf of the Home Office (Marks et al., 1973; see also Police Foundation, 2000). It proved to be little more than an isolated exercise, however, as official interest in this area faded quickly. Very few such surveys were conducted during the two decades that followed and those that were, were invariably based on small localised samples. Under these circumstances: 'Assessing the prevalence of drug misuse in Britain' was 'more like piecing together a jigsaw with most of the pieces missing

(and the rest fitting poorly or not at all) than an exercise in statistics' (ISDD, 1993, 6). It is only in the last 12 years or so that the self-report methodology has been applied in anything like an authoritative manner in Britain and both the BCS and YLS have played a key role in this regard (Ramsay and Percy, 1996; Ramsay and Partridge, 1999). The development of the self-report methodology has been heavily sponsored by central government and has been driven by official concerns about the extent of drug use, as well as the growing emphasis on audit and evaluation within the Home Office as a whole (Maguire, 2002). From a government perspective, this methodology is principally seen as offering a way of monitoring the extent of the 'drug problem' and the effectiveness of the national drugs strategy (Ramsay and Percy, 1996; Ramsay et al., 2001).

The BCS has been conducted regularly since 1982, with the principal aim of providing reliable estimates of crime based on respondents' experiences of victimisation (Maguire, 2002). Well resourced by the Home Office, this survey has been administered by specialist companies according to the highest standards of quantitative social research. The samples are large, the sampling techniques sophisticated and the response rates highly respectable (White and Malbon, 1995; Hales and Stratford, undated and 1999). For each sweep, the aim is to construct a representative sample of all private households in England and Wales and all individuals aged 16 years or above living in them. Since 1992, the samples have been drawn from the Postal Address File (PAF), which contains a list of all postal delivery points in the country. Households and individuals are selected using hierarchical stratified sampling techniques, with random selection at three levels - postcode sector, household and individual. Postcode sectors are stratified according to whether or not they cover an inner city area, the region they are within, their population density, and the social class profile of heads of household. Inner city postcodes are over-sampled and weights are generated to correct for this, and other, sources of sampling bias. Each of the core samples for the 1994, 1996 and 1998 BCS included approximately 19,000 validated addresses and response rates hovered at around 80 per cent (Ramsay and Percy, 1996; Ramsay and Spiller, 1997; Ramsay and Partridge, 1999). Questions about drug use were restricted to 16 to 59 year olds, but were completed by almost all eligible respondents, generating data for approximately 10,000 adults per sweep.

The YLS has taken a similarly robust form, having also been carried out by specialist survey companies on behalf of the Home Office. Conducted for the first time in 1992 and repeated in 1998/9, its main focus is on young people's offending (Graham and Bowling, 1995; Flood-Page et al., 2000). While a strong sense of continuity has been maintained, some notable changes were introduced for the second sweep. The age-range covered by the survey was broadened slightly, from 14 to 25 year olds to 12 to 30 year olds and the sample was constructed in a different way. For the first sweep the sample was drawn directly from the PAF, but for the second sweep it was generated from the 1998 BCS (Stratford and Roth, 1999). The 'core' sample was made up of households that had been successfully included in the BCS and contained at least one person in the target age range and a 'booster' sample was added by screening households next door to those included in the BCS. A total of 7,012 eligible households were identified, which yielded 4,848 interviews at a response rate of 69 per cent. Once again, weights were provided to take account of sampling bias and to increase the representativeness of the sample.

Given their general design, both surveys provided the basis for a rigorous application of the self-report methodology. A victim survey may not provide the ideal context for detailed questions about drug use, but the BCS has been central to the validation and development of the self-report methodology in Britain. Detailed questions about drug use were introduced into the fourth sweep of the BCS, which was carried out in 1992, and similar questions were included in the first sweep of the YLS later that same year. These surveys went some way towards establishing the feasibility of the self-report approach in this country, though doubts were raised about the pencil-and-paper methods on which they relied. Such doubts were addressed by the subsequent introduction of computer assisted techniques and, with this refinement, Ramsay and Percy (1996, viii) declared that: 'the credibility of the self-report methodology for measuring drug use within the general population of this country has now been established beyond doubt'.

That said both the BCS and YLS share the limitations of the self-report methodology and of survey methods in general. Household surveys tend to underestimate the extent of illicit drug use and this tendency is particularly marked in relation to problematic use. By relying

on private residential addresses such surveys tend to exclude the relatively small number of chaotic habitual users, some of whom are homeless, in prison or living in residential institutions. Even where such users are included in the sample they are probably less likely than others to respond (Ramsay and Partridge, 1999; Police Foundation, 2000). While further distortions may result from under-reporting, this problem appears to be most marked in relation to non-specialist surveys (Ramsay and Partridge, 1999). The 1998 BCS identified slightly lower levels of drugs use than the 1998/9 YLS and it has been suggested that this was due, in part, to the context within which the questions were asked. Because the YLS focuses specifically on various forms of delinquency it may have the effect of 'normalising' illegal activities, thereby making respondents more willing to admit drug use (Flood-Page et al., 2000).

Further limitations flow from the fact that neither the BCS nor YLS are specialist drug surveys. Most importantly, perhaps, both surveys contain a limited amount of drug-related information. While the BCS does not include any information about frequency of use, for example, the YLS only contains such data for recent users. As a result it was not always possible to distinguish one-off users from more regular users. Moreover, while attitudes to risk-taking and rule breaking may help to explain why some people use drugs and others do not (Parker et al., 1998), neither the BCS nor the YLS made any attempt to measure these concepts. Finally, both surveys were limited by the cross-sectional nature of their designs. Because respondents were interviewed only once the order of events often remained unclear and this limited the extent to which relationships between variables could be specified causally. Fortunately, both surveys distinguished drug use that had taken place in the last 12 months from that which had occurred some time earlier. As a result, recent use could be distinguished from past use and differences in this regard could be meaningfully related to a range of other variables, including those related to early adult transitions (see, Graham and Bowling, 1995).

The analysis

Reflecting the study's underlying theoretical concerns, the analysis was based primarily on

young adults who were between 16 and 30 years of age. Many recent studies have concentrated on young people in their mid-to-late teens, with the result that they have been restricted to the early stages of most drug using careers and have been able to say very little about the impact of early adult transitions. By adopting a significantly wider focus, which comfortably included the peak age of illicit drug use and covered key elements of the journey into early adulthood, this study provided the basis for a much fuller account.

The analysis divided into three distinct phases. During the first phase all three waves of the BCS and the 1998/9 YLS were used to develop an empirically valid classification of illicit drug use. Both subsequent phases were based exclusively on the 1998 BCS and 1998/9 YLS, which were used to examine the social distribution of drug use. For reasons that will become clear, these later phases of analysis concentrated on patterns of 'recreational' drug use. Variations in such behaviour were assessed initially on the basis of bivariate statistical techniques and then on the basis of more complex multivariate techniques. During both these phases consideration was given to the ways in which young adults' drug use might vary according to their demographic characteristics, levels of social deprivation, location within early adult transitions and broader lifestyle choices (see Table 1).

During each phase of analysis the aim was to produce findings that could be generalised from the respective samples to the wider population (young adults in England and Wales). Even with carefully designed samples there is always a degree of uncertainty associated with this process, as sample-estimates are likely to differ from the actual figure in the population. Statistical theory helps to take account of such uncertainty, however, and allows generalisations to be made with a certain degree of confidence¹. Where estimates are made about the population it is possible to predict the range of values (known as a confidence interval) within which we are confident the true value lies (the term 'true value' refers to that which exists in the population). Where relationships between variables are being examined it is possible to estimate the strength of the relationship and the probability of finding a relationship at least as strong as the one observed by chance when there is no such

¹ While statistical theory takes account of the imprecision of survey estimates, difficulties associated with sampling bias and response bias remain.

relationship in the population (de Vaus, 1990; Altman, 1991).

Table 1: Variables included in the analysis

1998 BCS	1998/9 YLS
<u>Demographics</u> Age Sex Ethnicity Health status Disability status Occupational social class Parents' occupational social class Total household income <u>Deprivation / area of residence</u> Unemployment (current) Level of qualifications Low income household Financial difficulty (difficulty paying bills) Type of neighbourhood (Acorn classification) Inner city or not Rating of community support Level of incivility in the neighbourhood Region <u>Life-course</u> Movement into stable independent living Marital status Parenthood Economic status <u>Lifestyle</u> Evenings out in last week How often usually out after dark Visits to pub or wine bar (last month) Visits to nightclub or disco (last month) Pattern of alcohol consumption	<u>Demographics</u> Age Sex Ethnicity Occupational social class Parents' occupational social class Weekly spending money <u>Deprivation / area of residence</u> Unemployment (current and past) Level of qualifications Parents' unemployment (current and past) Low income Financial difficulty (unaffordable items) Type of neighbourhood (Acorn classification) Inner city or not Region <u>Life-course</u> Movement into stable independent living Marital status Parenthood Economic status <u>Lifestyle</u> Evenings out Hung about street / town centre in last month Attended pub during last month Attended party, dance, night club or disco during last month Religious belief and activity Time spent with friends Pattern of alcohol consumption Frequency of drunkenness Level of cigarette consumption Age started drinking or smoking

Note: for more detailed information about the variables please refer to the technical appendix.

These conventions were applied routinely during the course of the analysis. Confidence intervals were calculated for estimates relating to the general population, while relationships between variables were assessed on the basis of probability values and measures of association. Probability values of 0.05 or less were taken to indicate a statistically significant relationship. While probability values were calculated routinely using appropriate computer software (SPSS and STATA) adjustments were required because of the survey design. Sampling procedures for both the BCS and YLS involved a degree of clustering as respondents were drawn from a limited number of postcode areas and this slightly reduced their accuracy. In order to take account of these 'design effects' standard errors and probability values were multiplied by the appropriate design factors published in the technical reports (see Hales and Stratford, undated and 1999; Stratford and Roth, 1999).

The structure of the samples also made it necessary to weight the data, depending on the nature of the analysis. Percentages, averages and bivariate measures of association were generated using weighted data because the aim was to generalise such figures to the wider population. Probability values, by contrast, were estimated using unweighted data because they depend on the actual numbers included in the sample. Multivariate analyses were also based on unweighted data although the potential effect of weighting was taken into account by including those variables that were involved in the weighting (Skinner, 1994).

Multivariate techniques have rarely been applied to British drug use data (but see Ramsay and Percy, 1996; MacDonald, 1999; Roe and Man, 2006) and marked the culmination of the analysis. By controlling for, or holding constant, all of the other variables included in the analysis, they isolated the effect associated with each variable. As a result, they were able to identify which of a set of competing variables were most important in predicting a given outcome - in this case, drug use - and were able to exclude spurious relationships. While bivariate techniques were able to highlight potentially important variations in drug use, multivariate techniques were able to clarify which of these variations were genuinely important. Such techniques were used to examine various forms of illicit drug use and models were developed in a series of stages. During a preliminary stage variables were

entered into the model if they were involved in the weighting of the data or indicated something about the process of the survey interview (for example, who else, if anybody, was present during the interview). There then followed four distinct stages, during which demographic variables were entered into the model, followed by variables relating to deprivation and area of residence, the life-course and lifestyle. Once the models had been developed they were used to estimate the effect of each variable on the probability of using illicit drugs. A detailed description of the multivariate analysis is provided in the technical appendix along with a summary of the final models.

By eliminating spurious relationships, the multivariate analysis provided the basis for a robust assessment of the social origins of drug use. The inclusion of demographic characteristics, deprivation indicators and life-course measures meant that the structural location of drug use could be assessed in some detail. Particular attention was paid to the role of sex, ethnicity and social class and to possible links with social exclusion and neighbourhood characteristics. The role of age, marital status, parental status and domestic living arrangements were also considered, giving some indication of the impact of early adult transitions. As well as exploring the structural location of drug use, the analysis examined the symbolic meaning of such behaviour. Lifestyle indicators, particularly those related to participation in the night-time economy, drinking habits and smoking habits, were especially important in this regard as they meant it was possible to assess the extent to which drug use implies a particular commitment to hedonistic leisure.

Social change and the life-course

Identifying social change is a complex process which really requires a combination of cross-sectional and longitudinal data to separate age effects, cohort effects and period effects (Rutter et al., 1998). Where longitudinal data is unavailable, however, it is my contention that cross-sectional data can be used to make some useful comment about the likely nature of change over time. In order to develop this claim it is helpful to distinguish between the following:

- *Assessing contemporary claims:* cross-sectional data can be used to assess whether social change has had the effect that is claimed. In chapter five, for example, the BCS and YLS are used to evaluate whether the contemporary demography of drug use matches the claims that have been made about the nature of recent changes.
- *Generational comparisons:* assuming that most people who use illicit drugs do so during adolescence and early adulthood - and all the indications are that they do - then changes over time will be reflected in differences between age cohorts (Shiner and Newburn, 1999). Thus, in chapter five, generational comparisons are used to evaluate claims that traditional distinctions between users and non-users have disintegrated.
- *Linking data:* historical data can be used to set cross-sectional analysis in a broader context. This is not simply a question of looking at trends in drug use, though such comparisons are important. Historical data can also be used to examine what has happened to those variables that predict contemporary drug use. If these variables have changed in such a way that facilitates increased drug use then a connection can be logically inferred. Thus, the analysis in chapter six is set against trends in alcohol and tobacco consumption and that in chapter seven is set against the changing nature of early adult transitions.
- *Evidence of continuity:* past studies provide a useful reference point, which may serve to highlight important areas of continuity. The on-going relevance of earlier work forms a central theme of this thesis and suggests that changes in drug use have been rather less radical than is often claimed.

Establishing the influence of life-course developments is no less complicated. Cross-sectional data have been widely used for this purpose, but bring a number of problems (Rutter et al., 1998; Smith, 2002). Not least, the order of events remains unclear with such data, which means that relationships between variables can not be assumed to be causal. Although causality can not be proved under such circumstances, it can be inferred on the

basis of theory (Bryman, 2001). Thus, for example, the analysis of early adult transitions presented in chapter seven draws heavily on a life-course perspective which has been developed using longitudinal data.

In summary, the gaps that are evident in British drugs data create considerable difficulties for anyone wanting to assess trends over time or the influence of life-course developments. The recent provision of high quality cross-sectional data goes some way towards easing these difficulties, though a certain degree of conjecture remains. None of the measures described above guarantee 'god-like certainty', but they do help to ensure that the best use is made of the available evidence.

A reflexive approach to quantitative methods

Quantitative analysis is often treated as a narrow technical exercise, but actually raises broad questions about the nature of social scientific inquiry. What, for example, are the epistemological and ontological foundations of such forms of analysis? In addressing these questions, my aim is to establish a reflexive approach, which frees quantitative methods from the limitations and separations associated with positivism. The approach I am advocating is largely a response to the critique that emerged out of interpretive sociology and seeks to sensitise quantitative methods to some of the main criticisms that have been levelled at them. These criticisms will be outlined in fairly broad terms, before I go on to describe the ontological and epistemological foundations of the reflexive approach I am advocating. A detailed account will then be given of the implications that reflexivity has for the way in which quantitative social research is approached.

Positivism and the interpretive challenge

Debates about the scientific status of sociology are often framed by the notion of positivism. What is meant by 'positivism' is not always entirely clear, however, partly because it has recently come to be used as a general term of abuse. Nonetheless, while definitions vary, positivism is essentially made up of the belief that the methods and

procedures of natural science are appropriate to the social sciences (Bryman, 1988 and 2001; Cuff et al., 1992).

The idea that society should be studied according to the model provided by natural science can be traced back to the founding fathers of sociology (Giddens, 1976). Writing in the aftermath of the scientific and technological triumphs of the late eighteenth and the nineteenth century, Auguste Comte and Karl Marx both advocated the extension of science to the study of society. A science of society would, they believed, replicate the spectacular advances in knowledge yielded by natural science. The clearest statement of how such a science was to be conducted was provided by Emile Durkheim (1964) in *Rules of Sociological Method*. According to Durkheim, sociological inquiry should focus on the collective phenomena that arise out of human association, which he called 'social facts'. A suicide rate was, he argued, a social fact, which could not be reduced to individual suicides without losing the essential, collective, meaning of a rate. As well as defining what sociologists should study, Durkheim laid down a set of procedures for how they should study it. In doing so, his aim was to make sociological inquiry as scientific and objective as possible. Investigators should, he argued, eradicate all their preconceptions and try to be open-minded in the way they approach their subject; they should try to forget their biases and concentrate on external, verifiable, characteristics; and they should not use their own subjective interpretations. If these procedures were followed, he claimed, then clear unambiguous definitions of the facts could be produced.

Durkheim's legacy has been crucial to the development of sociology. His study of suicide has long been considered a model of positivist social research, while his rules of sociological method identified the main characteristics of what is now generally understood by the term positivism. Positivism rests on the contention that phenomena can only be validly considered knowledge if they are amenable to the senses and are observable. It follows, therefore, that observation tends to be elevated over theory. Scientific knowledge, it is often claimed, is developed through the accumulation of verified facts, which give rise to empirically established regularities or 'laws' (this is known as the principle of inductivism). Observation is not conducted haphazardly, however, but is guided by theory

in the form of hypotheses, which can be tested and provide the basis on which laws may be assessed (this is known as the principle of deductivism). Positivism is also characterised by a belief that science can, and should, be conducted objectively: that is, in a way that is value free. Finally, because quantification has been considered to be one of the defining features of natural science, positivism has been strongly associated with the use of statistics. It follows that debates about positivism have, in effect, been debates about the mathematicization of social science (Bryman, 1988 and 2001; Cuff et al., 1992; Hammersley, 1992).

The influence of positivism has been sharply opposed by advocates of interpretative perspectives. These perspective can be traced back directly to George Herbert Mead and the Chicago School, but did not come to the fore until the 1960s when phenomenology and symbolic interactionism came to prominence. Crucially, the interpretive tradition has provided an alternative epistemology to positivism: one which rests on competing ontological assumptions and emphasises that the subject matter of social science is fundamentally different from that of natural science. Advocates of interpretive perspectives argue that, rather than being pre-given, the social world is produced through human interaction. They criticise the scientific model for failing to recognise that human beings interpret the social world and act upon their own, and others', interpretations of it. According to this perspective, it makes little sense to talk of an external social reality that can be verified through objective observation. The clash between positivism and interpretivism is fundamentally about hermeneutics: that is, about the process by which human action is understood (Bryman, 1988 and 2001; Cuff et al., 1992). Whereas positivism seeks to explain human behaviour, interpretive perspectives focus on developing an empathetic understanding of it. In so far as the latter seek to explain behaviour, they do so at the level of meaning and motivation.

The challenge that interpretivism posed to positivism was spelled out most clearly by Herbert Blumer. As a one-time student of Mead's, Blumer (1956 and 1969) was concerned, above all, with the epistemological implications of symbolic interactionism. In a well-known attack on 'scientism', he highlighted the limitations of 'variable analysis' in

relation to both the measurement and interpretation of the social world. Because sociological notions are typically abstract and lack any fixed or uniform indicators, Blumer argued that any claim to be able to measure them is spurious. He considered that, in the context of social science, variables are not clear and discrete 'objects' with precisely defined properties and are nothing more than 'abbreviated terms of reference' for complex patterns of social organisation. Except in the most basic of ways, therefore, they do not express quantifiable relations between known dimensions. Blumer also criticised variable analysis for drawing on a faulty stimulus-response model of social interaction, which views human action as a relatively automatic response to external stimuli. In opposing this model, he emphasised the deliberative and creative nature of human action, arguing that the meaning of social circumstances depends on the plans, purposes and knowledge of the social actor. Accordingly, the process of interpretation through which actors construct their actions was considered to provide the appropriate focus for social research and a 'naturalistic' approach based on detailed studies of particular situations and settings was favoured. The starting point for such an approach was not provided by abstract concepts, moreover, but by a desire to learn, at first hand, about the way such situations are experienced by those involved in them. In practice, this commonly translated into preference for qualitative methods, particularly ethnography and depth interviews (see, for example, Becker, 1963; Young, 1971).

Although symbolic interactionism emerged in the United States, it had a profound impact on the development of British sociology. Blumer's critique of scientism, for example, was a key influence on the sceptical approach to deviance (Cohen, 1971; Young, 1971), which was, in turn, part of a broader reorientation of sociology in this country. With the rise of the interpretive challenge and the discrediting of positivism, methodological fashion swung decisively away from quantitative approaches towards qualitative methods (Hammersley, 1992). As qualitative research became increasingly popular, quantitative methods came to be viewed with considerable suspicion and scepticism. According to David Silverman (2001, 35):

Since the 1960s, a story has got about that no good sociologists should dirty their hands with numbers. Sometimes this story has been supported by sound critiques of

the rationale underlying some quantitative analyses (Blumer, 1956; Cicourel, 1964). Even here, however, the story has been better on critique than on the development of positive, alternative strategies.

This, then, poses the question of what, if anything, can be done to defend quantitative methods against such criticisms?

Reflexivity and the crisis of modernity

By advocating a 'reflexive' approach to quantitative research, I am explicitly drawing on Ulrich Beck's work on the nature of modernity, as well as Anthony Giddens' and Pierre Bourdieu's more immediately methodological work. In *Risk Society*, Beck (1992) argues that modern industrial society is being reshaped by a process of 'reflexive modernisation'. Just as the privileges accorded to rank and religion were demystified during the nineteenth century, he argues, so the supremacy of science is undergoing a sustained challenge. Whereas classical industrial society was defined by innocent faith in the ability of science to improve the position of humankind, risk society is facing up to the limitations of science. The benefits of technological 'progress' are being overshadowed by the production of risks; the lay public are being sensitised to the critique of science; and issues relating to the development and application of technology are being eclipsed by questions about the political and economic 'management' of the associated risks. As a result, modernisation is becoming reflexive or, put another way, is becoming its own theme.

Beck's notion of reflexive modernisation represents a decisive break from the conceptual framework associated with postmodernism. Whereas postmodernism implies the wholesale abandonment of modernity, Beck 'is not the foe but the friend of modernization' (Lash and Wynne, 1992, 8). Through the process of reflexivity, he argues, 'the principles of modernity are redeemed from their separations and limitations in industrial society' and this 'means not less but more modernity, a modernity radicalised against the paths and categories of the classical industrial setting' (Beck, 1992, 14-15). From this perspective, the critique of science and technology are not seen to contradict modernity, but are viewed as an adaptation of it. Thus, the advent of the risk society is not considered to mark the end

of modernity, so much as at its beginning: that is of modernity beyond its classical industrial design.

Beck's analysis grew out of the sociology of scientific knowledge and his notion of reflexive modernisation has important implications for quantitative research. Challenges to the privileged position of science have been accompanied by growing doubts about the value of quantitative methods. Statistics are, as already noted, widely regarded with suspicion within sociology and a similar scepticism has become engrained in everyday language: 'you can say anything you like with figures'; 'lies, damn lies and statistics' (Silverman, 1998, 79). If, as Beck suggests, modernity may be redeemed by becoming reflexive, then quantitative methods may also be redeemed through a similar process. This poses the question, what does the notion of reflexivity entail in such a context? Lash and Wynne (1992, 5) offer some clues in the introduction of Beck's book when they suggest that:

A reflexive learning process would have recognized the conditions underpinning the scientific conclusions, drawn out the social situational questions which they implied, and examined these with the benefit *inter alia* of the different forms of knowledge held by people other than scientists. This reflexive learning process would have necessarily meant negotiation between different epistemologies and subcultural forms, amongst different discourses; and as such it would have entailed the development of the social or moral identities of the actors involved.

Ontological and epistemological foundations

The quantitative approach I am advocating is firmly rooted in the practice of research, but also connects with ontological debates about the nature of social entities and epistemological debates about the nature of social and natural science. In relation to the latter, its immediate origins lie in the work of Anthony Giddens and Pierre Bourdieu. In *New Rules of Sociological Method*, Giddens (1976) provides a sympathetic critique of interpretive perspectives. These perspectives have, he argues, played an important role in clarifying the logic and method of social science and have made it clear that 'social science should move out of the shadow of natural science, in whatever philosophical mantle the latter may be clad' (1976, 14). While recognising the value of interpretive perspectives,

Giddens registers concerns about their preoccupation with meaning, their tendency to explain all human conduct in terms of motives at the expense of causal conditions and their failure to relate social norms to asymmetries of power and social divisions. Crucially, he argues, these shortcomings cannot be resolved within the traditions of thought from which they originate and nor can their positive contributions be readily accommodated into the rival theoretical schemes associated with positivism. Hence the need for new rules.

In preparing the way for these rules, Giddens sought to clarify the relationship between human agency and social structure and attempted to clear up epistemological difficulties which, he felt, limited the logic of social scientific method. While rejecting the determinism of structural perspectives, Giddens acknowledged the bounded nature of human agency. Society, he argued, is produced through the skilled performance of its members, but this performance draws upon resources, and depends on conditions, which they may be unaware of, or perceive only dimly. Accordingly, sociology must recognise the duality of structure, whereby social structures are constituted by human agency, and yet simultaneously provide the medium through which society is constituted. In other words, Giddens recommends that structures should be examined in terms of their 'structuration': that is, as a series of reproduced practices. To enquire into the structuration of social practices is to seek to explain how structures are constituted through action and reciprocally how action is constituted structurally. This position has important epistemological implications. If agency and structure are not easily separable, then it is neither necessary nor desirable to have separate epistemologies to study them.

Giddens' sympathy for interpretive perspectives also led him to consider the hermeneutic process. Any attempt to generate a generalized theoretical scheme, whether it be in the natural or social sciences, is, he argues, a hermeneutic process, which depends on mastering concepts in order to generate specific types of descriptions. In contrast to natural science, however, sociology deals with a universe that has already been rendered meaningful by social actors themselves, and then reinterprets these meanings in terms of its own theoretical schemes. Consequently, Giddens argues, sociological concepts obey a 'double hermeneutic' and this has important implications for the production of social scientific

knowledge. Sociologists, it is claimed, cannot make social life available as a 'phenomenon' for observation without drawing upon their everyday knowledge of it. In this respect, their position is similar to that of any other member of society and 'mutual knowledge' represents that which both sociologists and laymen use in order to 'make sense' of social activity.

Bourdieu, like Giddens, sought to transcend divisions between subjectivism and objectivism and social structure and human agency (Bourdieu and Wacquant, 1992; Jenkins, 1992). Given this similarity of task, it is, perhaps, unsurprising that there are marked parallels in their work. Bourdieu has been considered a proponent of structuration and, while not universally accepted, this description reflects his emphasis on the interplay between social structure and human agency (Wacquant, 1992). While rejecting structuralism on the grounds that it is overly deterministic, Bourdieu also rejects phenomenology on the grounds that it fails to account for the regular and enduring nature of social life. In seeking to explain these patterns, he argues that socially competent performances are produced routinely, without conscious deliberation, because practical logic provides a sense of how things are usually done. According to this perspective, successful interaction comes as 'second nature' and social actors are not necessarily able to explain what they are doing. Practice is not determined mechanistically, however, as improvisation is required and strategies are involved which reflect social actors' goals and interests. Nor, Bourdieu maintains, can practice simply be understood in terms of individual decision-making because each social field has a habitus, comprising of a shared body of dispositions and classificatory schemes that are learnt and acquired from early childhood. Social divisions, he argues, are embodied in mental schemata and the correspondence between these dimensions is reflected in the peculiar 'double life' of social structures. While existing as material phenomena in the 'objectivity of the first order', such structures also exist as symbolic templates for practical activities in the 'objectivity of the second order'.

Unlike Giddens, Bourdieu was an active empirical researcher and showed much greater interest in teasing out the implications that his arguments had for the immediate practice of

research (Bourdieu and Wacquant, 1992; Jenkins, 1992). As an anthropologist come sociologist, who used both ethnographic and statistical methods, he was ideally suited to this task. According to Bourdieu, sociology should seek to uncover both social structures and the mechanisms by which they are reproduced or transformed. In order that this may be achieved, he advocated a social praxeology, which integrated structural and phenomenological approaches into an epistemologically coherent mode of inquiry. Only in this way, Bourdieu argued, can the double reality of the social world be recaptured. According to such an approach, mundane representations are initially pushed aside in order to construct the objective structures whose articulations can be materially observed, measured and mapped out independently of the representations of those who live in it. Using statistics, ethnography or formal modelling, the external observer can decode the 'unwritten musical score according to which the actions of agents, each of whom believes she is improvising their own melody, are organized' (Bourdieu 1980, 89). The immediate, lived experience of agents is then reintroduced in order to explicate the categories of perception and appreciation that structure their actions. While both forms of analysis are necessary, Bourdieu grants epistemological priority to the objectivist reading. Because of the correspondence between mental and social structures, however, the 'analysis of objective structures logically carries over into the analysis of subjective dispositions' (Bourdieu and de Saint Martin 1982, 47).

Bourdieu's application of method was characterised by a preoccupation with reflexivity (Bourdieu 1992; Jenkins, 1992). This involved considerable flexibility as it required the outright rejection of methodological sectarianism. Bourdieu drew on an array of methods, arguing that those selected must fit the problem at hand and must be constantly reflected upon as they are deployed. His application of method involved a double distancing or taking two steps back. The first step backs away from the situation in question, and this is one of the usual ways in which 'objectivity' is discussed, while the second step backs away from the act of observation itself. This second step is necessary in order to reveal the techniques of the observer and, in Bourdieu's terminology, results in the 'objectification of the act of objectification'. The researcher must consciously monitor the categories they employ, their research methods and the procedures they adopt in order to constitute social

life as available for analysis. Only by subjecting the practice of research to the same critical and sceptical eye as the practice of social interaction can the researcher hope to develop a proper understanding of social reality.

Some of the issues highlighted by Giddens and Bourdieu have come to be reflected in general methodological debates. There has, for example, been a growing reaction against the previously orthodox view that quantitative and qualitative methods are underpinned by incompatible epistemological positions (Silverman, 2001). Indeed, Alan Bryman (1988 and 2000) argues that the differences between quantitative and qualitative methods are largely technical rather than epistemological, and that choices between them should be made on the basis of what is appropriate to the research question.

The implications of this position have been realised much more fully in relation to qualitative than quantitative methods. While some advocates of qualitative research have argued that such methods may be applied in a way that approximates to science (Kirk and Miller, 1986; Silverman, 1998 and 2001), quantitative researchers have been much more reluctant to rethink their epistemological position. They have, rather, tended to seek refuge in the 'central convictions' offered by their favoured approach and have struck out 'blindly at anything that gives off the scent of deviationsim' (Beck, 1992, 12). Thus, for example, interpretive perspectives have been rejected on the grounds that they are unscientific and do not proceed on the basis of falsifiable hypotheses (Downes and Rock, 1988; Cuff et al., 1992) and reflexivity has been rejected on the grounds that it is contrary to science (Giddens, 1976). Even the most committed advocates of reflexive research practice have been slow to consider what the implications of such a position might be for quantitative methods. Bourdieu, for example, may have made it clear what 'the objectification of the objectification' involved in relation to ethnography but his use of statistics was 'a little cavalier' and revealed 'a residual positivism' (Jenkins, 1992, 60). As well as being overconfident that his statistics actually represented that which they purported to represent, Bourdieu has been criticised for failing to recognise that much of his survey data were synoptic presentations of respondents' accounts of their preferences, habits etc.

The need for a more reflexive approach to quantitative methods has been highlighted by debates about feminist research (McCarl Nielsen, 1990; Maynard, 1994 and 1998; Kelly, Burton and Regan, 1994). Early feminist critiques were heavily influenced by interpretive sociology, although they added an important gendered dimension to these perspectives. Quantitative methods were rejected on the basis that they were 'masculinist' and replicated patriarchal forms of oppression, while qualitative approaches were considered to be compatible with the politics of feminism and well suited to feminine traits, such as listening and developing empathy. In recent years, however, feminists have shown a growing interest in quantitative methods and suggestions that it is time to rethink what is regarded as acceptable methods for feminist researchers have been supported by calls for feminists to transform quantitative methods. Mary Maynard (1994 and 1998) has argued that positivism has become a liability in the quantitative versus qualitative debate and there can be little doubt that the continued association with positivism has discouraged many researchers from adopting quantitative methods. No less problematically, those who have used such methods, despite harbouring certain misgivings about positivism, have been left in a state of epistemological limbo. Unfortunately, attempts to develop a feminist epistemology have been preoccupied by complex philosophical issues and have been divorced from the practice of doing research (Maynard, 1994 and 1998). Consequently, epistemological discussions have continued to point towards qualitative approaches, while feminist researchers have sought to rehabilitate quantitative methods. This brings us to the key question: what, then, are the essential elements of a reflexive approach to quantitative social research?

Essential components of reflexive quantitative research

If it is to break free from the limitations and separations associated with positivism, a reflexive approach to quantitative methods must come to terms with the double hermeneutic that is involved in any attempt to understand the social world. The emphasis that both Giddens and Bourdieu placed on transcending the division between objectivism and constructivism has important implications here, as it demonstrates that positivism may be rejected without giving up on the goal of a generalizing social science. We may, in

short, accept the idea that the world is socially constructed without, as postmodernists suggest, abandoning method and treating all forms of knowledge as being equally valid. The way in which social actors experience the world may depend on socially and culturally defined understandings, but this does not mean that the world only exists in their representations of it. According to Kirk and Miller (1986, 11): 'There is a world of empirical reality out there. The way we perceive and understand that world is largely up to us, but the world does not tolerate all understandings of it equally'. Because of this quality, it is possible to distinguish between competing claims on empirical grounds. Once we have accepted that the social world is pre-interpreted, however, we cannot simply ignore the problem of meaning. The reflexive approach I am advocating, embraces the insights provided by interpretive perspectives on the grounds that they offer a way of sensitising quantitative methods to the problems associated with positivism.

Quantitative methods are strongly associated with the epistemological doctrine of empiricism, which holds that valid knowledge can only be gained through experience and the senses (Bryman, 2001). Empiricism, like positivism, carries a range of negative connotations and has been criticised for relying on the exhaustive collection of 'facts' and for reducing the importance of theory. When viewed sympathetically, however, it describes a general approach to sociology which seeks to avoid untested theoretical speculation and demands that theory is grounded in data. Bourdieu highlighted the advantages of such an approach when he noted that: 'observation of reality puts us on our guard against the temptation to construct over-simple models' (cited in *The Guardian, Obituaries*, January 28th 2002).

While recognising the importance of theory, the reflexive approach I am advocating entails a firm commitment to empirical inquiry and demands that such inquiry should be conducted scientifically. By this I mean methods that are appropriate to the subject matter should be applied rigorously and that data should be handled critically. Karl Popper's notion of critical rationalism has been considered to provide a template for the handling of data (Silverman, 2001). According to this approach, analysts should proceed on the basis of falsification: that is, they should seek to disprove their ideas about the phenomena being

studied. Only if these attempts fail may they legitimately talk about 'objective' knowledge and, even then, this knowledge is provisional as it is subject to possible falsification by future studies. The pursuit of social science may also be understood as an attempt to maximise reliability and validity. Reliability is essentially concerned with consistency, while validity relates to the accuracy with which social phenomena are represented (Kirk and Miller, 1986; Silverman, 2001). These issues have important implications for all stages of the research process and the way in which they are best managed has traditionally provided a central focus for quantitative methods (de Vaus, 1990; Bryman, 1988 and 2001).

This emphasis on scientific method may appear to be at odds with my proclaimed interest in the interpretive challenge, but these positions are not as incompatible as they may first appear. Although Blumer's interpretation has prevailed, interpretive perspectives are not universally associated with qualitative research and are not necessarily anti-science. During the 1960s, for example, the Iowa school used quantitative methods to explore the ideas associated with symbolic interactionism (Kuhn, 1964) and Mead's approach was arguably far more consistent with natural science than has typically been recognised (McPhail and Rexroat, 1979; Bryman, 1988 and 2001). It was, in addition, Max Weber (1947, 88) who described sociology as 'a science which attempts the interpretive understanding of social action in order to arrive at a causal explanation of its course and effects'. In this context, reflexivity plays a dual role. On the one hand, it provides a basis for reconciling potentially competing approaches and, on the other, it promotes rigour by encouraging researchers to adopt a critical distance from their chosen methods. In relation to quantitative research, this means not taking the 'factual' status of statistical data for granted, holding the possibilities and limitations of quantitative methods consciously in the foreground and recognising the value of qualitative approaches.

The validity of qualitative data rests on the idea that competent social actors are able to reflect meaningfully on the world they inhabit. This is apparent from the frequently made claim that such methods allow researchers to view the world through the eyes of those being studied. Social survey methods rely on a similar ability and seek to make sense of the world through the symbolic reflections of social actors. Put another way, they aim to

recover the social world by using the constructs that sustain meaningful everyday interaction. Consider, for example, the notion of drug use. Illicit drugs may have qualities that can be experienced through the senses (they can be seen, felt, tasted and smelt) but these qualities do not confer an objective status. Objectively, for example, ecstasy is no more a 'drug' than alcohol or tobacco but it is more likely to be considered as such because of the prevailing moral and legal climate. Despite this apparent lack of clarity, competent social actors are able to respond meaningfully to the words 'ecstasy' and 'heroin' etc (in spoken or written form) because they know what they represent symbolically. It follows from this that drugs surveys do not provide objective measures of whether or not individuals have ingested particular chemicals, but rather provide an indication of whether they have engaged in forms of social behaviour that they understand to be ecstasy use, heroin use etc.

When considering quantitative measurement it is important to distinguish between different types of social construct and to recognise that there is a hierarchy of reliability and validity. We can be much more confident about measuring 'approximately objective variables' that are based on 'ostensibly factual information', for example, than variables that are generated by asking the respondent for a subjective reaction (Procter, 2001, 105). Broad distinctions can be drawn between three types, or order, of social construct. *First order* constructs arise out of social actors' socio-demographic characteristics and personal biographies. Examples include age, sex, marital status, ethnicity and occupational status etc. Because these constructs tend to be reified through social interaction they take on the quality of low-inference descriptors and form part of the automatically-at-hand knowledge that social actors carry around with them². As a result, they can be measured with a relatively high degree of confidence and with little explicit reflection by respondents. *Second order* constructs are based on human action and include a range of phenomena such as drug use, physical exercise, and help-seeking behaviour etc. They are observable, and thus amenable to empirical measurement, but are less automatically-at-hand than those of the first order

² Clive Seale (1998) developed the notion of low-inference descriptors in relation to qualitative data collection. I have borrowed the term to describe the status of social constructs in everyday life. A low-inference descriptor is one which is considered to have a fixed and immutable quality and a self-evident social meaning. Low-inference descriptors are those which are subject to reification though the precise characteristics that are subject to this process depend upon the historical and social context.

and involve a greater degree of inference, which means they tend to be more difficult to measure and require a greater degree of reflection by respondents. *Third order* constructs are made up of attitudes, beliefs, feelings and future intentions. While playing a critical role in conveying meaning, they are particularly difficult to measure because they do not meet the basic criteria of empiricism (i.e. they cannot be observed and are not experienced through the senses) and typically involve a considerable degree of inference. The human capacity for reflection and communication provides some basis for measuring third order constructs, however, and this is reflected in the development of modern day social psychology (Hewstone et al., 1996). Technical innovations in this field have given rise to a growing certainty that attitudes can be measured, though the epistemological basis for this confidence remains unclear. The reflexive use of third order constructs requires that the particular difficulties associated with measurement are acknowledged; that these constructs are viewed as social products shaped by prevailing norms and codes of conduct; and that demonstrating coherent links with second order constructs (i.e. between attitudes and behaviour) helps to establish their validity.

Valid measurement of any social construct, regardless of its order, depends upon the deployment of 'frames of meaning' that make sense of the world from the perspective of those being studied. While quantitative research is often criticised for ignoring the problem of meaning, it may be sensitised to it through the use of qualitative methods during the design stage and through rigorous piloting of data-collection instruments (Bryman, 2001). Once quantitative measures have been designed to reflect social meaning, it makes little sense to criticise them, as Blumer does, on the grounds that they lack precision. Such measures should be assessed mainly on the basis of how well they make sense of the social world and this often means incorporating ambiguity and uncertainty. For this purpose it is better that 'concepts are polymorphic, supple, and adaptable, rather than defined, calibrated, and used rigidly' (Wacquant, 1992, 23). As well as deploying meaningful constructs, valid measurement depends upon minimising the social desirability effect, whereby respondents give what they consider to be the most desirable response. While this type of effect is likely to be most marked in relation to illegal activities such as drug use, it may be combated through the use of techniques such as computer assisted personal interviewing

which maximise respondents' sense of confidentiality (see above).

The problem of meaning must also be addressed at the point of analysis. Within a reflexive framework there must be a 'plausible narrative' which links the variables as sequences of comprehensible human action (Reiner, 2007). Once again, the key hermeneutic task is to make sense of ambiguity and uncertainty. Bourdieu recognised that the social world does not follow the neat regularity of a normative or judicial principle, arguing that practical logic is 'fuzzy' and 'vague' and warning against searching the products of habitus for more logic than they actually contain: 'The peculiar difficulty of sociology, then, is to produce a precise science of an imprecise, fuzzy, woolly reality' (Wacquant, 1992, 23). While Bourdieu sought to resolve this difficulty by enacting a double reading, his social praxeology has been criticised on the grounds that it reveals a residual positivism.

The approach I am advocating retains the notion of a double reading, albeit in a somewhat amended form that distances it from positivist connotations. Bourdieu likened the first reading to physics, arguing that the articulations of objective structures can be materially observed, measured and mapped out independently of the representations of those who live in it (Bourdieu and Wacquant, 1992). My contention, by contrast, is that it is these very representations that provide the raw material through which the workings of the external social world may be recovered. This may be achieved by identifying patterns and regularities in social actors' collective symbolic reflections. First and second order constructs are given priority because they are most amenable to measurement; because they reveal the workings of the external social world most clearly; and because they may identify the influence of structures which operate at, or beyond, the limits of social actors' conscious knowledge of the world. Third order constructs play an important, albeit secondary role, by clarifying the categories of perception and appreciation that structure action. Although quantitative analysis may help to identify regularities and patterns in third order constructs, the problem of meaning cannot be fully resolved within a quantitative framework (de Vaus, 1990). It follows, therefore, that such methods should not be applied in isolation from other approaches and that the results of quantitative analysis should, at the very least, be interpreted in light of qualitative studies.

Reflexive analysis depends upon the rigorous and critical handling of data and, in the context of quantitative research, this means drawing on well established statistical procedures. Most quantitative research is geared towards assessing relationships between variables and the use of multivariate procedures to eliminate spurious relationships provides one of the main ways in which this type of research seeks to satisfy Popper's demand for falsification (Silverman, 2001). As well as indicating which types of analysis are appropriate, statistical theory provides explicit criteria for assessing the results. By providing a detailed analytical template, statistical theory limits the role of the analyst as author and ensures a degree of objectivity. Findings can only be generalised to a population with any confidence when certain sampling criteria are met and, providing that analysts retain a degree of integrity, statistically non-significant relationships cannot be converted into statistically significant relationships and weak associations cannot be transformed into strong associations.

While established quantitative procedures help to ensure a degree of rigour, they should not be approached uncritically. They do not provide an automatic route to the 'truth' and, in some respects, rely on little more than convention. Consider, for example, the role of statistical significance when generalising from a sample to a population. Probability values of 0.05 or below are generally taken to indicate a statistically significant relationship (that is, one which exists in the population), but this is an arbitrary cut-off point that has come to be used simply out of convention. According to one statistician, moreover: 'It is ridiculous to interpret the results of a study differently according to whether the P value obtained was, say, 0.055 or 0.045. These P values should lead to very similar conclusions, not diametrically opposed ones' (Altman, 1991, 168).

Because of the need for interpretation, moreover, quantitative methods can not be reduced to a mechanical set of procedures and their application should not be approached as a purely, or even mainly, technical matter. Although often criticised for being atheoretical, quantitative research is necessarily and intimately bound up with theory. At the most basic level, the minutiae of quantitative research requires decisions that involve a degree of abstraction: the wording of questions, the coding and recoding of variables all involve a

degree of theorising (Bourdieu and Wacquant, 1992). In addition, quantitative analysis often proceeds on the basis of hypothesis testing and, as such, is inherently concerned with the development of ideas and theory. In this context, data may not be collected because they are considered to be of immediate interest in themselves, but because they provide the basis for testing more general ideas about the world. Within a reflexive framework, moreover, the results of quantitative analysis are not assessed solely on the basis of technical criteria, but are also considered in terms of their sociological value and explanatory power. Crucially, the broader significance of statistically significant results depends upon plausible explanation and sociological reasoning. As such, the reflexive application of quantitative methods depends upon a simultaneous commitment to empiricism (in its positive sense) and theory. The benefits of such an approach were neatly encapsulated by Bourdieu (1988, 774-5) when he argued that: 'theory without empirical research is empty, empirical research without theory is blind'.

Finally, the role of hypothesis testing requires clarification because it raises important points about the nature of scientific enquiry. Linear models of hypothesis testing imply a neat, clinical process, in which the analysis is conducted along clearly predefined lines. Most research is much 'messier' than this implies, however, and involves a blurring between different stages and elements (Bryman, 1988; Maynard, 1994). Data analysis can not realistically be reduced to the formulaic testing of predefined hypotheses (although this may be part of what is involved) and is best approached as an iterative process of exploration, clarification, testing and reflection, which involves moving backwards and forwards between theory and data (de Vaus, 1990). Such an approach provides much greater scope for identifying complexities in the data, for taking account of unanticipated findings and for generating new hypotheses. It should not, moreover, be assumed that analyses must be based on fully formed hypotheses derived from formal sociological theory, as they may just as easily be guided by hunches, based on everyday knowledge. None of this adds up to a rejection of the possibility of scientific forms of social inquiry, though it does require a more realistic model of what scientists actually do. Several commentators have noted that honesty about the 'messiness' of the social research process does not prevent it from being scientific, as natural science does not accord to the model of

‘hygiene research’ (Kirk and Miller, 1986; Maynard, 1994; Kelly, Burton and Regan, 1994). Similarly, an emphasis on the analytical value of everyday knowledge may break with the ideas of neutrality and mind independence, but this is not incompatible with science. While Thomas Kuhn (1970) has shown that natural science does not proceed on the basis of mind independence, Karl Popper (1959) has rejected the idea that objectivity must be sought at the level of the individual scientist, arguing instead that it should be seen as a collective responsibility.

Conclusion

The recent renaissance in British drugs research has been driven by political rather than purely academic influences. A leading role has been taken by the Home Office, which has, among other things, coordinated the systematic introduction of the self-report methodology based on the BCS and the YLS. While these surveys have been used mainly to monitor prevalence and evaluate the national drugs strategy, they also offer important opportunities for more sociological analysis. The study described here used data from both these surveys in order to examine the social origins of drug use, with specific consideration being given to demographic characteristics, social deprivation, early adult transitions and broader lifestyle choices. Analyses were conducted according to a reflexive process, based on the rigorous and critical handling of data, which sought to reconcile quantitative methods with an interpretive orientation. A key focus for the empirical analysis was provided by the ideas associated with the early sociology of drug use and the more recent normalisation thesis.

4

Classifying drug use

It is not then the study of drugs in a vacuum, as isolated pharmacological effects, which will help us understand drug addiction; rather it is the social *meanings* ascribed to a particular drug in a specific society or culture that we must analyse (Young, 1971, 34).

One of the main criticisms of the initial version of the normalisation thesis was that it failed to distinguish adequately enough between different substances. Generic references to drug use, it was suggested, simplify the choices that young people make and fail to reflect the discerning approach that many take in relation to such matters (Shiner and Newburn, 1997). A key first step for any analysis, therefore, is to ensure that drug use is classified in a way that is meaningful. Although several well-established classifications of illicit drugs are available, they are arguably unsuitable for sociological analysis because they are based on medical or pharmacological perspectives. One of the best known pharmacological classifications distinguishes between stimulants, hallucinogens and depressants, but these categories are not readily applicable to the most commonly used illicit drugs. Cannabis and ecstasy, for example, defy precise pharmacological classification because they contain both stimulant and hallucinogenic properties (Gossop, 1996). An alternative approach is offered by the Misuse of Drugs Act 1971, which classifies controlled drugs according to their perceived dangerousness or harmfulness. Although this classification has been used as a basis for sociological analysis (MacDonald, 1999; Roe and Man, 2006) its suitability for such a role remains open to doubt. As Thorstein Sellin (1938, 23-4) noted more than half a century ago:

The unqualified acceptance of the legal definitions of the basic units or elements of criminological enquiry violates a fundamental criterion of science. The scientist must have freedom to define his own terms, based on the intrinsic character of his material...the acceptance of the categories of specific forms of 'crime' and 'criminal' as laid down in law renders criminological research theoretically invalid from the point of view of science.

The aim of the analysis presented below is to develop an empirically valid social classification of drug use. As well as providing the basis for the following chapters, this classification addresses some important substantive issues in its own right. Building on previous work, it highlights the limited and transient nature of most young adults' involvement in illicit drug use. It also explores the role of self-regulation, with particular reference to the influence of the law and perceptions of harmfulness. As part of the analysis, social dimensions of drug use will be compared to both the established legal classification and the revised classification proposed by the Independent Inquiry into the Misuse of Drugs Act.

Legal classification in context

The notion that drugs should be subject to legal control is a relatively recent development. For much of the nineteenth century drug markets were largely based on the spirit of free enterprise, with little external regulation (Parssinen, 1983; Berridge and Edwards, 1987). The 1868 Pharmacy Act introduced the first legal controls on the availability of drugs in Britain and gave pharmacists a monopoly over the distribution of opium and morphine derivatives (Orford, 1985; Berridge and Edwards, 1987). Even by the end of the nineteenth century, however, it was still the case that cannabis, cocaine, morphine and heroin, complete with hand-tooled syringes and injecting kits, could be bought over the counter from chemists on both sides of the Atlantic (Jay, 2000).

With the introduction of stricter controls in the early part of the following century, Britain and America began to pursue quite different strategies. In America, the government adopted an explicitly 'moral' or 'ideological' stance, which principally defined drug use as a matter for the criminal justice system (MacGregor, 1999). Under the terms of the 1914 Harrison Act, doctors were prosecuted for dispensing opiates to addicts and this led to the closure of all drug treatment clinics within ten years (Orford, 1985). At around the same time, the U.S government successfully lobbied for the introduction of the 1912 International Opium Convention, which marked the beginning of a consistent campaign for tougher enforcement of global prohibition (Drugscope, 2003; Klein and Jay, 2003). As the

century progressed, this ideological stance was encapsulated in President Nixon's 'total war on drugs', which was revived under President Reagan, and has continued to shape recent initiatives such as 'zero tolerance' and 'three-strikes-and-you're-out' (Elvins, 2002; South, 2002; Newburn, 2002a). The cumulative effect of these developments has meant that the US imprisonment rate for drug offences alone is higher than that of most Western European countries for all crime put together (MacCoun and Reuter, 2001).

British drugs policy has tended to be more pragmatic, involving a greater balance between 'care' and 'control' (MacGregor, 1999). As well as repeatedly frustrating early American attempts to restrict the international opium trade, Britain maintained a set of domestic controls that fell well short of outright prohibition for much of the last century (Drugscope, 2003; Klein and Jay, 2003). In an arrangement that was formalised by the 1924 Rolleston Committee and came to be known as the 'British system', the possession of opium and cocaine was legally permitted under prescription from a general medical practitioner (Spear and Mott, 2002). Although often characterised as 'liberal' and 'progressive', this arrangement was seen by those responsible for its introduction as a pragmatic solution to a declining problem (Spear and Mott, 2002). The predominant medical discourse of the time was heavily influenced by moral and penal positions (Pearson, 1991; Kohn, 1992) and the British system prevailed for as long as it seemed to contain the drug problem. When drug use increased, taking new and diverse forms, in the mid-to-late 1960s, a series of reforms was introduced which pushed Britain towards an explicitly control-led approach. Between 1964 and 1971 the British Government ratified the United Nations Single Convention on Narcotic Drugs; strict legal controls were imposed on the possession, supply and production of a wide range of illicit substances; and treatment was tied much more closely to regulation and control (Pearson, 1991; Dorn and Lee, 1999; South, 2002; Spear and Mott, 2002).

The 1971 Misuse of Drugs Act

The 1971 Misuse of Drugs Act played a key role in this general reorientation and gave rise to one of the harshest drugs regimes in Europe (Dorn and Lee, 1999; Police Foundation,

2000). Although the introduction of this legislation represented an important milestone it did not signal a major change of philosophy as increased control was achieved through the continued fusion of medical and legal perspectives (Young, 1971; South, 1999). Recently introduced arrangements for limiting the prescription of heroin and cocaine were maintained and legal penalties were tied to a new system of classification that was firmly rooted in a medicalised philosophy.

The Misuse of Drugs Act divided illegal drugs into three classes, which were subject to progressively harsher penalties (Police Foundation, 2000). Drugs were allocated to classes on the basis of the following explicit criteria: (1) whether they are being misused; (2) whether they are likely to be misused; and (3) whether the misuse in either case is having or could have harmful effects sufficient to constitute a problem. A key distinction was drawn between the offences of unlawful possession and unlawful possession with the intent to supply and the severity of the penalty varied according to the apparent harmfulness of the drug, with the severest penalties being imposed on the most harmful substances (see Table 2). When the then Home Secretary, James Callaghan, introduced the new legislation he said (see Police Foundation, 2000, 39):

The object here is to make, so far as possible, a more sensible differentiation between drugs. It will divide them according to their accepted dangers and harmfulness in the light of current knowledge and it will provide for new changes to be made in the light of new scientific knowledge.

In making these comments, the Home Secretary exaggerated the scientific nature of the new classification because it seems that no explicit criteria were used to assess the harmfulness of the various drugs (Police Foundation, 2000). As things turned out, his comments also exaggerated the provisional nature of the new classification. The Advisory Council on the Misuse of Drugs carried out the first full review of legal classes some eight years after they were introduced, concluding that the existing classification was broadly satisfactory (Home Office, 1979). It made only two recommendations, that methaqualone (a sedative) be transferred from Class C to Class B, which was accepted, and that cannabis and cannabis resin be transferred from Class B to Class C, which was rejected. The second systematic review of the classes did not take place for another 20 years or so, when the

Table 2
Legal classification of drugs and associated penalties under British law (1971-2002)

	Class A	Class B	Class C
Main drugs in each class	Cannabinol and cannabinol derivatives, cocaine (including 'crack'), dipipanone, ecstasy and related compounds, heroin, LSD, magic mushrooms, morphine, opium, pethidine and phenylcyclidine	Amphetamines, barbiturates, cannabis, codeine, dihydrocodeine and methamphetamine Class B drugs that are prepared for injection are classed as Class A.	Anabolic steroids, benzodiazepines, buprenorphine, diethylpropion, mazindol, pemoline and phentermine
Maximum penalties			
Possession	7 years imprisonment or an unlimited fine or both	5 years imprisonment or an unlimited fine or both	2 years imprisonment or an unlimited fine or both
Possession with intent to supply	Life imprisonment or an unlimited fine or both	14 years imprisonment or an unlimited fine or both	5 years imprisonment or an unlimited fine or both

Source: Police Foundation, 2000

Notes:

1. The information given here includes additions to the classes made since the introduction of the Misuse of Drugs Act: ecstasy, for example, was only included in 1984 (Police Foundation, 2000).
2. Cannabis was transferred into Class C in January 2004, while methamphetamines was transferred into Class A in January 2007 (www.drugs.gov.uk).

Independent Inquiry into the Misuse of Drugs Act 1971 was quickly followed by a House of Commons Home Affairs Select Committee inquiry into the effectiveness of the Government's drugs policy.

Reclassification and reform

The Independent Inquiry was established in 1997 by the Police Foundation, with the assistance of the Prince's Trust, 'to assess whether the law as it currently stands needs to be revised in order to make it both more effective and more responsive' (Police Foundation,

2000, 1). After considerable deliberation it concluded that ‘demand will only be significantly reduced by education and treatment, not by the deterrent effect of the law’ (Police Foundation, 2000, 8). A call for a less punitive approach to possession offences was supported by a detailed programme of reform, which included the following recommendations: cannabis and cannabis resin be transferred from Class B to Class C; ecstasy and LSD be transferred from Class A to Class B; the power of arrest be removed for most cannabis possession offences; and prison sentences be abolished for most possession offences¹. A clear distinction was drawn between possession and supply, however, as the Inquiry called for a new offence of ‘dealing’ and stronger administration of existing laws against trafficking (Police Foundation, 2000).

Despite initially rejecting all of the Inquiry’s major recommendations, the Labour Government softened its opposition to reform shortly after the 2001 General Election. Within days, the new Home Secretary, David Blunkett, declared that there ‘is room for an adult intelligent debate’ (*The Guardian*, July 9, 2001); within weeks the House of Commons Home Affairs Select Committee had been charged with the responsibility of conducting a review of the Government’s drug policy; and within months, when giving evidence to this committee, the Home Secretary announced his intention to transfer cannabis to Class C (*The Guardian*, 26 July 2001 and 24 October 2001). As part of the reform-process the Advisory Council on the Misuse of Drugs was asked to review the classification of cannabis in the light of current scientific evidence. Both the Select Committee (2002) and the Advisory Council (2002) endorsed the proposed reclassification of cannabis, with the former doing so alongside the recommendation to reclassify ecstasy from class A to B. Although the legal status of ecstasy has remained unchanged, the reclassification of cannabis came into force at the beginning of 2004 and represented the first significant move towards liberalisation in over 30 years².

¹ The Inquiry rejected custodial penalties for possession of Class B and Class C drugs and proposed a shortened maximum prison sentence for possession of Class A drugs where community and treatment sentences had failed or were rejected.

² Although symbolically important, this reform was somewhat less radical than was originally envisaged. Powers of arrest and imprisonment were retained for possession offences although there was to be a presumption against arrest and the maximum penalty was reduced from 5 to 2 years custody. The maximum

Assessing harmfulness

Recent moves to reform have been framed within the established harms perspective. Although the Independent Inquiry argued that laws should reflect ‘the social and cultural attitudes of modern Britain’ and gave some consideration to public opinion and levels of illicit drug use these considerations were of decidedly secondary importance (Police Foundation, 2000, 1). The Inquiry endorsed the existing three-tiered legal framework and accepted that dangerousness should continue to provide the main criterion for classification. Reclassification of certain substances was recommended in order that ‘the classes provide a more accurate hierarchy of harm and commensurate sanctions’ (Police Foundation, 2000, 4). The recommendations made by both the Select Committee (2002) and the Advisory Council (2002) were also grounded in the notion of harmfulness and the response from Government was couched in similar terms, with ministers consistently presenting the reclassification of cannabis as a way of concentrating resources on the most harmful drugs, such as heroin and cocaine.

The assumption that drugs have an inherent degree of harmfulness, which can be measured and ranked is less straight-forward than may first appear (Best et al., 2001; House of Common Science and Technology Committee, 2006). Not only is there an absence of agreed criteria by which harmfulness can be assessed, but the potential for harm is mediated by various external factors. The influence of socio-legal arrangements is evident from the claim that the harms associated with illegal drug use are, in part at least, a function of prohibition (Lindesmith, 1965; Schur, 1965; see also: www.tdpf.org.uk). More specifically, the potential for harm depends upon the disposition and susceptibilities of individual users, while dosage and tolerance provide further complicating factors (Best et al., 2001). Even apparently innocuous substances such as water and common salt can be fatal when used to excess. Conversely, the regular use of some apparently harmful substances such as heroin produces increased tolerance, so that experienced users can tolerate doses which would probably prove fatal to non-users (Gossop, 1996). None of this

penalty for supplying Class C drugs, by contrast, was increased from 5 to 14 years imprisonment, which meant, in effect, that the penalty for supplying cannabis remained unchanged (Trace et al., 2004).

is to deny that different drugs have different pharmacological properties, nor that these properties can be understood in terms of degrees of harmfulness. But it does make it clear that developing a harms-based classification is far from straightforward and that the results of such classification will vary according to which criteria are given priority (Best et al., 2001).

Even when apparently similar criteria are used differences may arise. Under U.S law, the 1970 Controlled Substances Act classifies substances that are subject to regulation under federal law, placing each of them in one of five schedules according to its medicinal value, harmfulness and potential for abuse or addiction (www.usdoj.gov). Schedule I is reserved for drugs which are considered to have a high potential for abuse and no recognised medicinal use; Schedule II covers drugs with a high potential for abuse, some (but often marginal) medical use, and a high incidence of physical or psychological dependence; and, at the other end of the scale, Schedule V covers drugs which are deemed to have the lowest potential for abuse and a small incidence of physical or psychological dependence. Under this legislation, marijuana is included in Schedule I, alongside heroin and ecstasy, while cocaine is included in Schedule II, alongside amphetamines. According to American law, therefore, marijuana is considered to be among the most harmful of illegal drugs and yet, according to revised British law, it is one of the least harmful. In addition, while American law makes no distinction between cocaine and amphetamines, British law judges cocaine to be more harmful than amphetamines.

While recognising some of the inherent difficulties involved, the Independent Inquiry maintained that it is possible to reach an ‘objective’ estimate of the relative harmfulness of the various controlled drugs (Police Foundation, 2000; see also House of Common Science and Technology Committee, 2006). In the absence of any clearly established criteria, it distinguished between personal harm, made up of dangers for individual users, and social harm, made up of dangers for society in general. On the basis of this distinction, the Inquiry sought to rank the main controlled drugs according to the following criteria:

- acute (i.e. immediate) physical harm, including risk of overdose;

- physical harm from chronic (i.e. longer term) use;
- ease with which the drug may be injected;
- likelihood of the drug leading to dependence and addiction;
- physical withdrawal symptoms;
- psychological withdrawal symptoms;
- risk of social harm through intoxication (including road traffic accidents);
- risk of causing other social problems (including crime); and
- risk of medical costs arising.

The Inquiry acknowledged that social harms are particularly difficult to quantify, but suggested that the addictive and dependency potential of a drug can be used as a proxy measure on the basis that a highly addictive drug will lead to a great deal of social harm. In order to rank the main controlled drugs on these criteria the Inquiry drew on available pharmacological and other evidence. It also consulted with members of the Royal College of Psychiatrists' Faculty of Substance Misuse before dividing substances into three classes: alcohol and tobacco were included in this classification in order to put things into perspective (see Table 3).

The allocation of alcohol to Class A and tobacco to Class B reflects the considerable health risks associated with these substances³. According to the World Health Organisation (2002) tobacco poses the greatest risk to health in developed countries, while alcohol poses the third greatest risk in this context. Both substances are physically addictive and have a high/moderate and moderate dependence potential respectively (Best et al., 2001). They are, in addition, causally linked to increased morbidity and mortality due, in large part, to various forms of cancer, organ failure and strokes (Best et al., 2001; World Health Organisation, 2002; British Medical Association, 2003). Action on Smoking and Health (2004) estimates that tobacco kills approximately 114,000 people in the United Kingdom per year, representing roughly a fifth of all deaths, while the Department of Health (2001) estimates that there are between 5,000 and 40,000 alcohol-related deaths in England and

³ Similarly, a confidential report to the House of Commons Science and Technology Committee (2006) concluded that tobacco and alcohol are more harmful than LSD and ecstasy.

Wales per year⁴. Although many of these deaths are caused by long term use, both alcohol and tobacco pose significant immediate risks. Even relatively short smoking careers can damage young people's respiratory health and the acute risks associated with alcohol include death by asphyxiation and cardiovascular failure (Best et al., 2001; British Medical Association, 2003). Added to this, the intoxicating properties of alcohol are such that it is widely implicated in a range of immediate harms including accidents leading to death or injury, violent episodes, antisocial behaviour and risky sex (Newburn and Shiner, 2001; British Medical Association, 2003). It is presumably on this basis that the Independent Inquiry considered alcohol to be more harmful than tobacco.

Table 3
Harmfulness of the main controlled drugs - Independent Inquiry

Class A	Class B	Class C
Cocaine, heroin, methadone, other opiates in pure form, amphetamines in injectable form and [alcohol]	Amphetamines other than injectable, barbiturates, buprenorphine, codeine, ecstasy and ecstasy-type drugs, LSD and [tobacco]	Cannabinol and cannabinol derivatives, benzodiazepines and cannabis

Source: Police Foundation, 2000

According to the World Health Organisation (2002) illicit drugs present the eighth most serious risk to health in developed countries, behind tobacco, blood pressure, alcohol, cholesterol, obesity, low fruit and vegetable intake and physical inactivity. Despite the apparent precision of these estimates there is a marked lack of scientific evidence concerning the dangerousness of illicit drugs. The Select Committee (2002) noted the extreme difficulty of providing data which marks clear levels of harm and, in the absence of such data, it may be impossible to move beyond the most general observation that there are dangers associated with drugs use without encountering disagreement and controversy

⁴ The breadth of this estimate reflects differences in the definition of an alcohol-related death (Alcohol Concern, 2002; Baker and Rooney, 2003). Based on information from death certificates in England and Wales, the Office for National Statistics has indicated that there were 5,543 alcohol-related in 2000 and 5,970 in 2001. These figures only took account of causes of death that are regarded as being most directly due to alcohol. Deaths caused by other diseases where alcohol has been shown to have some causal relationship were not included. Much higher estimates are produced when such deaths are included, along with those caused by accidents and assaults.

(Best et al., 2001). While mortality statistics provide one of the more objective available measures there are doubts about the reliability of current reporting and recording procedures (Advisory Council on the Misuse of Drugs, 2000; Best et al., 2001). Figures produced by the Office of National Statistics, for example, have been criticised on the grounds that they include intentional self-poisoning alongside accidental poisoning and cover a broad range of legal substances, including some, such as paracetamol, which would not be classified as drugs under most conventional definitions. Excluding suicides, the most reliable recent estimates indicate that there are approximately 1,000 acute drug-related deaths resulting from accidental overdose among drug misusers in England and Wales per year (Advisory Council on the Misuse of Drugs, 2000; Griffiths, 2004)). It is clear from this estimate that illicit drugs are implicated in far fewer deaths than either tobacco or alcohol though this observation takes no account of the availability of these substances or the extent to which they are used (Best et al., 2001; South, 2002).

The scientific evidence, though far from complete, lends some credence to the basic premise that different drugs are associated with different levels of harm. It also offers some support to recent recommendations concerning the reclassification of certain substances. Heroin has been assigned a pivotal role within the hierarchy of harm, providing a benchmark for the most harmful drugs (Police Foundation, 2000). There is, however, a degree of ambiguity in the actual harms associated with this substance (Gossop, 1996; Best et al., 2001). Heroin poses few chronic health risks because, unlike alcohol and tobacco, it does not cause damage to any major bodily organ, but poses notable risks on most other dimensions of harm. Most notably, the gap between the effective dose and fatal dose of heroin is relatively small, which means there is a significant risk of overdose and consequent respiratory failure. This drug is implicated in the majority of acute drug-related deaths resulting from accidental overdose in England and Wales (Advisory Council on Drug Misuse, 2000), with recent figures indicating that there are approximately 800 deaths per year officially attributed to heroin-related drug poisoning (Griffiths, 2004). There are, in addition, notable route-specific dangers. Smoking heroin carries the risk of respiratory problems such as asthma, while injecting may result in various infections (including HIV and hepatitis), obstruction of the blood vessels and scarring, bruising and discolouration of

the skin (Best et al., 2001). Finally, heroin is physically addictive with a very high dependence potential and it follows from this that there is a considerable amount of consequent social harm. Such harms may include poor living conditions, poor diet, disrupted relationships and involvement in acquisitive crime: estimates suggest that as much as one-third of all property crime in the United Kingdom is drug-related and it is clear that heroin users account for the majority of this offending (Bennett, 2000; Police Foundation, 2000; Best et al., 2001).

Other substances controlled under the Misuse of Drugs Act have quite different harms profiles. Stimulants, for example, though generally less harmful than heroin carry the greatest threat of long-term health damage (Police Foundation, 2000). Amphetamines are associated with various acute and chronic health risks ranging from circulatory collapse through to heart attacks, brain damage, chronic paranoid psychosis (including possible increases in aggression) and neurological damage. Additional risks are posed by injecting. At the same time, however, amphetamines have a lower level of acute toxicity than heroin, are less clearly physically addictive and have no more than a moderate dependency potential (Best et al., 2001). The chronic effects of ecstasy are less clear but may include mild memory impairment, mood changes (including heightened aggressiveness and impulsivity) and increased risk of mental illness later in life. Possible acute effects include death caused by heatstroke and dehydration leading to kidney damage, brain damage and stroke although such outcomes are relatively rare (Best et al., 2001). Recent figures indicate that ecstasy is implicated in no more than 55 officially recorded drug-related deaths in England and Wales per year (Griffiths, 2004). While the best available toxicity estimates indicate that ecstasy is considerably less dangerous than heroin, population safety comparisons suggest that it may be several thousand times less so (Police Foundation, 2000). There is, in addition, no observable withdrawal syndrome with this drug and the potential for dependence is low (Best et al., 2001). On this basis ecstasy may be considered significantly less harmful than heroin.

The same may be said of LSD. This drug is a powerful hallucinogen and its main acute risks are related to the possibility of psychotic episodes and self-harm, accidents or violence

while intoxicated. Adverse chronic effects include flashbacks, depression, feelings of isolation, tiredness, delirium and possible psychosis. LSD is rarely implicated in drug-related poisonings, however, and there are no known physical dangers associated with its long-term use. There are, in addition, no withdrawal symptoms and its dependence potential is very low (Best et al., 2001; see also Griffiths, 2004).

The reclassification of cannabis proceeded largely on the basis that it is less harmful than other Class B drugs and there is reasonable scientific evidence to support this position (Gossop, 1996; Best et al., 2001; Select Committee, 2002). Cannabis poses no risk of fatal overdose and has a very low dependence potential. It does have some adverse acute effects but they tend to be relatively mild, including irritation to the respiratory system, abdominal pain and temporary psychological distress. As an intoxicant, cannabis impairs judgment and co-ordination thereby increasing the risks associated with driving and operating machinery. There is little reliable information regarding the chronic risks associated with this drug but it may have similar adverse effects to tobacco smoking because it exposes the respiratory system to the same type of toxic products. Long-term cannabis use may cause bronchial and respiratory disorders and may be a contributory cause of cancers of the aerodigestive tract. There is, however, no conclusive evidence that it causes cancer in humans. Other chronic physical risks include inhibition of reproductive functions, possible suppression of the immune system, insomnia, depression, aggression, anxiety and subtle cognitive impairment (e.g. memory loss). A clear association has also been found with schizophrenia but the precise nature of this link remains unclear.

Although the Independent Inquiry's recommendations went some way towards establishing a more accurate hierarchy of harm they arguably did not go far enough. While proposing the transfer of LSD from Class A to B the Inquiry made no such recommendation in relation to magic mushrooms. This is odd because these drugs are very similar in terms of pharmacological effects and associated risks and there is no obvious scientific rationale for distinguishing between them (Best et al., 2001; see also House of Common Science and Technology Committee, 2006). More controversially, perhaps, the continued separation of cocaine and amphetamines can be challenged on similar grounds. Both the Independent

Inquiry and the Select Committee concluded that cocaine was sufficiently harmful to justify its inclusion in Class A, alongside heroin. But a leading addiction specialist has described the juxtaposition of these two drugs as a 'legal quirk' because they have next to nothing in common (Gossop, 1998, 148). In terms of actions and effects, cocaine is similar to amphetamines and is not physically addictive in the same way as heroin (Gossop, 1998; Advisory Council on the Misuse of Drugs, 2000; Royal College of Psychiatrists, 2000). Although cocaine has the potential to cause death by accidental overdose it is much less widely implicated in drug-related poisonings than heroin and is, once again, much closer to amphetamines in this regard: between 1998 and 2002 cocaine was associated with 469 deaths that were officially attributed to drug-related poisoning in England and Wales, compared with figures of 4,005 for heroin and 386 for amphetamines (including ecstasy) during the same period (Griffiths, 2004)⁵.

Social dimensions of drug use

Although the established harms perspective has come through recent reviews of drugs policy more or less unscathed, this does not mean it provides a suitable starting point for sociological analysis. In the year that the Misuse of Drugs Act was introduced, Jock Young (1971, 45-6) complained of 'myopic' approaches to drug use which concentrate on pharmacological effects and largely ignore the cultural context and social meanings of behaviour:

To describe adequately a particular form of drug use, then, we must use what I will term a socio-pharmacological classification. Thus we will need to divide drug users up into categories which describe patterns of drug use involving similar social meanings and beliefs, on the one hand, and drugs with closely related pharmacological effects on the other... The problem of proper classification of drug use is, in this light, not a mere academic whim, but a necessity if we are to create meaningful categories with which to explain the reasons why certain groups take drugs and the likely consequences of such behaviour.

⁵ The harmfulness of cocaine depends in part on the form in which it is used. Freebase cocaine or 'crack' poses greater risks of physical harm than powder cocaine and has a greater dependence potential, which is reflected in the involvement of crack users in drug-related crime (Best et al., 2001; Bennett, 2000). This may justify separating powder cocaine from crack for the purposes of legal classification much in the same way that recent changes have separated amphetamines from methamphetamine.

Social scientists have shown surprisingly little interest in establishing what such a classification might look like, preferring instead to categorise substances according to their legal status (MacDonald, 1999; Roe and Man, 2006) or ‘apparent’ social attributes (Ramsay and Percy, 1996). My aim, in what follows, is to develop an empirically meaningful social classification of drug use which is sensitive to levels of use, underlying patterns of use, age of onset, the extent of users’ repertoires and motivations for non use.

The extent of illicit drug use

In Britain, illicit drug use has come to occupy an ambiguous position. On the one hand, it is far from unusual for young adults to have tried an illicit drug at some point in their lives, with the 1998 BCS and 1998/9 YLS indicating that approximately half have done so (see Table 4). On the other hand, much of this use remains hesitant, tentative and short-lived. According to both the BCS and YLS young adult drug users have, on average, only ever used two substances and between a third and a half have only used a single substance (34 per cent according to the YLS and 45 per cent according to the BCS)⁶. The tentative nature of much illicit drug use is also apparent from the extent to which it is, or is not, evident during the last year. Based on this measure, between a quarter to a third of young adults are recent users, while almost as many are ex-users (between a fifth and a quarter)⁷. Evidence of past use increases with age, moreover, so that young adults in their late 20s are more likely to be ex-users than recent users (see chapter seven for details).

Prevalence rates for individual drugs varied considerably and provide the foundations for social classification. Cannabis is comfortably the most widely used illicit drug, followed by amphetamines and a range of other stimulants and hallucinogens. At the other end of the spectrum, heroin and methadone are rarely used. The idea that drugs can be grouped together is well-established in popular consciousness and lay-attitudes reflect a hierarchy of

⁶ Unless otherwise stated the ‘average’ refers to the median, which has been used as the preferred measure of central tendency where there is evidence of a departure from the Normal distribution.

⁷ Drawing on the definitions used by Graham and Bowling (1995) in their analysis of general offending, current use has been defined as that which had taken place during the previous 12 months.

Table 4
Prevalence of drug use among young adults and medico-legal classification

	Ever used (percentage)		Used in last year (percentage)		Legal classification	
	BCS	YLS	BCS	YLS	Misuse of Drugs Act	Independent Inquiry
Cannabis	41 (39-44)	49 (47-51)	22 (20-24)	30 (28-32)	B	C
Amphetamines	19 (17-21)	27 (24-29)	8 (6-9)	11 (10-12)	B	B
Amyl nitrates	16 (14-17)	21 (19-22)	4 (3-4)	4 (3-5)	Unclassified	None made
Ecstasy	10 (8-11)	13 (12-15)	4 (3-5)	6 (5-7)	A	B
LSD	10 (9-11)	15 (14-17)	2 (1-3)	2 (2-3)	A	B
Magic mushrooms	10 (9-11)	13 (11-14)	2 (2-3)	3 (2-4)	A	None made
Glues, solvents, gas or aerosols	6 (5-7)	9 (7-10)	1 (0-1)	1 (1-2)	Unclassified	None made
Cocaine	6 (5-7)	11 (8-12)	3 (2-4)	6 (5-7)	A	A
Crack	1 (1-2)	2 (1-2)	*	*	A	A
Heroin	1 (0-1)	2 (1-2)	*	1 (0-1)	A	A
Methadone	1 (0-1)	1 (1-1)	*	*	A	A
Any drug	49 (47-52)	54 (52-56)	25 (23-27)	33 (30-35)	-	-

Source: 1998 BCS, 1998/9 YLS, Police Foundation, 2000 * < 0.5 per cent n = 2846 (BCS) and 3,544 (YLS)

Notes:

1. 95 per cent confidence intervals are given in brackets.
2. The classification of cannabis according to the Misuse of Drugs Act is based on the situation at the time the 1998 BCS and 1998 YLS were administered and relates to its herbal and resin forms.
3. Solvents have been included, even though they are not controlled under the Misuse of Drugs Act, because they provide the basis for an important form of illicit drug use among young people.
4. Although the BCS and the YLS included questions about tranquillizers and steroids, these substances have been excluded from the analysis because they were rarely used and were considered to be of marginal interest.

harms which broadly resembles existing scientific and medical evidence (Pearson and Shiner, 2002). Recent research has also shown how young people take account of risks when making decisions about drugs (Coffield and Gofton, 1994; Measham et al., 1998) and this raises the question, to what extent do prevalence rates reflect the potential for harm?

Drug-specific prevalence rates are much more closely aligned to the classification developed by the Independent Inquiry than to that contained in the Misuse of Drugs Act. This is significant because it suggests that the potential for harm exercises greater influence than the law over the decisions that young adults make about drugs. The different rates at which cannabis and amphetamines are used, for example, can not be explained in terms of legal distinctions because both were Class B drugs when the data were collected, but it can be potentially explained by differences in harmfulness. Similarly, both ecstasy and cocaine are more widely used than heroin even though they share the same legal status and this may, once again, be potentially explained by differences in harmfulness. The apparent fit between prevalence and harmfulness is evident in a number of ways. Cannabis is both the least harmful and most widely used illicit drug; the hallucinogens and stimulants tend to occupy an intermediate status in terms of their relative harmfulness and the degree to which they are used; and the most harmful substances - heroin, methadone and crack - are rarely used. Although the relatively widespread use of cocaine may appear to be inconsistent with this general pattern, existing medico-legal classifications arguably overstate the harmfulness of this drug. It follows therefore that cocaine may be more widely used than heroin, in part at least, because it is less harmful.

While less harmful drugs tend to have higher prevalence rates, a similar fit is evident between harmfulness and the intensity with which illicit substances are used. This is important because frequency of use may limit the potential for harm. Previous research has shown how drug users reflect upon and regulate their substance use (Shiner and Newburn, 1997; Parker et al., 1998; Measham et al., 1998) and the frequency with which drugs are used appears to play an important role in this regard. In particular, moderation and desistance after a brief period of experimentation seem to provide a basis on which many young adults seek to manage the risks associated with drugs. The typically tentative,

hesitant and short lived nature of illicit drug use is particularly marked in relation to those substances that provide the basis for the more harmful forms of recreational use and it may be that moderation and desistance are considered to be particularly important in relation to these substances⁸.

As the least harmful illicit drug, cannabis is not only the most widely used but is also the most intensively used. According to both the BCS and YLS it is associated with the lowest rate of desistance, with approximately half to three-fifths of young adult cannabis users having used it during the last year (53 per cent according to the BCS and 61 per cent according to the YLS). The YLS also indicates that slightly more than a third of those who had used cannabis in the last year had done so on a weekly basis (see Table 5). Although cannabis is the most intensively used illicit drug, the extent of its use may easily be exaggerated. A sizeable proportion of young adult cannabis users had not used this substance in the last year and, of those who had, approximately half had done so on an occasional or ad-hoc basis.

Moderation and desistance were more marked in relation to stimulants and hallucinogens, reflecting the greater degree of harm associated with these substances. Although desistance rates were relatively high across these categories there were some fairly marked variations within them. Of the young adults who had ever used ecstasy, approximately three-fifths had not done so in the last year (61 per cent according to the BCS and 56 per cent according to the YLS). While this was almost identical to the desistance rate for amphetamines, much higher rates were evident for LSD, amyl nitrates and magic mushrooms (at least 75 per cent). A similar distinction was evident in relation to frequency of use, as the trend towards ad-hoc patterns of use was especially strong for LSD, amyl nitrates and magic mushrooms (see Table 5). Although ecstasy and, to a lesser extent, amphetamines were used more frequently than these drugs, moderation and desistance were still strongly apparent. It may be, as the British Medical Association (2003) has noted, that the 'binge' use of amphetamine-type stimulants presents the greatest public health risk

⁸ The number of respondents who had used heroin, methadone or crack was insufficient to be meaningful and these substances were excluded from the analysis presented here.

associated with adolescent recreational drug use, but self-regulation appears to play an important role in moderating this risk. Almost four-fifths of the young adults who had used amphetamines in the last year had done so on an ad-hoc or occasional basis and more than two-thirds of those who had used ecstasy during this period had done so on a similar basis.

Table 5
Frequency of recent drug use (percentages, young adults)

	Ad-hoc	Routine occasional	Routine regular	Frequent	Habitual
Cannabis	35 (30-39)	14 (11-17)	18 (15-21)	12 (9-15)	21 (17-25)
Amphetamines	59 (51-66)	20 (14-25)	14 (8-19)	2 (0-5)	6 (2-9)
Ecstasy	42 (32-52)	27 (17-36)	25 (16-34)	5 (1-9)	2 (0-4)
LSD	67 (52-81)	13 (3-23)	15 (4-26)	1 (0-4)	4 (0-10)
Magic mushrooms	84 (72-96)	6 (0-14)	5 (0-12)	3 (0-8)	2 (0-6)
Amyl nitrate	73 (63-83)	14 (6-21)	9 (3-16)	1 (0-3)	3 (0-7)
Cocaine	61 (50-72)	17 (8-26)	17 (8-25)	4 (0-8)	2 (0-5)

Source: 1998/9 YLS

n = 955 (cannabis) to 77 (LSD)

Key

Habitual use - three days a week or more;

Frequent use - once or twice a week;

Routine regular use - between once and three times a month;

Routine occasional use - once every couple of months; and

Ad-hoc use - once or twice in the last year.

Notes:

1. 95 per cent confidence intervals are given in brackets.

2. Questions about frequency of use were not included in the BCS.

Finally, although cocaine had a relatively low desistence rate (52 per cent according to the BCS and 44 per cent according to the YLS) this did not reflect particularly intensive forms of use. In terms of the frequency with which it was used, cocaine had a very similar profile to amphetamines, with almost four-fifths of current users consuming it on an ad-hoc or occasional basis.

Underlying patterns of use

While prevalence rates provide some support for the idea that illicit drugs can be grouped together on the basis of social attributes, this possibility was assessed more formally by looking at underlying patterns of use. Such patterns were identified by examining the way in which various forms of drug use are associated with one another. Analyses were restricted to young adults who had used at least one illicit drug at some point and, for each substance, distinctions were drawn between abstinence (having never used), desistance (used but not in the last year) and recent use (used in the last year). All possible comparisons were made between the various substances and this revealed a high degree of consistency between the two surveys as well as considerable stability over time⁹.

Throughout the period from 1994 to 1998 young adults' illicit drug use was consistently organised around three distinct groupings or families of drugs. The composition of these groupings reflects a similar, albeit more finely graded, set of distinctions to that which is evident in the general population's perceptions of harm (Pearson and Shiner, 2002). Cannabis formed a group on its own and was not strongly associated with any other specific substance: although most strongly associated with ecstasy, amphetamines and LSD, these relationships were fairly modest in strength (Kendall's tau-b was between 0.21 and 0.30 according to both the BCS and YLS).

Underlying patterns of use also highlight the empirical validity of the 'hallucinant' category, which combines stimulants and hallucinogens, including amphetamines, LSD, magic mushrooms, ecstasy and amyl nitrate (Ramsay and Percy, 1996). In general, these substances were fairly strongly associated with one another and were weakly associated with other drugs. With one possible exception, all of the hallucinants were most strongly

⁹ The average (mean), absolute difference between corresponding correlation coefficients from the 1998 BCS and the 1998 YLS was 0.049 and in only 6 out of 78 cases were the differences greater than 0.1. The average (mean) absolute difference between corresponding correlation coefficients from the 1998 and 1996 BCS was 0.05 and between the 1998 and 1994 BCS it was 0.056.

associated with another substance in this category¹⁰, though the strength of the relationships varied: associations between amphetamines, ecstasy and LSD and between LSD and magic mushrooms were relatively strong, but amyl nitrates was less strongly associated with the other hallucinants (see Table 6).

Table 6
Strength of association between use of hallucinants (Kendall's tau-b, young adults)

	Amphetamines	Ecstasy	LSD	Amyl nitrate	Magic mushrooms
Amphetamines					
BCS	-	0.50	0.51	0.38	0.36
YLS		0.49	0.49	0.36	0.34
Ecstasy					
BCS	-	-	0.59	0.40	0.37
YLS			0.51	0.33	0.33
LSD					
BCS	-	-	-	0.40	0.49
YLS				0.33	0.46
Amyl nitrate					
BCS	-	-	-	-	0.34
YLS					0.22
Magic mushrooms					
BCS	-	-	-	-	-
YLS					

Source: 1998 BCS and 1998/9 YLS

The third, and final, grouping was made up of heroin, methadone and crack, reflecting the low levels of use of these substances and their status as 'hard' drugs. Methadone and crack were both most strongly associated with heroin. The 1998 BCS and the 1998/9 YLS indicated that for heroin and crack the correlation was 0.55 and 0.44 respectively and for heroin and methadone it was 0.41 and 0.44 respectively. The relationship between methadone and crack was somewhat weaker at 0.30 (BCS) and 0.25 (YLS).

¹⁰ Ecstasy provided the only slight exception to this general rule as the 1998/9 YLS indicated it was most strongly associated with cocaine, though the 1998 BCS indicated it was most strongly associated with LSD.

Although underlying patterns of drug use appear to have been very stable during this period, notable changes were evident in relation to ecstasy and cocaine¹¹. While ecstasy consolidated its place among the hallucinants, the position of cocaine appeared to undergo a quite fundamental shift. Ecstasy use was already most closely associated with use of LSD and amphetamines in 1994, but these relationships became notably stronger in the years that followed. Ecstasy use also became more strongly associated with the use of amyl nitrates and magic mushrooms during this period (see Table 7). These developments are particularly notable because they are consistent with the claim that ecstasy defined the prevailing mood of the 'rave' scene during the late 1980s and early 1990s, before taking its place alongside amphetamines and LSD in what became a polydrug using culture (Collin with Godfrey, 1997).

The underlying patterns of use associated with cocaine in 1994 were consistent with its image as a 'hard' drug, but a very different situation emerged over the next few years. Increases in the use of this drug (Ramsay and Partridge, 1999; Sharp et al., 2001) appear to have been part of a broader process whereby it drifted away from the most marginalised forms of use towards the 'club' scene. Such was the nature of this transformation that cocaine went from being most strongly associated with heroin to being most strongly associated with ecstasy (see Table 7). According to the BCS the proportion of young adult ecstasy users who had also used cocaine increased from 28 per cent to 41 per cent between 1994 and 1998 (or to 56 per cent according to the 1998/9 YLS), while the proportion of cocaine users who had also used heroin fell from 19 per cent to eight per cent during this period (or to 12 per cent according to the 1998/9 YLS).

Age of onset

Underlying patterns of use reflect important differences in the age at which substances were first used. The mid-to-late teens have been identified as a key period in the onset of illicit

¹¹ In 19 out of 120 cases, the absolute difference between a correlation based on the 1998 BCS and its match from the 1994 BCS was 0.1 or more. Of these cases, six related to ecstasy and four related to cocaine.

Table 7a
The changing status of ecstasy (Kendall's tau-b, young adults)

	Ecstasy		
	1994 BCS	1996 BCS	1998 BCS
Amphetamines	0.39	0.52	0.50
LSD	0.43	0.52	0.59
Magic mushrooms	0.24	0.28	0.37
Amyl nitrates	0.27	0.35	0.40

Note: confirming the general pattern from the 1998 BCS, the 1998/9 YLS indicated that ecstasy use was associated with other forms of hallucinant use at the following rate: amphetamines (0.49), LSD (0.51), magic mushrooms (0.33) and amyl nitrates (0.33).

Table 7b
The changing status of cocaine (Kendall's tau-b, young adults)

	Cocaine		
	1994 BCS	1996 BCS	1998 BCS
Amphetamines	0.25	0.34	0.37
Ecstasy	0.28	0.43	0.45
LSD	0.28	0.37	0.36
Crack	0.22	0.36	0.24
Heroin	0.38	0.30	0.21

Notes:

1. Once again, confirming the general pattern from the 1998 BCS, the 1998/9 YLS indicated that cocaine use was associated with the following substances at the following rate: amphetamines (0.39), ecstasy (0.52), LSD (0.40), crack (0.31) and heroin (0.26).
2. Levels of crack use among cocaine users remained fairly constant increasing slightly from 10 per cent in 1994 to 13 per cent (BCS) or 15 per cent (YLS) in 1998.

Source: BCS (1994, 1996 and 1998)

drug use (ISDD, 1994) and this was confirmed by the YLS¹², which indicated that a slight majority (54 per cent) of young drug users first used an illicit substance when they were 13 to 16 years of age and that the average age of first use was 16. The earliest age of onset was evident in relation to solvents which were first used at an average age of 14 years, with nearly two-thirds (64 per cent) of users using them before the age of 15 (see Table 8). At the other end of the spectrum, cocaine was first used at an average of 19 years of age, with almost two-fifths (39 per cent) of users waiting until they were 21 or older before using this substance.

The average age at which specific substances were first used points to a fairly tightly compressed pattern of onset. There appears to be very little difference between the age at which cannabis, the hallucinants and heroin were first used. This is somewhat misleading, however, as the figures given in Table 8 include a large number of people who had only ever used one illicit substance, most of whom had only used cannabis and many of whom had started to do so relatively late-on. More detailed analysis of poly-drug use revealed a clearer, extended, career of onset, in which specific substances were markers for different stages of development (see Figure 1). This analysis was based on comparisons between the age (in years) at which specific substances were first used. Paired tests were used and comparisons were made on the basis of individuals who had used both substances of interest. The numbers in Figure 1 show the average difference in years of age between the first use of one substance and another. Thus, for example the relationship between solvents and cannabis was assessed on the basis of individuals who had used both drugs. On average, these individuals had first used solvents when they were one year younger than when they first used cannabis. Similar comparisons revealed that, on average, solvents were first used almost two years earlier than amyl nitrates. Where no significant differences were evident, substances have been grouped together¹³.

¹² Analyses relating to age of first use were based exclusively on the YLS because the relevant information was not contained in the BCS. These analyses included users aged 12-15 years old for reasons outlined in part two of the technical appendix.

¹³ In general, substances were only grouped together where there were no statistically significant differences between them. The only exception to this related to cocaine and crack. While cocaine tended to be used significantly earlier than crack (on average by 1.5 years), neither of these substances started to be used significantly earlier than either heroin or methadone. Consequently, all of these substances were grouped

Table 8
Average age when illicit drugs were first used (all users aged 12-30)

	Average age of first use (median)
Cannabis	16 (16-16)
Amphetamines	17 (17-18)
Amyl nitrates	16 (16-17)
Ecstasy	18 (18-19)
LSD	17 (16-18)
Magic mushrooms	17 (16-17)
Glues, solvents, gas or aerosols	14 (14-14)
Cocaine	19 (19-21)
Crack	18 (17-19)
Heroin	17 (16-19)
Methadone	18 (16-21)
Any drug	16 (15-16)

Source: 1998/9 YLS

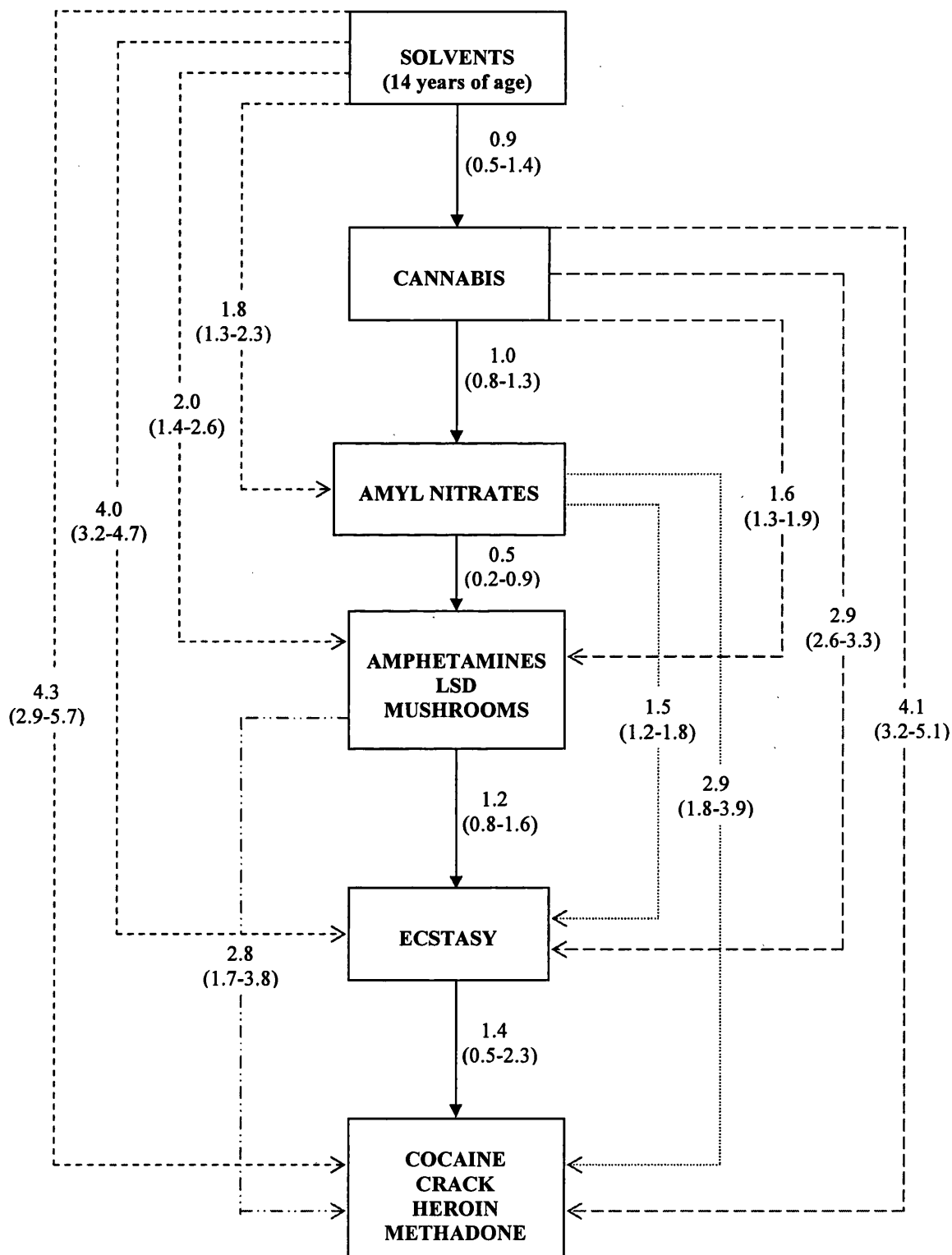
n = 1,919 (any drug) to 33 (methadone)

Note: 95 per cent confidence intervals are given in brackets.

A certain degree of orderliness is evident in the way in which poly-drug use typically unfolds, though it should be noted that drug-using careers can begin, end, or stall at any point and that few users progress to the later stages (Measham et al., 1998). In their fullest form, poly-drug users' careers of onset typically developed over a period of approximately

together. Where substances have been grouped, the values given in Figure 1 represent the average (mean) of the individual comparisons. For more details about this analysis see part two of the technical appendix.

Figure 1
Career of polydrug use
 (mean difference in years of age when first used, all users aged 12-30)



Note: 95 per cent confidence intervals are given in brackets

Source: 1998/9 YLS

four years and broadly confirmed the underlying patterns of use described above. The distinctiveness of cannabis was reflected in its position towards the beginning of users' careers. Cannabis use typically predated use of hallucinants by an average of one (for amyl nitrates) to 2.9 years (for ecstasy). Although solvents were not widely used, they were the only illicit substance that tended to be used before cannabis. At the other end of the spectrum, users' careers confirmed the coherence of the crack, heroin and methadone grouping as use of these substances tended to start at roughly the same time and constituted the final phase of onset.

Although the hallucinants tended to be located towards the middle of a fully developed career, there were notable differences between the substances that made up this category. Amphetamines, LSD and magic mushrooms grouped together - no significant differences were evident in the age of onset for these substances - but tended to be used slightly later than amyl nitrates and somewhat earlier than ecstasy. Given that LSD, amyl nitrates and magic mushrooms were characterised by particularly ad-hoc patterns of use and high rates of desistance, this pattern supports the suggestion that these substances, along with solvents, tend to provide the basis for 'early experimentation' (Measham et al., 1998, 13).

Finally, the position of cocaine suggests a degree of ambiguity in its overall status. In the previous section it was shown that cocaine has drifted away from the most marginalised forms of drug use towards those substances most closely associated with the 'club' scene, particularly ecstasy. According to Figure 1, however, cocaine tends to be first used somewhat later than the hallucinants, including ecstasy, and at about the same time as heroin and methadone. While this suggests a degree of uncertainty, the status of cocaine was clarified by variations in the extent of users' repertoires.

Variations in the extent of users' repertoires

Although illicit drug use is typically tentative and hesitant, specific substances are markers for different levels of experience. Findings from the BCS and YLS were highly consistent

in this regard (see Table 9) and point towards a classification which is very similar to that suggested by underlying patterns of use and careers of onset.

While cannabis use typically starts early on in poly-drug users' careers, it also tends to take place in the context of highly restricted repertoires. As such, it has a very limited role as a gateway to more harmful substances (Drugscope, 2001). The BCS and YLS indicated that young adult cannabis users had, on average, only ever used one other illicit substance and that between a third and two fifths had restricted themselves to cannabis. Put another way, slightly more than a quarter of all young adult drug users had only ever used cannabis. At the other end of the spectrum, crack, heroin and methadone were indicative of fully developed, mature, repertoires. Young adults whose drug using careers progressed this far had, on average, used a total of nine or ten illicit substances.

Once again, the hallucinants occupy the middle ground, as they were generally used in the context of moderately well-developed repertoires. There is, moreover, little evidence of variation between these substances. Although amphetamines tended to be used in the context of significantly narrower repertoires than ecstasy and LSD, no other significant and consistent differences were apparent between the hallucinants¹⁴. More importantly, perhaps, cocaine was used in the context of repertoires which were very similar to those associated with ecstasy, LSD and magic mushrooms and which were significantly, and fairly substantially, narrower than those associated with heroin, crack and methadone. When combined with the analysis described earlier, this indicates that cocaine is best viewed as a late feature of 'recreational' drug-using careers.

Finally, it is worth noting the position of solvents, as their use appears to be an early indicator of relatively extensive repertoires. Solvent use tended to occur in the context of fairly well developed repertoires and was typically located at the beginning of users'

¹⁴ This is reflected in the confidence intervals, as those for amphetamines do not include the median figure for ecstasy or LSD and vice versa. The YLS indicates that the repertoires associated with amphetamines were significantly narrower than those associated with magic mushrooms. This pattern was not confirmed by the BCS, however, as the confidence interval for amphetamines included the median for magic mushrooms. Similarly while the BCS pointed to a significant difference between amyl nitrates and ecstasy and LSD this was not confirmed by the YLS.

Table 9
Extent of young adult drug users' repertoires (number of drugs used)

<i>If used...</i>	Median number of substances used	
	BCS	YLS
Cannabis	2 (2-2)	2 (2-3)
Amphetamines	4 (4-5)	4 (4-5)
Amyl nitrates	4 (4-5)	5 (4-5)
Ecstasy	6 (5-6)	6 (5-6)
LSD	6 (5-6)	6 (5-6)
Magic mushrooms	5 (5-6)	6 (5-6)
Glues, solvents, gas or aerosols	5 (4-6)	5 (4-6)
Tranquillisers	6 (5-7)	7 (6-8)
Cocaine	6 (5-7)	6 (6-7)
Crack	a	9 (8-10)
Methadone	a	10 (8-11)
Heroin	a	9 (8-10)
Any drug	2 (2-2)	2 (2-3)

Source: 1998 BCS and 1998/9 YLS

a=insufficient cases

n = 1,266 (any drug) to 18 (methadone) for the BCS and 1,804 (any drug) to 63 (methadone) for the YLS

Notes:

1. 95 per cent confidence intervals are given in brackets.
2. The figures presented here are based on individuals who had ever used the particular substance in question. Steroids have not been included as they had been used by very few respondents (< 40) and the confidence intervals were very wide. While the number of methadone users was also very small the confidence interval was reasonably narrow for the estimate based on the YLS.

careers. However, underlying patterns of use indicate that use of such substances was not particularly strongly linked to use of any other specific substance¹⁵.

Reasons for non-use

Although the reasons people give for not using illicit drugs have received relatively little attention, they help to clarify the nature of the relationship between medico-legal and social dimensions of drug use. A useful starting point for discussion in this area is provided by American research into why people obey the law. Tom Tyler (1990, 178) compared 'instrumental' and 'normative' perspectives and concluded that normative issues are more important than dominant 'self-interest' models allow for. In essence, he suggested that people evaluate laws in normative terms and obey them if they consider them to be 'legitimate and moral'.

One of the few pieces of British research to consider young people's reasons for not using illicit drugs found that, while motivations varied between substances, lack of interest in the effects was the most commonly given reason (Fountain et al., 1999). Fear of addiction and harm were also frequently mentioned in relation to a variety of substances. By contrast, lack of opportunity was not quoted as the major reason for non-use of any drug, references to legal deterrents were notable by their absence and cost only appeared to be a barrier to the use of cocaine.

Motivations for non-use were also explored in the YLS. In this context non-use was defined separately in relation to cannabis, the hallucinants (amphetamines, ecstasy, LSD, magic mushrooms and poppers) and cocaine/opiates (cocaine, crack, heroin and methadone)¹⁶. Attempts to assess the extent to which people had not used these drugs 'because it is illegal', 'because I might get caught by the police' or 'because they might

¹⁵ Although solvents were most closely associated with LSD this association was relatively weak (0.18 according to the BCS and 0.17 according to the YLS).

¹⁶ In other words, respondents who had not used hallucinants were asked why this was regardless of whether or not they had used cannabis.

harm me' were particularly relevant to the analysis presented here because they helped to separate out the influence of legal deterrents and the potential for harm. Overall, these considerations appeared to have an important role in discouraging illicit drug use and were cited by the vast majority of young adult non-users (83 per cent to 92 per cent depending on the substance). Table 10 shows the number of young adults who indicated they had never used specific drugs for the reasons given, expressed as a percentage of *all* young adults (including those who had used the drug in question)¹⁷.

Responses to the YLS indicate that concern about the law is reasonably widespread. Almost a third of young adults had not used cannabis, in part at least, because they were concerned about breaking the law and this increased to two-fifths in relation to the hallucinants and to half in relation to cocaine/opiates. Fear of being caught by the police was not so apparent, however, and legal considerations were less widely implicated in young adults' decisions not to use illicit drugs than was the potential for harm (Table 10, section A).

Concern about the law and fear of being caught by the police did not act independently of one another (Table 10, section B). A sizeable proportion of young adults indicated that they had not used specific drugs, in part at least, because they were concerned about the law and were afraid of being caught by the police. The deterrent effect of the law seems to be only partially based on fear of punishment, however: depending on the substance, between 14 per cent and 19 per cent of young adults had not used illicit drugs because they were concerned about breaking the law even though they did not appear to be worried about being caught by the police. It is also notable that a sizeable proportion of young adults had not used illicit drugs even though they did not appear to be concerned about breaking the law or being caught by the police: 17 per cent in relation to cannabis, 21 per cent in relation to the hallucinants and 30 per cent in relation to cocaine/opiates.

¹⁷ Young adults who had taken illicit drugs were included in the analysis because they were crucial in establishing the degree to which various considerations acted as a deterrent. Illicit drug-users may be viewed as those for whom deterrents have proved ineffective.

Table 10
Reasons for non-use among young adults (percentages)

Never used because concerned about...					
A.	...illegality	...police detection	...harm	...other issues	have used
Cannabis	30 (28-32)	19 (17-21)	36 (34-38)	9 (7-10)	50 (47-52)
Hallucinants	40 (38-42)	27 (25-29)	53 (51-55)	7 (6-8)	36 (34-39)
Cocaine/opiates	52 (50-54)	39 (37-41)	78 (76-80)	7 (6-8)	12 (10-13)
B.	...illegality and police detection	...illegality but not police detection	...police detection but not illegality	...other issues	have used
Cannabis	16 (14-18)	14 (12-15)	3 (2-4)	17 (16-19)	50 (47-52)
Hallucinants	24 (22-26)	16 (14-18)	3 (2-4)	21 (19-23)	36 (34-39)
Cocaine/opiates	33 (31-35)	19 (17-21)	6 (5-7)	30 (28-32)	12 (10-13)
C.	...illegality and harm	... illegality but not harm	...harm but not illegality	...other issues	have used
Cannabis	25 (23-27)	5 (4-6)	11 (10-12)	9 (8-11)	50 (47-52)
Hallucinants	36 (34-39)	3 (3-4)	16 (15-18)	7 (6-8)	36 (34-39)
Cocaine/opiates	49 (47-51)	3 (2-4)	29 (27-31)	7 (6-8)	12 (10-13)

Source: 1998/9 YLS n = 3,474 (cannabis); 3,404 (hallucinants) and 3,428 (cocaine/opiates)

Notes:

1. The figures given here show the percentage of young adults whose non-use was, in part at least, motivated by the specified deterrent or combination of deterrents.
2. 95 per cent confidence intervals are given in brackets

Finally, the deterrent effect associated with harmfulness highlighted the importance of normative values (Table 10, section C). Depending on the substance, between a quarter and half the young adults had not used illicit drugs because they did not want to break the law and because they were concerned about the potential for harm. Very few, five per cent or less, appeared to be motivated out of respect for the law in the absence of concern about harm, which suggests that the purely symbolic value of the law is very limited regardless of the legal status of the drug(s) involved. In contrast, harmfulness had a sizeable deterrent effect which was independent of concern about breaking the law and increased markedly with the potential for harm: 11 per cent of young adults had not used cannabis because they were concerned about the potential for harm even though they did not appear concerned about breaking the law and this increased to 16 per cent in relation to the hallucinants and 29 per cent in relation to cocaine/opiates.

Conclusion

My main aim in this chapter has been to develop an empirically meaningful social classification which is sensitive to the way in which young adults use, and make decisions about, illicit drugs. Although the results of the analysis have important policy implications (Shiner, 2003), my primary concern here is with their broader sociological meaning. One of the key points to emerge from the analysis is the ambiguity surrounding illicit drug use. By highlighting this, the analysis has begun to demonstrate the value of established perspectives, particularly the new deviancy theories. Most notably, the notion of primary deviance (Lemert, 1948, 1951) helps to capture the ambiguity surrounding illicit drug use because although such behaviour is widespread it is also typically hesitant, tentative and short-lived.

The other key points to emerge from the analysis relate to the role of self-regulation, with particular reference to the law and relative harmfulness. Once again, these points serve to highlight the value of established perspectives. Recent developments reinforce the claims that new deviancy theorists made about the futility of using the law to prohibit drug use. The overall prevalence of illicit drug use casts serious doubt over the deterrent effect of the

law and the differences that are evident between substances reinforce this point. The extent to which specific substances are used bears little relationship to their legal classification, which suggests that the law has less influence than other factors. Far from being followed by an increase in use, moreover, the recent reduction in penalties for cannabis possession has been followed by a continued decline in prevalence (Roe and Man, 2006). Finally, the limited influence of the law is confirmed by international comparisons, with Britain combining one of the harshest drug regimes in Europe with one of the highest levels of youthful drug use (ESPAD, 1997; Griffiths et al., 1997; EMCDDA, 1999).

Although the law plays a limited role as a deterrent, social dimensions of drug use do reveal a concern about managing risk and reducing the potential for harm. Moderation and desistance after a brief period of experimentation are key sources of self-regulation and the desire to avoid harm is further evident from young adults' orientation to particular substances. The reasons that young adults give for not using certain drugs indicate that concern about harm has a greater deterrent effect than concern about the law. While the potential for harm discourages drug use independently of the law, the law appears to discourage drug use only in so far as its underlying philosophy is accepted: that is, that it is there to protect people from harm. Such judgements are also evident in young adults' actual patterns of use, which show considerable congruence with a harms-based classification (see Table 11).

The vast majority of drug users focus on less harmful substances. So, for example, cannabis, as the least harmful illicit drug, is also the most widely and intensively used. Use of the more harmful recreational drugs (i.e. the hallucinants and cocaine) is less widespread and tends to be more tentative and fleeting. Magic mushrooms and cocaine may appear to contradict this general pattern, because they are fairly widely used even though they are included among the most harmful controlled drugs. But, in both cases, the harmfulness of these substances has arguably been overstated and thus their position is consistent with the general pattern.

Table 11
Social and harms-based classification of illicit drugs use

Medico-legal classification (Independent Inquiry)	Social classification (patterns of use and key characteristics)
<p>Class C - least harmful</p> <p>Cannabis</p>	<p>Family 1</p> <p>Cannabis</p> <ul style="list-style-type: none"> ❖ Most widely and intensively used illicit drug. ❖ Typically used in context of very limited repertoires. ❖ In the context of polydrug use, starts towards the beginning of users' careers. ❖ Concern about harm has relatively weak deterrent effect.
<p>Class B - moderately harmful</p> <p>Amphetamines, LSD and ecstasy</p>	<p>Family 2</p> <p>Amphetamines, LSD, ecstasy, amyl nitrates, magic mushrooms and cocaine</p> <ul style="list-style-type: none"> ❖ Fairly widely used. ❖ Infrequently used and high levels of desistance - especially for magic mushrooms, amyl nitrates and LSD. ❖ Markers for moderately well-developed repertoires. ❖ Typically start to be used after cannabis but before heroin, methadone and crack. Use of ecstasy tends to start after use of other hallucinants and use of cocaine tends to start after use of ecstasy. ❖ Concern about harm has fairly strong deterrent effect.
<p>Class A - most harmful</p> <p>Heroin, methadone, crack, cocaine and magic mushrooms</p>	<p>Family 3</p> <p>Heroin, methadone and crack</p> <ul style="list-style-type: none"> ❖ Least widely used illicit drugs. ❖ Markers for fully developed mature careers: <ul style="list-style-type: none"> - extensive repertoires; - basis for final phase of onset. ❖ Concern about harm has very strong deterrent effect.

The social classification shown in Table 11 provides the basis for the detailed analysis presented in the following chapters. Although cocaine appears to form part of the hallucinant category it has been considered separately from these substances because it tends to start later on in users' careers. Heroin, methadone and crack cocaine have, in addition, been excluded from the following analysis because of the particular limitations of household surveys in relation to problematic drug use and because very few young adults included in the surveys had used these substances. The main aim in each of the following chapters, therefore, is to identify those variables and characteristics which predict young adults' use of cannabis, the hallucinants, and cocaine.

The demography of drug use

It is clear from the rates of drug use, smoking and, especially, drinking among adolescents that these activities are not confined to the margins of adolescent life. Of the three activities, drug use is most commonly associated with social disadvantage. From reviewing recent studies however it is evident that no specific personality type, family background, socio-economic grouping or environmental situation categorically predicts drug use...contrary to common stereotypes, adolescents using recreational drugs are found predominantly among the young, studious, employed and relatively affluent (British Medical Association, 2003, 17).

Following the moral panics of the 1960s drug users were routinely portrayed as dropouts and misfits (Cohen, 2002), but these images have lost much of their potency in recent times. According to the new orthodoxy that dominates academic and cultural commentary illicit drug use has been transformed by a process of 'democratisation', whereby increases in use have been accompanied by profound changes in the types of people that engage in such behaviour. What was once an 'atypical' pursuit of the mainly 'delinquent and disordered' has, it is claimed, become commonplace and the clear differences that used to separate users from non-users have become blurred and hazy (Parker et al., 1998, 20).

Based on the prevalence rates presented in the previous chapter, there can be little doubt that contemporary drug use extends beyond the delinquent and disordered or that attempts to explain such behaviour in terms of individual or social pathology are wholly inadequate. The following analysis continues to address these issues by examining the demography of drug use, paying particular attention to recent claims that normalisation has involved 'the withering of traditional sociological predictor variables' (Parker et al., 1998, 154). Social class, sex and ethnicity have all been implicated in this process and will be considered alongside a range of other factors, including income, area of residence, unemployment, parental unemployment, financial difficulty, poor educational attainment and neighbourhood disorganisation.

Social class

Social class occupies an important position within the normalisation thesis. The normative nature of drug trying, it is claimed, is evident from the disintegration of traditional social class differences: being ‘middle class’, we are told, no longer predicts school-based abstinence in the way that it once did, so that the children of professional and managerial parents are now often found to have the highest rates of drug trying, followed by young people from the lowest socio-economic backgrounds (Parker et al., 1998). The BCS and YLS confirm that drug use is only weakly related to family background (see Table 12). Prevalence rates are broadly similar regardless of parental social class though there is some suggestion that certain types of drug use were most prevalent among young adults from relatively privileged backgrounds. Both surveys indicate that recent cannabis use was most widespread among those from professional or managerial / technical family backgrounds, while the YLS also indicates that cocaine use was most widespread among these groups.

Table 12
Prevalence of drug use by parents’ occupational status (percentages, young adults)

	Cannabis			Hallucinants			Cocaine		
	Never	Past	Recent	Never	Past	Recent	Never	Past	Recent
<i>BCS</i>	*			ns			ns		
Professional or managerial/ technical	54	19	27	-	-	-	-	-	-
Skilled non-manual	55	25	20	-	-	-	-	-	-
Skilled manual	67	11	22	-	-	-	-	-	-
Partly skilled or unskilled	64	13	23	-	-	-	-	-	-
<i>YLS</i>	**			ns			*		
Professional	37	19	44	-	-	-	79	11	10
Managerial/technical	47	19	34	-	-	-	87	5	8
Skilled non-manual	51	23	26	-	-	-	91	4	5
Skilled manual	56	16	28	-	-	-	92	3	5
Partly skilled or unskilled	56	17	27	-	-	-	92	5	3

Source: BCS (1998) and YLS (1998/9)

** p < .01

** p < .05

ns p > 0.05

Notes:

1. BCS: Cramer’s V = 0.10 (cannabis).
2. YLS: Cramer’s V = 0.09 (cannabis) and 0.10 (hallucinants).
3. The BCS analysis only included respondents who were living in a household headed by one of their parents. For both surveys, some categories of the parental social class variable had to be combined with other categories because they contained insufficient cases for meaningful analysis. See technical appendix for details.

The multivariate analysis reinforced the conclusion that family background has very little influence on young adults' use of illicit drugs. Parental occupation was associated with a small number of isolated effects, which suggested little by way of a clear pattern. The final BCS models indicated that skilled non-manual family backgrounds increased the probability of past cannabis use, while the final YLS models indicated that professional family backgrounds increased the probability of recent cannabis use and that skilled manual backgrounds reduced the probability of past hallucinant use. Neither survey revealed any significant effects in relation to cocaine (see technical appendix for details).

Drug use is no more closely related to young adults' own occupational class (see Table 13). Cannabis use was fairly widespread across all classes and any differences that were evident in this regard were either fairly modest or were restricted to one or other of the surveys. There was some suggestion that hallucinant use was relatively restricted among young adults in non-manual occupations, but these differences were fairly modest or were not consistent across the surveys. Regardless of their occupational class, moreover, a sizeable minority of young adults had used these substances at some stage. There was, finally, no suggestion that the use of cocaine varied significantly between occupational classes.

Although the multivariate analysis identified a number of significant effects associated with occupational class these effects tended to be fairly modest and did not form a clear or consistent pattern (see technical appendix for details). According to the final BCS models, managerial and technical occupations increased the probability of recent and past cannabis use and skilled manual occupations increased the probability of past cannabis use.

Managerial and technical occupations were also found to increase the probability of past hallucinant use, but this was the only significant effect that occupational class had in relation to these substances. No such effects were evident in relation to cocaine. The final YLS models pointed to a rather different set of effects. Partly skilled occupations increased the probability of past cannabis use; professional occupations reduced the probability of

recent and past use hallucinant use; and skilled manual occupations reduced the probability of recent hallucinant use¹. Once again, no such effects were evident in relation to cocaine.

Table 13
Prevalence of drug use by occupational class (percentages, young adults)

	Cannabis			Hallucinants			Cocaine		
	Never	Past	Recent	Never	Past	Recent	Never	Past	Recent
<i>BCS</i>		**			**			ns	
Professional	52	28	20	81	9	10	-	-	-
Managerial/technical	51	28	21	71	22	7	-	-	-
Skilled non-manual	60	19	21	75	16	9	-	-	-
Skilled manual	51	25	24	68	20	14	-	-	-
Partly skilled	57	19	24	69	20	11	-	-	-
Unskilled	57	20	23	69	18	13	-	-	-
<i>YLS</i>		**			**			ns	
Professional	46	21	33	74	22	5	-	-	-
Managerial/technical	45	27	28	62	24	14	-	-	-
Skilled non-manual	53	22	26	65	24	11	-	-	-
Skilled manual	47	23	31	55	25	20	-	-	-
Partly skilled	54	17	29	62	23	16	-	-	-
Unskilled	36	26	38	52	25	24	-	-	-
Source: BCS (1998) and YLS (1998/9)			** p < .01			** p < .05			ns p > 0.05

Notes:

1. BCS: Cramer's V= 0.07 (cannabis) and 0.08 (hallucinants).
2. YLS: Cramer's V= 0.07 (cannabis) and 0.09 (hallucinants).

Having established that there is little by way of a relationship between drug use and social class raises the question of whether this represents a significant departure from what came before. The BCS has repeatedly found that drug use is fairly evenly distributed among young adults regardless of their social class, but these findings only date back to the early 1990s (Mott and Mirrlees-Black, 1995; Ramsay and Percy, 1996; Ramsay and Spiller, 1997; Ramsay et al., 2001). The absence of comparable data prior to this clearly creates difficulties in assessing possible changes over a longer period, but recent surveys can be used to make some comments about the likely nature of such changes. Based on the assumption that most people who use drugs do so during adolescence and early adulthood, changes over time will be reflected in differences between age cohorts (Shiner and

¹ The effect of professional occupations on recent hallucinant use did not meet the formal criteria for statistical significance, but was fairly substantial and was very close to meeting this criteria (p = .08).

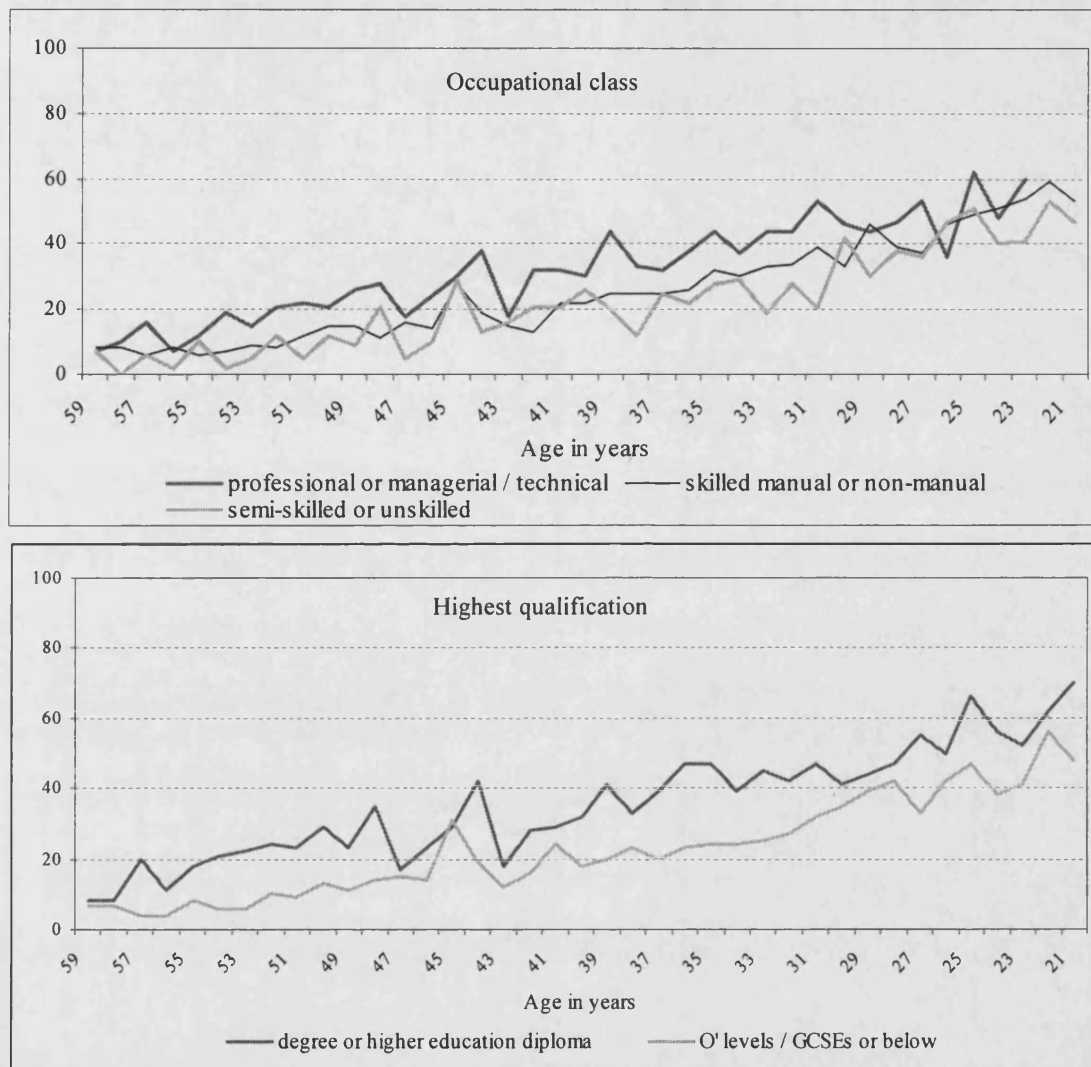
Newburn, 1999)². The normalisation thesis implies that drug use was once largely restricted to delinquent working class subcultures and has only recently has been widely embraced by middle class youth. If this is the case then we would expect to see marked class differences among older adults which then converge sharply among younger adults.

Previous analysis of the BCS has shown that differences between social classes are more pronounced among older than younger adults, but these differences have not taken the form that might be expected (Mott and Mirrlees-Black, 1995). Far from being concentrated among the working classes, drug use has been found to be most prevalent among older adults who remained in education beyond the official school-leaving age or who lived in a household headed by somebody in a non-manual occupation. A similar pattern was evident from the 1998 BCS, which pointed to relatively widespread drug use among older adults who had participated in higher education or were employed in professional or managerial / technical occupations (see Figure 2). Differences based on occupational class and qualifications were less pronounced among younger adults, suggesting that class distinctions have become less important as drug use has proliferated³. Nonetheless, the general trend implied by these data is very similar regardless of social class and it seems clear that relatively privileged young people have been actively involved in drug use for some considerable time. In particular, the differences that were evident among adults in their late 40s and early 50s are consistent with earlier claims that middle class bohemian youth cultures provided the major growth area for drug use during the mid-to-late 1960s. Middle-class youths, particularly students, were said to be the most 'active aficionados' of marihuana during this period, while the use of LSD was thought to be 'almost entirely limited' to such groups (Young, 1971, 22 and 204).

² This analysis also assumes that individuals' social class remains stable over time. Such an assumption may seem questionable given the general trend towards upward social mobility over the last 50 years or so, but this trend has been largely concentrated within an expanding middle class and individual mobility has typically been limited to modest changes in social position (Heath and Payne, 2000). Crucially, class destinations continue to be strongly related to class origins and to educational attainment (Jackson et al., 2005). As such, occupation and qualifications provide a reasonably robust basis for exploring the relationship between drug use and social class across different age cohorts.

³ Logistic regression models were developed to assess whether the effects of age varied according to occupational class or highest qualification. These models indicated that there were statistically significant interaction effects between age and occupational class and age and highest qualification. As such, the effects of occupational class and highest qualification varied according to age and vice versa.

Figure 2
Prevalence of drug use by age and occupational class or highest qualification
(percentage that ever used cannabis, the hallucinants and/or cocaine, all adults)



Source: BCS (1998)

Notes:

1. Drug use was significantly related to age for all occupational classes. $\text{Eta} = 0.27$, $p < .01$ (professional or managerial / technical); 0.31 , $p < .01$ (skilled manual or non-manual); and 0.33 , $p < .01$ (semi-skilled or unskilled). Figures have not been given for 21 or 22 year olds in professional or managerial / technical occupations because these categories contained a very small number of cases ($n = 16$ and 12 respectively).
2. Drug use was significantly related to age regardless of qualifications. $\text{Eta} = 0.25$, $p < .01$ (degree or higher education diploma); 0.32 , $p < .01$ (A' levels or equivalent); and 0.30 , $p < .01$ (O' levels / GCSEs or below). The category 'A levels and equivalent' has not been included in the chart above because the number of cases in each year group was small (generally < 40). The implied trend for this category was similar to that for the remaining categories though it was a little more haphazard.
3. Sixteen to twenty year olds were not included in these analyses because their class destinations were considered to be unclear.

Income

For much of its history, British youth culture has been fuelled by the relative affluence of working class wage earners (Fowler, 1995; Osgerby, 1998). Following the decline of traditional manufacturing industries and the collapse of the youth labour market, however, young people from all social classes have had very limited access to paid work. As a result, it has been said that their relationship to the means of consumption is probably more significant than traditional class differences in explaining cultural identification, with those who have access to the necessary resources being able to participate in youth cultures which cut across class boundaries (Furlong and Cartmel, 1997). Despite their marginalisation from the labour-market, young people continue to play an important role as consumers, particularly in relation to leisure services and the night-time economy (Hobbs et al., 2003), and this reflects the relatively high discretionary element to their spending (Stewart, 1992; Jones and Martin, 1997).

Figures from the YLS indicate that young adults had an average of £59 a week to spend after they had met their housing costs, paid bills and bought food⁴. More recently the 2004/5 *Expenditure and Food Survey* reported that households headed by somebody below the age of 30 spent an average of £66 a week on alcohol, tobacco, recreational and cultural services, restaurants and hotels (Gibbins and Julian, 2005)⁵. Set in this context, illicit drugs would appear to be a reasonably affordable commodity, with recent media stories suggesting that, unit for unit, ecstasy is cheaper than Sainsbury's cherries (*The Guardian*, September 24, 2005) and that cocaine costs less than a cappuccino (*The Observer*, January 9, 2005). Estimates for the period 1995 to 2003 indicate that the cost of cannabis resin fell from £14.39 to £9.96 an eighth, that the cost of ecstasy fell from £11.65 to £4.02 a tablet, that the cost of LSD stayed at under £4 a tab, while the cost of cocaine remained fairly stable at approximately £50 a gram (Atha, 2004). Of themselves these prices do not appear to be particularly prohibitive, but if drug use forms part of a broader cultural style based on

⁴ This figure varied significantly with age, from an average (mean) of £29 for 16 to 17 year olds, to £54 for 18 to 22 year olds, to £66 for 23 to 28 year olds and to £75 for 27 to 30 year olds.

⁵ Such households included an average of 2.4 people.

intensive consumption then some young people may be priced out of the market. On this basis, therefore, we might expect drug use to be related more strongly to income than social class.

Previous empirical work has pointed to a paradoxical relationship between drug use and income. Analysis of the 1994 BCS indicated that drug use was most common within the poorest households, followed by the richest households and was least common in middle-income households (Ramsay and Percy, 1996). More detailed analysis of the 1998 BCS showed that that, for young adults at least, this paradox is linked to housing transitions. Among young adults who lived with their parents drug use tended to be more prevalent in higher income households whereas among those who lived independently it tended to be more prevalent in lower income households, though these tendencies were not particularly marked in relation to either group. Regardless of whether young adults were living with their parents or living independently, household income was only weakly related to cannabis use and hallucinant use, while not appearing to be at all related to cocaine use. The YLS provided a potentially more useful measure of personal disposable income, rather than combined household income, but this measure simply confirmed that drug use is only weakly related to income. The prevalence of drug use did increase with disposable income, but only at a very modest rate⁶.

The multivariate models confirmed that income, like social class, is a poor predictor of illicit drug use. According to the final YLS models, personal disposable income had no significant effects on the probability of cannabis use, hallucinant use or cocaine use, while the final BCS models revealed that household income had a small number of fairly ambiguous effects (see technical appendix for details). These effects were concentrated among young adults who lived with their parents and indicated that higher income parental

⁶ The BCS indicated that for young adults living with their parents, Kendall's tau-c = 0.13, $p < .01$ (cannabis use by household income); 0.08, $p < .01$ (hallucinant use by household income); and 0.03, $p > .05$ (cocaine use by household income). For those living independently Kendall's tau-c = 0.05, $p < .05$ (cocaine use by household income); 0.08, $p < .05$ (hallucinant use by household income); and 0.03, $p > .05$ (cocaine use by household income). According to the YLS, Kendall's tau-c = 0.06, $p < .01$ (cannabis use by disposable income); 0.07, $p < .01$ (hallucinant use by disposable income); and 0.05, $p < .01$ (cocaine use by disposable income).

households were associated with an increased probability of past and recent cannabis use, as well as an increased probability of past hallucinant use. Among young adults who were living independently, the only significant effect associated with income indicated that high-income households reduced the probability of past hallucinant use. It is, perhaps, particularly notable that neither household income nor personal disposable income had any significant effects on the probability of cocaine use.

Sex

Sex, like social class, has been heavily implicated in the normalisation of drug use. Many more young men than young women have traditionally experimented with illicit drugs, but this gender gap was said to have closed rapidly during the 1990s, with many studies, including the North West Cohort Study, no longer recording significant differences between the sexes (Parker et al., 1998). Around the same time that the normalisation thesis was being developed a number of feminist perspectives began to emerge which shared an emphasis on the similarities between male and female drug use (see Henderson, 1993, 1997, 1999 and Hinchcliffe, 2001). Reflecting long-standing feminist concerns about the marginalisation of women, these perspectives sought to give women a 'voice' and emphasised the need to escape from traditional representations which were deemed to be misleading and to bear little resemblance to women's actual experiences. In a neat summary of the feminist critique, Sheila Henderson (1999, 37) noted that:

This, predominantly medical and psychological, literature presented a picture of drug use in which drug users just happened to be male (if you bothered to notice) and women hardly figured. When they did, they appeared as sicker, more deviant, more psychologically disturbed than their male peers: as weak and pathetic creatures. Women's drug use figured as a 'deviation' from 'normal' femininity due to mental or physical deficiencies, or disease...It was worthy of attention only when it affected others: through childbirth and child rearing.

When Henderson (1999, 41) began to consider gender and drug use in the context of dance culture in the early 1990s she found she was faced with a 'somewhat empty tool-kit': the young women who participated in dance events were 'like the chalk to the cheese of the prevailing images of femininity within other studies of drug use'. This mismatch was said

to highlight the need for new perspectives which allowed for the possibility that women are active social agents and not merely passive subjects of male power. As a counterpoint to the puritanical (female) victim mentality, recent feminist perspectives have emphasised the similarities between male and female drug use. Thus, we are told, women 'have achieved the (dubious) equality of consuming as many illegal mind-changing substances as the next man' (Henderson, 1999, 36); have 'participated in dance events as often as men' (Hinchcliff, 2001, 456); and 'use drugs in ways which have previously been considered predominantly male' (Hinchcliff, 2001, 466). In their attempts to explain this apparent equality, feminist commentators have drawn on developments within Cultural Studies, arguing that certain types of drug use can best be understood as a form of consumption. Where traditional explanations of women's drugs use emphasised coercion and unhappiness, recent feminist perspectives have emphasised choice and pleasure. Young women, we are told, do not use drugs in the context of dance culture because they are forced to by men and nor are they leading unhappy lives as result. They are, rather, 'self-confident' women who choose to use drugs as part of a lifestyle which involves a commitment to consumption and mass pleasure seeking and through which they make sense of their place in the world (Henderson, 1999; Hinchcliff, 2001).

What then of the evidence from the BCS and YLS? Both surveys confirm that illicit drug use has become fairly widespread among young women, while also pointing to significant differences between the sexes (see Table 14). Approximately one-and-a-half times as many young men as young women had recently used cannabis, twice as many had recently used a hallucinant and two or three times as many had recently used cocaine. Less striking differences were evident in relation to past use although the ratio of past- to-recent users does suggest that female users were more likely to have stopped using drugs than their male counterparts. Further analysis confirmed the statistical significance of these differences in relation to cannabis and the hallucinants, though not cocaine⁷.

⁷ Non-users were excluded from these analyses in order to assess the desistance rate. What was being compared, therefore, was the proportion of users who had last used a particular drug or set of drugs over a year ago.

Table 14
Prevalence of drug use by sex (percentages, young adults)

	Cannabis			Hallucinants			Cocaine		
	Never	Past	Recent	Never	Past	Recent	Never	Past	Recent
<i>BCS</i>		**			**			**	
Male	49	22	29	66	20	14	92	4	4
Female	63	20	17	78	15	7	96	2	2
<i>YLS</i>		**			**			**	
Male	44	19	37	58	23	19	86	6	9
Female	57	19	24	72	18	10	94	3	3
Source: BCS (1998) and YLS (1998/9)									
				**	p < .01		**	p < .05	ns p > 0.05

Notes:

1. BCS: Cramer's V = 0.16 (cannabis); 0.14 (hallucinants) and 0.08 (cocaine).
2. YLS: Cramer's V = 0.14 (cannabis); 0.16 (hallucinants) and 0.13 (cocaine).

Differences between the sexes persisted even when other factors had been taken into account. Being female consistently reduced the probability of recent use across all three drug-types at each stage of the multivariate analysis and across both surveys. Even in the final models, when other lifestyle differences had been taken into account, sex had a marked effect on the probability of recent use (see Table 15). The BCS models indicated that being female approximately halved the probability of recent cannabis and hallucinant use, while the effect on cocaine use was even more marked. Regardless of the substance, the YLS models indicated that being female reduced the probability of recent use by about a third. According to both surveys sex had a much less marked effect on past use. On balance, it seems that being female increased the probability of desistance in relation to cannabis but not the hallucinants or cocaine. Based on the multivariate models it seems that the heightened rate of desistance that women displayed in relation to the hallucinants can be explained by broader life-course and lifestyle differences, but that which they displayed in relation to cannabis can not be explained in this way⁸.

⁸ In order to assess whether being female increased the probability of past use compared to recent use, and therefore increased the probability of desistance, the multivariate models were replicated with 'used in the last year' set to the reference category. These models indicated that being female increased the probability of desistance in relation to cannabis but not the hallucinants. The situation was less clear cut in relation to cocaine: the BCS indicated that being female significantly increased the probability of desistance, but the YLS revealed no such effect.

Table 15
Probability of drug use by sex (multivariate analysis, young adults)

	Cannabis			Hallucinants			Cocaine		
	Never	Past	Recent	Never	Past	Recent	Never	Past	Recent
<i>BCS</i>									
Male (reference)	0.49	0.21	0.30	0.62	0.22	0.16	0.88	0.04	0.08
Female	0.63	0.21	0.17	0.77	0.16	0.07	0.96	0.03	0.01
<i>YLS</i>									
Male (reference)	0.46	0.20	0.34	0.60	0.23	0.17	0.88	0.06	0.06
Female	0.59	0.18	0.23	0.72	0.18	0.11	0.93	0.03	0.04

Source: BCS (1998) and YLS (1998/9)

Model: Lifestyle model

Notes:

1. Statistically significant effects are highlighted in bold.
2. Effects on past or recent use were estimated vis-à-vis the probability of never having used. A statistically significant effect changed the probability of past or recent use *relative* to the probability of never having used.

Although drug use continues to be less prevalent among young women than young men it is possible that gender differences have become less marked over time. Some sense of whether this is the case can be gained by comparing the various sweeps of the BCS. The 1992 sweep found that almost one-and-a-half times as many males as females in the 16 to 29 year age group had used an illicit drug at some point and that almost twice as many had done so in the previous 12-months (Mott and Mirrlees-Black, 1995). Subsequent sweeps of the BCS have continued to report very similar differences, indicating that the gender gap is both an enduring and remarkably stable feature of early adulthood⁹. Comparisons between age groups, based on the 1998 BCS, also point to a similar general trend among males and females (see Figure 3). Further analysis confirmed that the relationship between drug use and age did not vary significantly by sex, which again suggests that the gender gap has

⁹ Four separate sweeps of the BCS were carried out between 1994 and 2000 and on each occasion detailed information was published about the extent of drug use among young adults aged 16 to 29 (see Ramsay and Percy, 1996; Ramsay and Spiller, 1997; Ramsay and Partridge, 1999; Ramsay et al., 2001). Each of these sweeps indicated that for every young woman who had ever used illicit drugs there were 1.3 or 1.4 young men who had done so. The corresponding figure for recent use hovered between 1.5 and 1.8. Similar figures of 1.6 and 1.5 were produced by the 2004/5 BCS and 2005/6 BCS though they are not directly comparable with the earlier figures because they were based on a slightly narrower age-range, made up of 16 to 24 year olds (Roe, 2005; Roe and Man, 2006).

been more or less maintained over time¹⁰. Although there was evidence of convergence among 16 year olds, this pattern can be readily explained as a function of early adult transitions and does not signify a dramatic shift in gender relations (see chapter seven).

Figure 3
Prevalence of drug use by age and sex
(percentage that ever used cannabis, the hallucinants and/or cocaine, all adults)



Source: BCS (1998)

Ethnicity and religion

Since the earliest days of prohibition, anxieties about drugs and drug users have been inescapably linked to the politics of 'race' (Kohn, 1992). The coupling of race and drugs has also provided a key focus for recent academic work, which has shown how drug-related images often rely on racist constructions of criminality and assumptions of 'ethnic welfare' (Khan, 1999). This work has also noted how such imagery varies between minority groups, so that African Caribbean communities tend to be equated with wanton and reckless drug use, while Asians are thought to be immune from such behaviour due to specific cultural barriers (Murji, 1999). The rejection of these stereotypical images has been accompanied by a growing emphasis on the similarities that are shared across ethnic groups. People from minority groups, it has been argued, start to use drugs in much the same way as whites,

¹⁰ Logistic regression was used to specify a model with drug use as the dependent variable and age and sex as the independent variables. An interaction term was included between the independent variables and showed that the effects of age did not vary significantly by sex.

draw on a similar range of substances, use drugs for broadly the same reasons and display very similar patterns of use (Arora and Khatun, 1998; Chaudry et al., 1997; Patel et al., 1996; Pearson and Patel, 1998). These claims are consistent with the notion that drug use can no longer be predicted on the basis of socio-demographic characteristics and ethnicity has been specifically implicated in the process of normalisation on the basis that 'being black or Asian does not predict higher than average rates of adolescent drug use' (Parker et al., 1998, 154).

Both the BCS and YLS pointed to significant variations in the prevalence of drug use between ethnic groups (see Table 16). Although there were some discrepancies between the surveys, these variations support some general observations which are consistent with other national surveys (Ramsay and Spiller, 1997; Pearson and Patel, 1998; Sangster et al., 2002). On balance, cannabis use seems to be most widespread among young adults from white and black Caribbean backgrounds. This is suggested by the figures shown below and is more clearly established by the 1996 BCS, which included a much larger number of respondents from minority groups (Ramsay and Spiller, 1997; Sangster et al., 2002) and the 2001/2 BCS (Aust and Smith, 2003).

The relatively widespread nature of cannabis use among white and black Caribbean young adults appears to reflect the survival and diffusion of what Ansley Hamid (2002) has called the 'ganja complex'. This complex was carried to the British Caribbean by indentured Indian labourers during the nineteenth century, where it took root among the African population in rural Jamaica, before being codified by Rastafarianism and being exported to Europe and North America by migrant Caribbean communities 'who planted it among their local neighbours, such as African Americans, Latinos, Canadians, the British, and North Europeans' (Hamid, 2003, xv). In Britain, the bohemian hippie movement provided a ready-made conduit through which marijuana was introduced into the host community (Young, 1971; Donnelly, 2005). Using official statistics for the period 1963 to 1967, Jock Young (1971) showed that cannabis use went from being largely restricted to first generation Caribbean migrants to being increasingly associated with white middle-class youth. Not only was there a marked increase in the number of arrests for cannabis

possession during this period, but the proportion of arrestees who were white also increased sharply, from 45 per cent to 73 per cent. While recognising the limitations of his data, Young (1971, 13) maintained that this 'does not in any way detract from the conclusion that there has been a considerable increase in use and that this is concomitant with the spread of use to young white offenders'. Such an interpretation has been supported by recent generational comparisons based on self-reported drug use (Ramsay and Percy, 1996).

Table 16
Prevalence of drug use by ethnicity (percentages, young adults)

	Cannabis			Hallucinants			Cocaine		
	Never	Past	Recent	Never	Past	Recent	Never	Past	Recent
<i>BCS</i>		**			**			ns	
White	56	22	23	72	18	10	94	3	3
Black Caribbean	66	3	31	79	21	0	98	2	0
Black African	88	4	8	96	0	4	96	4	0
Indian	73	13	15	84	15	1	99	0	1
Pakistani/Bangladeshi	81	11	8	95	0	5	97	3	0
Other	54	29	17	77	12	11	85	9	6
<i>YLS</i>		**			**			.	
White	49	20	31	63	22	16	89	5	6
Black Caribbean	59	21	21	83	15	3	97	3	0
Black African	81	0	19	91	0	9	91	9	0
Indian	86	8	6	95	3	2	100	0	0
Pakistani / Bangladeshi	90	2	9	100	0	0	100	0	0
Other	67	13	19	85	9	6	93	2	6

Source: BCS (1998) and YLS (1998/9)

** p < .01

* p < .05

ns p > 0.05

Notes:

1. BCS: Cramer's V = 0.09 (cannabis), 0.08 (hallucinants) and 0.05 (cocaine).
2. YLS: Cramer's V = 0.12 (cannabis), 0.12 (hallucinants) and 0.06 (cocaine).
3. Some of the minority groups included a fairly small number of cases. The BCS analysis included 2,553 whites, 72 black Caribbeans, 32 black Africans, 51 Indians, 54 Pakistanis / Bangladeshis and 63 'other', while the YLS analysis included 3,164 whites, 60 black Caribbeans, 31 black Africans, 64 Indians, 60 Pakistanis / Bangladeshis and 78 'other'. Pakistani and Bangladeshi were combined into a single category because of the small number of cases in each group and because these groups share a similar socio-economic and religious profile (Modood et al., 1997). The category 'black other' was combined with 'black Caribbean' because it is used mostly by people of Caribbean family origin who are not white and who consider themselves to be British (Modood et al., 1997).
4. Significance tests for cocaine were based on comparisons between two groups - white and other versus black Caribbean, black African, Indian and Pakistani / Bangladeshi. This amendment was required to ensure the validity of the test. Figures have been given for cocaine based on the BCS because the differences that were evident were very close to the cut-off indicating statistical significance (p=.06) and because they were similar to those highlighted by the YLS.

While African-Caribbean cultural influences appear to have played a significant role in the dissemination of cannabis use the same cannot be said in relation to the hallucinants.

Although 'rave' was influenced by African, Caribbean and Asian musical forms, it started out as 'a predominantly white dance culture in terms of both organisation and participation' (Measham et al., 2001, 54). When the jungle scene brought an increased 'black' presence during the early 1990s, moreover, this was said to have been accompanied by a shift in drug use, with ecstasy and amphetamines being replaced by cannabis, cocaine, alcohol and, to a lesser extent, crack cocaine (Measham et al., 2001). Both the BCS and YLS indicate that hallucinant use was less prevalent among young adults from black Caribbean backgrounds than among whites. These differences were particularly pronounced in relation to recent use because the vast majority of black Caribbeans who had used these substances had not done so in the previous 12 months, indicating a particularly high rate of desistance. Although the 'Asian Underground' also came to greater prominence during the 1990s, this development does not appear to have been accompanied by widespread hallucinant use among young adults from South Asian backgrounds.

Differences between ethnic groups continued to be evident throughout most stages of the multivariate analysis and could not be explained by the influence of demographic characteristics, deprivation indicators, neighbourhood characteristics or life-course indicators. Even when all these factors had been taken into account the BCS indicated that being from a black and minority ethnic group was generally associated with a heightened probability of abstinence and a reduced probability of recent use. In the only exception to this general pattern, being black Caribbean had no discernable effect on the probability of recent cannabis use compared to being white (see Table 17). A broadly similar pattern was evident from the YLS, with black and minority ethnic groups again being associated with an increased probability of abstinence and a reduced probability of recent use.

The criminological literature provides a number of insights which may help to explain the relatively limited nature of illicit drug use among minority ethnic populations. In *Crime, Shame and Reintegration*, John Braithwaite (1989) developed a theory of informal social control, in which he noted that cultural groups differ in their traditions of shaming.

Table 17
Probability of drug use by ethnicity (multivariate analysis, young adults)

	Cannabis			Hallucinants			Cocaine				
	Never	Past	Recent	Never	Past	Recent	Never	Past	Recent		
<i>BCS</i>											
White (reference)	0.55	0.22	0.22	}	0.71	0.19	0.10	}	0.92	0.03	0.05
Black Caribbean	0.71	0.07	0.22		0.82	0.17	0.01				
Black African	0.92	0.03	0.05								
Indian, Pakistani and Bangladeshi	0.73	0.15	0.12		0.90	0.06	0.04		0.98	0.02	0.01
Other	0.55	0.22	0.22		0.19	0.19	0.10		0.92	0.03	0.05
<i>YLS</i>											
White (reference)	0.50	0.20	0.30	}	0.63	0.22	0.15	}	0.90	0.04	0.06
Black Caribbean	0.73	0.12	0.15		0.85	0.13	0.03				
Black African	0.84	0.03	0.13								
Indian	0.84	0.09	0.07		0.97	0.01	0.02		0.98	0.02	<0.01
Pakistani / Bangladeshi	0.89	0.04	0.07								
Other	0.64	0.17	0.19	0.78	0.13	0.09	0.90	0.04	0.06		

Source: BCS (1998) and YLS (1998/9)

Model: Life-course model

Notes:

1. Ethnicity was classified differently in the different models because its effects varied between substances. In the cannabis model categories were combined according to the procedure outlined in the technical appendix. In the remaining models it was not possible to estimate separate effects for each ethnic group because some categories included too few users. Under these circumstances minority groups were combined on the basis that they tended to be associated with low levels of use.
2. Statistically significant effects are highlighted in bold. Effects on past or recent use were estimated vis à-vis the probability of never having used.
3. The 'other' category was included in the YLS hallucinant model even though it was not statistically significant because it had a sizeable effect, because excluding it would have masked some of the effects associated with other ethnic groups and because it was close to the cut off point for significance ($p=.06$ for past use and .10 for recent use).

Because some groups shame more forcefully and effectively than others, such differences may help to account for the relatively low rates of offending found among some minority ethnic groups. Several studies have noted the distinct role that informal community controls play among British Asians, particularly those of Pakistani and Bangladeshi origin, pointing to an on-going commitment among younger members of these groups to the extended family system, to the notion of *izzat* or family prestige and to the desire to avoid bringing shame on the family name (Mawby and Batta, 1980; Webster 1997). Although the drugs literature has generally paid little attention to such factors, various cultural influences have been identified which may serve to limit the extent of drug use among minority ethnic groups. These include particular conceptions of shame and honour, an

emphasis on respectability and reputation, the role of religion and a certain ‘mentality’ associated with economic migration that involves an over-riding ambition to better oneself and one’s family (Abdulrahim, 1998; Sangster et al., 2001; see also Modood et al., 1997).

Of these influences, the YLS provides a reasonable basis for assessing the impact of religious orientation. Religiosity is strongly linked to reduced levels of crime and deviance as a whole (Tittle and Welch, 1983; Ellis, 1985; Butts et al., 2003)¹¹ and there are good reasons for supposing that it may serve to limit the extent of drug use. Most major world religions oppose the use of drugs to modify states of consciousness (Plant and Plant, 1992; Gossop, 1996) and recent research has confirmed that religiosity is associated with restrictive attitudes to drugs and reduced levels of use (Gould and Stratford, 2002; Butts et al., 2003). In the United States, evidence of such links has prompted suggestions that religion may help to explain differences between ethnic groups and studies have specifically shown that the high degree of religiosity found among black adolescents goes some way in accounting for their relatively high levels of abstinence (Wallace et al., 2003).

The YLS confirmed that drug use varies according to religiosity. Cannabis use, hallucinant use and cocaine use were all most prevalent among young adults who did not identify with any particular religion and were least prevalent among those who had recently attended a religious service or activity. These differences proved to be largely independent of all the other variables included in the analysis, moreover, so that being actively religious as opposed to not at all religious substantially reduced the probability of recent use in relation to all three drug-types (see Table 18). Religious identification in the absence of active participation had much less effect.

¹¹ Religiosity is a sociological term used to describe the extent of an individual’s religiousness. It is often measured on the basis of attendance at religious activities although it is generally considered to be a multi-faceted concept involving both behaviour and belief. Multi-dimensional measures have been developed which, in the context of Christianity, consider the salience of God to oneself, denomination, frequency of prayer, bible studies and religious activities outside of church as well as church attendance (Butts et al., 2003; see also Modood et al., 1998). The YLS included questions about religious identification and attendance at religious activities (see technical appendix for details), while the BCS did not include any questions relating to religion.

Table 18
Probability of drug use by religiosity (multivariate analysis, young adults)

	Cannabis			Hallucinants			Cocaine		
	Never	Past	Recent	Never	Past	Recent	Never	Past	Recent
<i>YLS</i>									
No religion (reference)	0.45	0.22	0.33	0.65	0.20	0.14	0.90	0.04	0.06
Religious - not active	0.63	0.18	0.26	0.65	0.20	0.14	0.90	0.04	0.06
Religious - active	0.56	0.18	0.19	0.78	0.16	0.07	0.95	0.04	0.01

Source: YLS (1998/9)

Model: Lifestyle model

Note: statistically significant effects are highlighted in bold. Effects on past or recent use were estimated vis-à-vis the probability of never having used.

The YLS also confirmed that the effects of religiosity are felt most widely within black and minority ethnic groups, though they are also evident among whites¹². Religion has provided a notable source of difference between ethnic minorities and the majority white population since the large-scale migrations of the 1950s and 1960s (Modood et al., 1997). Many first generation migrants adhered to a set of religious beliefs and practices that were different from those of the white majority and all the indications are that they were generally more religious. While noting important generational differences and changes over time, the Fourth National Survey of Ethnic Minorities in Britain concluded that: 'Religion is perhaps the key area where the minority groups manifest a cultural dynamic which is at least partly at odds with native British trends' (Modood et al., 1997, 356). The YLS pointed to continuing ethnic differences in religious affiliation and to a relatively high degree of religiosity among young adults from minority groups. All the Pakistanis and Bangladeshis, almost all the Indians and black Africans and three-in-four black Caribbeans considered that they belonged to a religion or church compared with two-in-three whites. While whites and black Caribbeans identified almost exclusively with Christianity, moreover, Pakistanis and Bangladeshis invariably identified with Islam. Black Africans, by contrast, were more evenly divided between these two religions, though a clear majority were Christian, while Indians mainly comprised of Hindus and Sikhs but also included a substantial number of Muslims as well as a smaller number of Christians. There were,

¹² Religiosity continued to reduce the probability of drug use even when young adults from black and minority ethnic groups were excluded from the models. Indeed, the effects of religiosity in these respecified models were not significantly different from the effects contained in the original models based on all young adults, including those from black and minority ethnic groups.

finally, marked differences in religious participation. One-in-ten whites had recently attended a religious service or activity compared with approximately half the black Africans, two-in-five Pakistanis, Bangladeshis and Indians and slightly more than one-in-four black Caribbeans.

The extent to which the greater religiosity of young adults from minority ethnic groups helps to explain their more limited drug use was formally assessed on the basis of the multivariate models. If religiosity fully explains the differences that were evident between ethnic groups then its inclusion in the models would reduce the effects of ethnicity to the point that they were no longer statistically significant. The inclusion of religiosity did reduce the effects of ethnicity but only by a fairly modest amount and these effects continued to be statistically significant (see Table 19). Thus, while religiosity helps to mediate the effects of ethnicity it provides no more than a partial explanation for the differences that were evident between ethnic groups.

The effects of ethnicity were reduced more sharply by the introduction of lifestyle indicators, particularly those relating to alcohol and tobacco consumption. In relation to cannabis, for example, the effects of ethnicity became notably less marked once religiosity was included in the model and ceased to be significant once lifestyle indicators were taken into account. Although ethnic differences were more persistent in relation to the hallucinants and cocaine they too were substantially reduced by the addition of lifestyle variables. The BCS models also indicated that the effects of ethnicity were, in part at least, mediated by broader lifestyle factors. Despite the relatively limited range of lifestyle indicators available for this analysis, their inclusion in the models reduced the effects of ethnicity quite markedly (see technical appendix for details).

Given that ethnic differences in relation to drug use are so strongly linked to alcohol and tobacco consumption they are, perhaps, best viewed as manifestations of more general, culturally distinct, orientations to consumption and intoxication. Young adults from black and minority ethnic backgrounds are less likely to use illicit drugs than their white counterparts, in part at least, because they are less likely to drink alcohol, get drunk or

Table 19
Changing effects of ethnicity - YLS
(regression coefficients, multivariate analysis, young adults)

	Past use			Recent use		
	Life-course Model	Life-course model + religiosity	Lifestyle Model	Life-course Model	Life-course model + religiosity	Lifestyle Model
<u>Cannabis</u>						
White (reference)	-	-	-	-	-	-
Black Caribbean	-0.92	-0.81	-0.37	-1.08	-0.89	-0.37
Black African	-2.46	-2.22	-1.02	-1.37	-0.99	0.74
Indian	-1.32	-1.13	-0.27	-1.98	-1.71	-0.92
Pakistani / Bangladeshi	-2.13	-1.95	0.52	-2.00	-1.71	0.35
Other	-0.41	-0.44	-0.58	-0.66	-0.54	-0.02
<u>Hallucinants</u>						
White (reference)	-	-	-	-	-	-
Black Caribbean, black African, Indian and Pakistani / Bangladeshi	-1.92	-1.75	-1.04	-2.38	-2.11	-1.10
Other	-0.76	-0.65	-0.17	-0.75	-0.62	0.20
<u>Cocaine</u>						
White (reference)	-	-	-	-	-	-
Black Caribbean, black African, Indian and Pakistani / Bangladeshi	-1.22	-1.11	-0.34	-2.88	-2.61	-2.03
Other	-0.71	-0.68	0.08	0.09	0.24	1.07

Source: YLS (1998/9)

Key – types of model

Life-course models: include demographic characteristics, deprivation indicators, neighbourhood and regional measures and life-course indicators;

Lifestyle models: include demographic characteristics, deprivation indicators, neighbourhood and regional measures, life-course indicators and lifestyle indicators.

Notes:

1. For the purposes of the analysis shown here ethnicity was included at each stage of each model regardless of its statistical significance and was included in the same form at each stage to ensure comparability (this form was determined by the final model).
2. Statistically significant effects are highlighted in bold. Effects on past or recent use were estimated vis-à-vis the probability of never having used.

smoke tobacco. Almost all the Pakistanis and Bangladeshis included in the BCS indicated that they never drink alcohol, while slightly more than three-in-five of those included in the

YLS indicated that they had never had an alcoholic drink. Although young adults in the remaining minority ethnic groups reported greater contact with alcohol they generally drank more moderately than their white counterparts. Almost three-in-five white young adults included in the YLS indicated that they had been 'very drunk' in the previous 12-months, compared with none of the Pakistanis and Bangladeshis, one-in-ten black Africans, less than one-in-three black Caribbeans and approximately two-in-five Indians. The YLS also pointed to similar differences in relation to tobacco consumption: nearly two-in-five white young adults smoked on a daily basis or smoked more than 10 cigarettes a week compared with one-in-twenty-five Pakistanis and Bangladeshis, one-in-ten Indians and black Africans and less than one-in-twenty black Caribbeans.

Patterns of alcohol and tobacco consumption were also linked to religious orientation, with actively religious young adults showing a particular propensity towards abstinence and moderation¹³. Consequently, the extent to which drinking and smoking habits help to explain differences in drug use between ethnic groups can not be readily separated from the role of religion. The broader, culturally distinct, orientations to consumption and intoxication, of which drug use is a part, are themselves shaped by religious influences. Most, if not all, major world religions impose some sort of strictures on the use of alcohol and tobacco, varying from the highly stringent to the relatively liberal (World Health Organisation, 1999; Wallace et al., 2002; Cook, 2006). Islam and Hinduism are particularly restrictive in this regard, though certain branches of Christianity, including some traditional black churches, have also adopted a strict prohibitionist stance. Even the more liberal religions and denominations typically oppose the vices of intoxication and addiction, while promoting the virtues of abstinence and restraint. There is, moreover, some evidence that religious influences operate differently between ethnic groups. Research in the United States has found that religion promotes abstinence among white

¹³ Actively religious young adults abstained from drinking alcohol in much larger numbers than those who were not at all religious (13 per cent compared with one per cent) and considerably fewer of them got 'very drunk' on a regular basis (34 per cent compared with 57 per cent had been 'very drunk' at least once every couple of months during the last year). Actively religious young adults also abstained from smoking in much larger numbers than those who were not at all religious (29 per cent compared with 15 per cent) and considerably fewer of them smoked regularly (19 per cent compared with 40 per cent smoked every day or smoked more than 10 cigarettes a week).

adolescents at an individual level whereas for black adolescents its influence seems greatest at the group level (Wallace et al., 2003). This observation has prompted the suggestion that, in the context of highly religious communities, the influence of religion may extend to those who do not consider it to be personally important.

Region and neighbourhood

Illicit drug use has long been associated with particular types of environment. One aspect of the absolutist monolith that Young (1971) challenged more than 30 years ago was the assumption that such behaviour arises in disorganised areas of society characterised by anomie and a lack of behavioural norms. Similar misgivings were recently expressed in relation to the identification of 'wild zones' in official talk about drugs and crime: 'Tales of the city and of particular places, fears about racial ghettos and drugs and crime are mixed in with concerns about vice and moral decline through discourses of contagion and pollution' (Murji, 1999, 56). Empirical studies have produced mixed results regarding the environmental distribution of drug use and have highlighted important differences between problematic and more general forms of use. Several studies dating back to the 1980s heroin epidemics have identified a clear link between problematic drug use and urban deprivation (Pearson, 1987; Parker et al., 1988; ACMD, 1998). Where the focus has been on more general forms of drug use, however, there has been very little evidence of a link with deprivation (Leitner et al., 1993; Ramsay and Percy, 1996).

Both the 1998 BCS and the 1998/9 YLS included a range of area-based characteristics, which were included in the analysis. Distinctions were drawn between respondents according to their region of residence, to whether or not they lived in an inner city area and to the nature of their local neighbourhood. In both surveys respondent's neighbourhoods were classified on the basis of their geographic and demographic characteristics (including those relating to employment and households) using the well-established ACORN classification. Depending on their characteristics, each neighbourhood was considered to be thriving, expanding, rising, settling, aspiring or striving: thriving neighbourhoods were highly prosperous, while striving neighbourhoods were generally deprived. Added to this,

the BCS included several measures of community disorganisation, based on respondents' perceptions of incivility and cohesion within their local neighbourhood.

While providing little evidence of a link with environmental deprivation, the BCS did indicate that levels of drug use varied according to several of these area-based characteristics. Region of residence was a notable source of differences in relation to cannabis and cocaine, for example, though not the hallucinants. Depending on which part of the country they lived in, the proportion of young adults who had recently used cannabis varied from one-in-six to one-in-three and the proportion that had recently used cocaine varied from one-in-two-hundred to one-in-twelve¹⁴. In both instances the proportion of users was highest in London and the multivariate models confirmed the importance of this effect. Most regional differences could be explained by other factors included in the models, but London continued to be associated with heightened rates of use. Even allowing for life-course and lifestyle factors, living in the capital increased the probability of recent cannabis use from 0.19 to 0.31 and of recent cocaine use from 0.02 to 0.09. The only other significant regional effects indicated that living in the South East increased the probability of past cannabis use and recent cocaine use, while living in East Anglia increased the probability of past and recent cocaine use (see technical appendix for details).

Rates of drug use also varied according to neighbourhood characteristics though there was little to suggest a link with deprivation or community disorganisation. As in previous sweeps of the BCS, the highest prevalence rates were associated with 'rising' neighbourhoods - that is neighbourhoods with large numbers of young, single people who do not have children (Ramsay and Percy, 1996)¹⁵. It is notable that the effects associated with such neighbourhoods became much less marked once life-course and lifestyle factors were taken into account: though moderately increasing the probability of recent cannabis use, 'rising' neighbourhood had no discernable effect on the use of hallucinants or cocaine

¹⁴ Cramer's $v = 0.09$, $p < .01$ (cannabis use by region of residence) and 0.12 , $p < .01$ (cocaine use by region of residence).

¹⁵ Cramer's $V = 0.14$, $p < .01$ (cannabis use by type of neighbourhood); 0.08 , $p < .01$ (hallucinant use by type of neighbourhood); and 0.10 , $p < .01$ (cocaine use by type of neighbourhood).

(see Table 20). While more affluent, family oriented ‘expanding’ neighbourhoods were consistently associated with a reduced probability of recent use, the remaining neighbourhood-types did not give rise to any other statistically significant effects. As such the effects associated with the most deprived neighbourhoods were similar to those associated with the most prosperous neighbourhoods.

Table 20
Probability of drug use by neighbourhood
type – BCS (multivariate analysis, young adults)

	Cannabis			Hallucinants			Cocaine		
	Never	Past	Recent	Never	Past	Recent	Never	Past	Recent
Thriving (reference)	0.57	0.21	0.22	0.72	0.18	0.10	0.93	0.03	0.04
Expanding	0.67	0.20	0.13	0.79	0.17	0.04	0.98	0.02	< 0.01
Rising	0.50	0.20	0.30	0.72	0.18	0.10	0.93	0.03	0.04
Settling	0.57	0.21	0.22	0.72	0.18	0.10	0.93	0.03	0.04
Aspiring	0.57	0.21	0.22	0.72	0.18	0.10	0.93	0.03	0.04
Striving	0.57	0.21	0.22	0.72	0.18	0.10	0.93	0.03	0.04

Source: BCS (1998)

Model: Lifestyle model

Notes:

1. Statistically significant effects are highlighted in bold.
2. Effects on past or recent use were estimated vis-à-vis the probability of never having used.
3. Categories that had no significant effect on recent use or past use were excluded from the model and formed part of the reference category.

None of the remaining area-based characteristics included in the BCS had anything other than a weak or ambiguous relationship with illicit drug use. Inner city living was associated with only minor variations in use, which ceased to be significant once other factors had been taken into account, and the same could be said in relation to neighbourhood incivility. Young adults who felt that they lived in a community where people helped one another did report lower levels of drug use than those who did not feel this way but the final multivariate models revealed an inconsistent picture: living in a ‘helpful’ neighbourhood reduced the probability of past, though not recent, cannabis use; reduced the probability of recent, though not past, hallucinant use; and had no discernable impact on past or recent cocaine use. It is also worth noting that those effects that were evident may simply reflect the extent to which young adults who use drugs are integrated into local networks.

Broadly similar results were evident from the YLS. The final multivariate models confirmed that living in London increased the probability of cannabis use and cocaine use though not hallucinant use. Other significant regional effects indicated that living in the North West increased the probability of recent use for all three substances, while living in Wales and East Anglia reduced the probability of recent cannabis use and past hallucinant use respectively (see technical appendix for details). The YLS also confirmed that neither inner city living nor deprived neighbourhoods are associated with particularly widespread drug use. Rates of use were highest among residents of rising neighbourhoods, but this pattern could, once again, be explained by life-course and lifestyle differences. The only neighbourhood effects that were significant in the final models indicated that living in expanding or aspiring neighbourhoods reduced the probability of recent and/or past cannabis use (see technical appendix for details).

Social deprivation and risk factors

The idea that illicit drug use results from certain deficits has given rise to a well-established literature on 'risk' and 'protective' factors. Research in this tradition has been developed most fully in the U.S, particularly in the field of developmental psychology, and has been subject to extensive criticism within the sociology of drug use. Young's (1971) attack on the absolutist perspective was, in large part, an attack on mainstream American psychology, while more recently the authors of the normalisation thesis have explicitly rejected the idea that youthful drug use can be understood in terms of risk factors (Parker et al., 1998). Most young people who use drugs do so in the absence of any obvious risk factors and in the context of apparently 'normal' backgrounds (EMCDA, 2002). As a consequence the notion of risk factors is perhaps best reserved for attempts to understand problem drug use (Lloyd, 1998). Various risk factors have been found to be associated with problematic use and a range of 'vulnerable' groups have been identified, including homeless young people, those leaving local authority or foster care, truants and school excludees, abused children and young people in contact with the criminal justice system and/or forensic mental health services (Health Advisory Service, 1996; Lloyd, 1998; British Medical Association, 2003). The aetiology of problem use and recreational use are clearly distinct but this does not

mean they are unrelated. American research has shown an 'irrefutable' link between drug use and drug abuse, with early and/or frequent experimentation having been identified as a 'risk' factor for subsequent problem use (Glantz and Pickens, 1992; see also Lloyd, 1998). In this context it is worth noting that several recent British studies of vulnerable young people have reported heightened rates of use across a range of substances, which include, but are not limited to, the most harmful drugs (Goulden and Sondhi, 2001; Hammersley et al., 2001; Ward et al., 2003; Wincup et al., 2003). Cannabis was consistently found to be the most widely used illicit drug in these studies and habitual use of this substance appears to be much more widespread among at risk young people than the youthful population as a whole (Ward et al., 2003; see also Newburn and Shiner, 2005).

General household surveys are not particularly well suited to the study of risk factors and vulnerable groups. By virtue of their focus on residential households such surveys routinely exclude some of the most vulnerable members of society and tend not to cover risk factors in any detail. For these reasons the BCS and the YLS provided a very limited basis for assessing the impact of risk factors although they both contained a number of indicators of social deprivation, based on unemployment, low income, financial difficulty and poor educational outcomes, which were incorporated into the analysis¹⁶. Of these indicators, unemployment was the most strongly related to illicit drug use. According to the BCS unemployed young adults had recently used cannabis, the hallucinants and cocaine at approximately twice the rate of those who were working, studying or looking after the home and they also reported higher rates of past hallucinant use. Among young adults who were otherwise marginalised from the labour market rates of use were very similar to those reported by the unemployed¹⁷. The relationship between labour market status and drug use

¹⁶ Other risk factors were covered by the YLS and this survey has been used to examine drug use among truants and school excluders, homeless young people and runaways, young offenders and those living in drug using families (Goulden and Sondhi, 2001). These categories were not included in the analysis described here, however, for two main reasons. Firstly, the data were not well suited to multivariate procedures. Previous analysts have noted that the number of respondents included in these groups is relatively small and that, as a result, it is not always possible to control for other potentially confounding factors (Goulden and Sondhi, 2001). Secondly, there was an important issue of consistency as it was not possible to identify these groups in the BCS.

¹⁷ Cramer's $V = 0.08$, $p < .01$ (cannabis use by labour market status); 0.08 , $p < .01$ (hallucinant use by labour market status); and 0.04 , $p < .01$ (cocaine use by labour market status).

became less clear-cut, however, when other variables were taken into account. According to the latter stages of the multivariate analysis unemployment and marginalisation from the labour market increased the probability of recent cannabis use but had little by way of a clear effect in relation to the hallucinants and cocaine (see technical appendix for details).

There was some suggestion from the BCS that drug use is linked to financial difficulty but the nature of this relationship remained unclear. Evidence of such a link was absent or ambiguous in relation to cannabis and cocaine and was only clearly apparent in relation to the hallucinants. Living in a low income household was associated with a heightened rate of recent hallucinant use, particularly where the household was in considerable financial difficulty. Even allowing for the influence of other variables such difficulties continued to be associated with an increased probability of recent and past hallucinant use¹⁸. It does not necessarily follow from this that hallucinant use should be seen as a response to financial deprivation, however, as it may be that this form of drug use is a marker for a relatively expensive lifestyle which places a strain on those with a low income.

Educational failure is often considered to be a cause of illicit drug use but the evidence for such a link is fairly specific. While poor school performance has been shown to predict drug use among adolescents, doubts have been raised about the durability of this relationship over time (Newcomb et al., 1992; Hawkins et al., 1992). Such doubts were reinforced by the BCS which provided very little evidence of a link between drug use and educational failure among young adults. Respondents who had left school without any qualifications reported a slightly reduced rate of recent cannabis use compared with young adults in general and very similar rates of hallucinant use and cocaine use. Multivariate analyses confirmed that educational failure had no direct effect on the types of drug use considered here¹⁹.

¹⁸ Cramer's $V=0.07$ and $p < .05$ (hallucinant use by household finance). See technical appendix for details on the multivariate analysis.

¹⁹ Cramer's $V=0.04$, $p < .05$ (cannabis use by educational failure). $P > .05$ for hallucinant use by educational failure and cocaine by educational failure. See technical appendix for details on the multivariate analysis.

These findings were, once again, broadly supported by the YLS. This survey provided further evidence that drug use is linked to unemployment and other forms of marginalisation from the labour market. Young adults who were currently unemployed or had previously been so for a significant amount of time tended to report higher levels of use than those who had had little, if any, experience of unemployment (see Table 21). Abstinence was most evident among those who had least experience of unemployment, though beyond this general observation the situation varied between substances.

Table 21
Prevalence of drug use by unemployment (percentages, young adults)

	Cannabis			Hallucinants			Cocaine		
	Never	Past	Recent	Never	Past	Recent	Never	Past	Recent
<i>Unemployment</i>		**			**			**	
Currently unemployed									
- 1 year or more	41	16	43	49	32	19	77	16	7
- less than 1 year	42	15	42	54	18	28	85	7	8
Not currently unemployed									
- previously 1 year or more	45	22	33	46	31	23	81	9	10
- previously 6 months or more	45	25	30	56	29	15	84	9	7
- never for 6 months or more	51	22	27	66	22	13	91	3	6

Source: YLS (1998/9) ** p < .01 ** p < .05 ns p > 0.05

Note: Kendall's tau-c = 0.06 (cannabis), 0.09 (hallucinants) and 0.05 (cocaine).

Multivariate analyses confirmed the link between drug use and unemployment and helped to clarify the nature of this relationship (see Table 22). In all but its most limited form, unemployment increased the probability of recent cannabis use though these effects ceased to be significant once lifestyle indicators had been taken into account. It follows from this that the link between unemployment and cannabis use can be explained by broader lifestyle differences. More persistent effects were evident in relation to the hallucinants and cocaine: unemployment continued to increase the probability of recent and past use of these substances even when lifestyle factors had been taken into account.

Besides unemployment, drug use was also linked to other forms of marginalisation from the labour market. The heightened rates of use that were evident among those who were currently unemployed were more or less matched by those who were not formally

Table 22

Probability of drug use by unemployment – YLS (multivariate analysis, young adults)

	Cannabis			Hallucinants			Cocaine		
	Never	Past	Recent	Never	Past	Recent	Never	Past	Recent
<u>Life-course model</u>									
Currently unemployed									
- 1 year or more	0.46	0.17	0.36	0.56	0.21	0.23	0.80	0.12	0.08
- less than 1 year	0.46	0.18	0.36	0.58	0.20	0.22	0.91	0.04	0.05
Not currently unemployed									
- previously 1 year or more	0.45	0.20	0.35	0.54	0.25	0.21	0.83	0.06	0.11
- previously 6 months or more	0.46	0.24	0.29	0.59	0.26	0.15	0.86	0.06	0.09
- never for 6 months or more	0.55	0.19	0.26	0.70	0.19	0.12	0.91	0.04	0.05
<u>Lifestyle model</u>									
Currently unemployed									
- 1 year or more	0.55	0.19	0.26	0.53	0.24	0.23	0.77	0.12	0.12
- less than 1 year)	0.55	0.19	0.26	0.60	0.22	0.19	0.92	0.04	0.04
Not currently unemployed									
- previously 1 year or more	0.55	0.26	0.26	0.56	0.23	0.21	} 0.86	0.05	0.09
- previously 6 months or more	0.45	0.24	0.31	0.56	0.27	0.17			
- never for 6 months or more	0.55	0.19	0.26	0.70	0.19	0.12			

Source: YLS (1998/9) ns = p > 0.05

Notes:

1. Statistically significant effects are highlighted in bold.
2. Effects on past or recent use were estimated vis-à-vis the probability of never having used.
3. Categories that had no significant effect on recent use or past use were excluded from the model and formed part of the reference category.
4. YLS cocaine model - not currently unemployed but had been previously for 1 year or more and not currently unemployed but had been previously for 6 months or more were combined into a single category (see technical appendix for details).

unemployed but appeared to have a transient or tenuous relationship with the labour market²⁰. These forms of marginalisation were also associated with a series of significant effects that persisted into the later stages of the multivariate analysis. According to the life-course and lifestyle models, being otherwise marginalised from the labour market increased the probability of past and recent cannabis use and past and recent hallucinant use

²⁰ Respondents were considered to be otherwise marginalised from the labour market if they were not at school (including sixth form) or studying full-time at a sixth form college, college or university, were not working full-time (30 hours or more per week) or part-time (8 to 29 hours per week) and were not looking after the home or family. They were, in the main, either on a government Youth Training Scheme, were classified as long-term or permanently sick or disabled, were studying part-time.

although no such effects were evident in relation to cocaine (see technical appendix for details).

Although the YLS provided some evidence of a link between drug use and financial difficulty the nature of this relationship was, as indicated by the BCS, highly ambiguous. Young adults who had little disposable income tended to use drugs at a lower rate than those who were financially better off but their rates of use varied quite sharply according to their level of financial difficulty²¹. Those who had little disposable income and were in most financial difficulty reported higher rates of drug use than those who had a higher disposable income. By contrast, those who had little disposable income but appeared to be in little or no difficulty reported lower rates of drug use than those who had a higher disposable income. As noted earlier, a possible explanation for this pattern is that drug use provides a marker for a relatively expensive lifestyle which puts a strain on those with a low income. The multivariate models reinforced the conclusion that there is little by way of a direct relationship between financial difficulty and drug use: very few significant low income effects were revealed by the life-course and lifestyle models and those that were evident did not form a clear pattern (see technical appendix for details).

The YLS confirmed that educational failure has little, if any, relationship with the types of drug use being considered here. Levels of cannabis use, hallucinant use and cocaine use were broadly similar regardless of whether or not respondents had left school without any qualifications²² and the multivariate models pointed in a similar direction: the absence of qualifications had very little effect on the probability of cannabis use, hallucinants use or cocaine use and those effects that were evident were of marginal importance (see technical appendix for details). The YLS also revealed that there was little by way of a relationship between drug use and parental unemployment. Young adults who had grown up in families where one or both parents had experienced long-term unemployment reported very similar

²¹ Cramer's $V = 0.04$, $p < .01$ (cannabis use by financial position); 0.06 , $p < .01$ (hallucinant use by financial position) and 0.10 , $p < .01$ (cocaine use by financial position). Kendall's $\tau\text{-}c = 0.20$, $p < .01$ (cannabis use by financial difficulty); 0.16 , $p < .01$ (hallucinant use by financial difficulty); and 0.10 , $p > .05$ (cocaine use by financial difficulty).

²² Rates of use were not significantly related to educational failure for any of the substances under consideration.

rates of cannabis use to those who had grown up in families with little, if any, history of unemployment. Although significant differences were evident in relation to the hallucinants and cocaine they were fairly modest and highly ambiguous. Recent hallucinant use was most common among young adults who had grown up in families where one parent had been long-term unemployed and one had not, while past use was most common among those who had grown up in families where both parents had been long-term unemployed (or, in the case of lone parents, where one had been). Cocaine use, both recent and past, was most common among young adults who had grown up in families where one parent had been long-term unemployed and one had not²³. A similar ambiguity was evident from the multivariate analysis (see technical appendix for details).

Conclusion

The analysis presented so far confirms some elements of the new orthodoxy, but also raises important questions about their broader interpretation. Recreational drug use has become fairly widespread among young adults and clearly extends well beyond the limits of what we might expect on the basis of 'positivist' psychology or subcultural strain theory. More specifically, the analysis presented in this chapter has shown that social class, income and indicators of deprivation are all poor predictors of the more common forms of drug use and that apparently conventional young adults from privileged backgrounds are well represented among those who engage in such behaviour. In this sense, we can talk meaningfully of the 'normalised' drug user.

What is much less clear, is that this represents a significant change in the nature of social reality or the representation of that reality. Middle class youths played a prominent role in the drug using scenes of the 1960s and generational comparisons suggest that they have continued to do so ever since. Moreover, although drug use has become considerably more widespread, it has not become so pervasive that 'traditional' differences between socio-demographic groups have been eliminated. Women continue to use drugs at a lower rate

²³ Kendall's tau-c = $p > .05$ (cannabis use by parental unemployment); 0.09, $p < .01$ (hallucinant use by parental unemployment); and 0.05, $p < .05$ (cocaine use by parental unemployment).

than men and there is little evidence that the gender gap is closing; young adults from black and minority ethnic groups use drugs at a lower rate than whites; and those who are actively religious do so at a lower rate than those who are not. Finally, although the relationship between deprivation and drug use is generally weak, unemployment and other forms of marginalisation from the labour market are associated with heightened levels of use. In addition, recent research has found that various forms of drug use, including habitual cannabis use, are particularly prevalent among vulnerable groups of young people.

There is, finally, nothing particularly new about the rejection of 'positivist' psychology or subcultural strain theory. Sociologists have repeatedly challenged the idea that drug users are the product of individual pathology or social dysfunction since first showing an interest in this area. Early studies shared an antipathy to what Jock Young (1999, 133) has recently called the 'fixed locus of the offender'. The assumption, perpetuated by correctionalist criminology, that criminals are somehow different from the rest of the population and are created out of dire and unusual circumstances was wholly rejected by new deviancy theorists and provided a key focus for the early sociology of drug use. In *The Drugtakers*, for example, Young (1971) challenged the 'absolutist' notion of the distinct drug user with his or her distinct causality. Among the many arguments used to support this point, he observed that, in areas like London's Notting Hill, large numbers of young people were involved in deviant activities such as drugtaking and that it was simply implausible to suggest that all of them were psychologically inadequate or living in socially disorganised communities.

This evidence of continuity in relation to the demography of drug use and associated theoretical developments creates real difficulties for the new orthodoxy, particularly in the form of the normalisation thesis. The claim that drug use was formerly an 'atypical' pursuit of the mainly 'delinquent' and 'disordered' not only misrepresents the nature of past drug use, but also fails to acknowledge that this characterisation was wholeheartedly rejected by the early sociology of drug use. As such, the normalisation thesis can be said to rest on a distorted image of the way things were and the way they were understood to be. This, as we shall see in the next chapter, is a criticism that covers other aspects of the normalisation

thesis, as well as the new orthodoxy more generally.

6

Consumption and subterranean play

That humanity at large will ever be able to dispense with Artificial Paradises seems very unlikely. Most men and women lead lives at the worst so painful, at the best so monotonous, poor, and limited that the urge to escape, the longing to transcend themselves if only for a few moments, is and has always been one of the principal appetites of the soul...All the vegetable sedatives and narcotics, all the euphorics that grow on trees, the hallucinogens that ripen in berries or can be squeezed from roots – all, without exception, have been known and systematically used by human beings from time immemorial. And to these natural modifiers of consciousness modern science has added its quota of synthetics (Huxley, 1959, 51-2).

Every man having tasted the paradise of play in his own childhood holds in his mind as an implicit utopia a world where economic necessity does not hold sway and where he is capable of free expression of his desires. This is the psychological basis of the subterranean values, and it is in one's leisure time that a watered-down expression of 'free time' and play holds sway (Young, 1971, 131).

In the search for 'new' perspectives, several commentators have come to focus on the related notions of lifestyle and consumption. The normalisation thesis and recent feminist accounts have both interpreted drug use in these terms, viewing it as lifestyle choice involving a particular commitment to hedonistic consumption. It is often implied that there is something distinctive or wholly new about this type of consumption, the rise of which has been linked to the development of modernity (Bauman, 1998; Campbell, 1989; Featherstone, 1994). With class affiliations, family ties and traditional expectations having weakened, consumption and lifestyles have become central to the construction of individual identity or so it is argued. Apparently routine decisions about what to wear or what to eat etc have become decisions about 'who to be' and the more 'post traditional' the setting the more lifestyle concerns 'the very core of self-identity, its making and remaking' (Giddens, 1991, 81). In linking drug use to this post traditional setting, the authors of the normalisation thesis have used the concept of consumption to describe the way in which illegal drugs have become products that are marketed through an enterprise culture where legitimate and illicit markets have merged (Parker et al., 1995, 25).

Post-modern social theory is often challenged on the basis that it exaggerates the extent of change, with critics being quick to point to areas of continuity. Studies of youthful deviance are particularly susceptible to such criticisms because they often display an unhelpful historical amnesia, whereby 'youth cultures and youth crime assume the appearance of ever-increasing outrage and perpetual novelty' (Pearson, 1994, 1168). My main aim in this chapter is to develop an historically sensitive analysis of drug use based on the notions of consumption and lifestyle. At the core of the chapter, the BCS and YLS are used to explore the relationship between drug use and a range of other lifestyle indicators, particularly those relating to the consumption of alcohol and tobacco. In order to ensure that this analysis is set in its proper context, the results are preceded by a broader discussion of the development of British youth culture and the role that consumption played in earlier attempts to understand drug use. Essentially, my argument is that while the notions of consumption and lifestyle can usefully be applied to contemporary drug use, this does not represent a major disjuncture. After all, as will be demonstrated below, consumption has long been central to the development of British youth culture and featured prominently in the early sociology of drug use. Once again, therefore, it can be said that the new orthodoxy rests on a distorted image of the past, both in terms of the way things were and the way they were understood to be.

The rise of British youth culture

The end of the Second World War is often identified as a turning point in the development of British youth culture. A series of spectacular youth subcultures emerged in the years that followed, prompting many commentators to suggest that this period witnessed the birth of the modern teenager. In the words of one historian, the mid-1950s experienced a 'youthquake' that encompassed the 'explosive discovery of teenage identity' (Lewis, 1978, 118). Although such views capture something of the time they exaggerate the novelty of the post-war experience and underestimate the degree of continuity. Far from being unprecedented, the blossoming of youth that marked this period represented a culmination of much that had come before.

The origins of British youth culture can be traced back to Victorian and Edwardian times and to the profound social and economic changes of the period. When Queen Victoria came to the throne in 1837 Britain was in the midst of a transformation which saw it emerge as the world's first modern industrial society (Evans, 1983). Massive increases in manufacturing activity were accompanied by rapid urban expansion, rising living standards and a restructuring of the labour market, all of which combined to create new opportunities for mass consumption and commercialised leisure. Although initially concentrated among the middle classes, the economic benefits associated with industrialisation began to filter down to ordinary industrial workers during the second half of the nineteenth century when real wage increases were accompanied by legally prescribed hours of work, statutory holidays and half day working on a Saturday. Against this background, a nascent entertainment industry began to develop in urban working class neighbourhoods and a distinct youth leisure market began to take shape. With their new found economic independence young urban workers began to exploit the growing leisure opportunities that were becoming available to them and began to form what some have considered to be the first modern youth subcultures (Davis, 1990; Pearson, 1983; Newburn, 2002). Providing a template for much that was to follow these developments gave rise to 'respectable fears' about hooliganism, delinquency and youthful affluence (Pearson, 1983; Osgerby, 1998).

Economic conditions continued to fuel the development of British youth culture for much of the twentieth century. Following both world wars labour market trends were such that young people enjoyed increasing independence and provided a ready market for an expanding commercial leisure industry. Although the 1930s are commonly associated with unemployment and poverty these experiences were not typical of the country as a whole and were largely concentrated in the traditional industrial heartlands. Nationally, the inter war years were a time of economic growth and relative affluence for many young wage earners who enjoyed high levels of disposable income. As leisure entrepreneurs began to tap into this market a plethora of magazines appeared that were targeted at young people and a distinct youth culture emerged around the cinema, the dance hall and jazz music (Fowler, 1995). With the outbreak of the Second World War, demand for youth labour increased and concerns about the detrimental influence of 'easy money' were reawakened.

Young people's employment opportunities and earnings capacity continued to improve after the war, due largely to the growth of production line technology, fuelling the continued rise of youth-oriented leisure consumption.

The cultural significance of these trends was first identified by Mark Abrams (1959), a market researcher whose groundbreaking analysis of young people's spending patterns drew attention to the *teenage consumer*, a phenomenon he attributed to falling youth unemployment and improving wages. Although aspects of Abrams' analysis have been called into question his central point remains. Young people's earnings rose steadily following the end of the Second World War and commercial developments helped to provide British youth with an unprecedented 'social visibility'. This trend was reinforced by a series of policy initiatives, which amounted to the 'institutionalization' of youth. Compulsory education was extended, the school leaving age was raised to fifteen, youth service provision was formalised and National Service was introduced, all of which helped to restructure the nature of age-relations and added to the idea that young people were somehow different (Osgerby, 1998).

The new found visibility of young people was particularly evident in the spectacular youth subcultures of the period. From the Teddy Boys of the late 1950s, through the Mods and Rockers of the early-to-mid 1960s, to the Skinheads of the late 1960s, white working class subcultures provided an enduring focus for adult anxieties about youthful affluence, moral decline and juvenile delinquency (Newburn, 2002). Although the vast majority of post-war youth styles were of working class origin, middle class youth also made their mark through the rise of the counter culture. Until the middle of the 1960s, middle class youngsters had been relatively marginal to the development of British youth culture. With less disposable income than their working class peers they were less commercially significant and were often alienated from the subcultural worlds of groups like the Teddy boys. As higher education expanded, however, a growing section of middle class youth experienced the relative freedom of living away from home on a student grant and this provided the foundations for a growing counter culture that was, for the most part, middle class in both composition and orientation (Osgerby, 1998).

Opinions about the counter culture tend to polarise into moral condemnation on the one hand and romanticised nostalgia on the other. What was a golden age of optimism, personal freedom and self-actualisation to some was a low point of misguided radicalism, fecklessness and moral decline to others. The one thing that most commentators agree upon, however, is that the sixties represented something of a watershed. According to a recent reviewer, this era has become a totem, the historical equivalent of a brand identity which represents a particular orientation and provides a series of images that continue to pervade contemporary culture and are revisited repeatedly (Donnelly, 2005). In one of the most wide-ranging and thorough reviews of the period, Arthur Marwick (1998) concluded that the sixties can reasonably be characterised in terms of a 'cultural revolution'¹. The fifties, he noted, were characterised by rigid social hierarchy, subordination of children to parents, repressed attitudes to sex, unquestioning respect for authority and strict formalism in language etiquette and dress codes. By contrast the sixties were characterised by new subcultures and movements that were critical of mainstream society; the growing influence of youth subculture on the rest of society, dictating taste in fashion, music and popular culture; massive improvements in material life and an expansion of the consumer society; the rise of 'permissiveness' and a general sexual liberation, involving striking changes in public and private morals; new modes of self-presentation that freed people from the old canons of fashion; a participatory and uninhibited popular culture, the central component of which was rock music; and new concerns for civil and personal rights.

Drugs, consumption and subterranean play

The development of post-war British youth culture and the rise of the sixties counter culture significantly altered the position of illicit drugs. Marijuana, amphetamines and heroin had all featured in the jazz subculture prior to the war and the 'beatniks' of the fifties had dabbled with various substances, but it was only in the sixties that the country's defences against drug use were 'decisively breached' (Marwick, 1998, 4). From this point on, illicit drugs attained a cultural and political significance they had previously lacked and a new sensibility emerged that was evident in a number of contrasting ways. Official policy

¹ Marwick (1998) focused on 'the long sixties' which lasted from 1958 to 1974.

began to take the form of an extended 'moral panic', which was increasingly counter-posed by an alternative set of drug-friendly reference points. Most notably, perhaps, the hippies extolled the mind-expanding and enlightening qualities of psychedelic experiences, which they felt offered a route to a better society (Marwick, 1998) and celebratory images of drugs and drug use began to enter mainstream British youth culture, due largely to the influence of popular music (Shapiro, 1990; 1999). The likes of *The Velvet Underground*, *Jimi Hendrix* and the *Rolling Stones* became well known for their drug-fuelled hedonism and explicit lyrical references to drug use. Even the *Beatles*, the most marketable musical commodity of the decade, went through a marijuana phase and an LSD phase, both of which were evident in their work (Marwick, 1998). When Mick Jagger, and fellow *Rolling Stone* Keith Richards, were prosecuted for drugs offences in 1967 the case became 'symbolic of a wider contest between traditionalism and a new hedonism, the focal point of which was society's attitude towards recreational drugs' (Donnelly, 2005, 153). Several thousand demonstrators held a 'Legalise Pot Rally' in London's Hyde Park and an advert appeared in *The Times* calling for reform of the cannabis laws – an advert that was paid for by Paul McCartney and signed by various luminaries, including Labour MP Brian Walden, artist David Hockney, journalists David Dimbleby and Jonathan Aitken, theatre director Peter Brook, writer Graham Greene and scientist Francis Crick.

Of the various post-war youth subcultures, the Mods and hippies were among those most closely associated with illicit drugs. Both styles gave rise to moral panics and both shared an emphasis on hedonistic consumption, albeit in very different forms. Mods or 'modernists' provided the dominant youth style of the early sixties and were widely associated with the use of amphetamines or 'purple hearts' (Cohen, 1972). Their drug use, such as it was, fitted into an orientation that was straightforwardly consumptionist and was emblematic of the upwardly mobile nature of working class life at the time (Osgerby, 1998). Mods were typically employed in white collar occupations, their principal aesthetic was 'sharp but neat and visually understated' (Hebdige, 1976, 88) and the hedonistic pursuit of pleasure and the weekend display were axiomatic to their style (Donnelly, 2005).

When the hippies came to prominence in the late sixties they presented an obvious contrast

to the Mods and other working class subcultures. Typically middle class, their main interests were in politics, not fashion or tribalism, and their orientation was more *counter* cultural than *sub*cultural. The stark contrast between work and leisure that characterised working class subcultures was less pronounced and the influence on members tended to be deeper and longer lasting (Clarke et al., 1976). Differences in social composition and expressive style also gave rise to different types of drug use. According to an American study, for example, the hippies' drug use reflected: 'The basic contrast in expressive styles extant in the class structure. Put crudely, LSD, equals self-exploration/self improvement equals middle-class; while methedrine² equals body stimulation/release of aggressive impulses equals working class' (Davis and Muroz, 1970, 308).

For all their many and marked differences, the hippies and the Mods shared an emphasis on hedonistic consumption. This may seem an odd suggestion given that the counter culture was renowned for its rejection of capitalism and materialism, but several points should be considered here (Donnelly, 2005; Heath and Potter, 2005). First, the counter culture was not a homogenous movement but was a loose affiliation of people with varying levels of commitment who were held together by an opposition to the Establishment and a shared interest in self expression and personal freedom. Second, the counter culture had a more ambiguous relationship with capitalism than is often supposed. This is not to deny that there was an element of 'radicalism' - the movement was informed by an on-going dialogue with Marxism and made a concerted effort to break away from the passive consumption of the commercially packaged mainstream - but this did not entail an outright rejection of capitalist values. From the very beginning the counter culture was intensely entrepreneurial and included a focus on democratising cultural production through activities such as the publication of 'alternative' poetry and the production of small magazines, including the London Listing *Time Out*. Third, for most people the counter culture provided little more than 'a gorgeous, playful and decadent exercise in life-style' (Murray, 1989, 20). Mainstream commercial interests were quick to tap into the 'underground' market and most of those who engaged with the counter culture did so through simple acts of consumption. Fourth, counter cultural thinking emphasised the importance of

² Also known as methylamphetamine.

consumption and the pursuit of pleasure. In order to fully understand how such thinking was linked to illicit drug use it is necessary to consider the notion of subterranean play.

Subterranean values were central to David Matza and Gresham Sykes' (1961) work on juvenile delinquency and also featured strongly in Jock Young's (1971) analysis of drugtaking. Having previously considered the way that juveniles accommodate delinquent acts, Matza and Sykes went on to examine what it is that makes delinquency attractive in the first place. Echoing their earlier claim that delinquents typically adhere to conventional norms and codes of conduct, they suggested that delinquency is considered attractive, not because of a deep-seated commitment to an oppositional morality, but because of an exaggerated adherence to 'subterranean' values. In developing these claims, Matza and Sykes argued that: (a) the values behind much juvenile delinquency are far less deviant than they are commonly portrayed; and (b) the faulty picture is due to a gross oversimplification of the middle class value system. As well as pointing to significant variations in values across social divisions, including those based on class and race, they also highlighted contradictions and ambiguities within the dominant value system. While the search for adventure is generally held in abeyance, for example - particularly in the work-a-day world dominated by bureaucratization, routinization and standardization - this does not mean that it is completely rejected by society as a whole or that it never appears in the motivational structure of the law-abiding. Rather, the search for adventure is compartmentalised and allowed to take precedence at certain prescribed times in the form of sports, recreation and holidays. Accordingly (Matza and Sykes, 1961, 716):

The search for adventure, excitement, and thrills, then, is a subterranean value that now often exists side by side with the values of security, routinization, and the rest. It is not a deviant value, in any full sense, but it must be held in abeyance until the proper moment and circumstances for its expression arrive.

In summary, subterranean values are those that are in conflict or competition with other deeply held values yet are recognised and supported by many. These competing values are not necessarily the opposing viewpoints of two different groups but may co-exist within a single individual, giving rise to profound feelings of ambivalence. It follows, therefore, that delinquency does not exist outside of the conventional value system and may be readily

understood in terms of widely accepted values. By accentuating subterranean values - the emphasis on daring and adventure, the rejection of the discipline of work, the taste for luxury and conspicuous consumption and the respect of masculinity - the juvenile delinquent is reminiscent of Thorstein Veblen's (1899) 'gentlemen of leisure' and remains tied to the dominant order (Matza and Sykes, 1961, 717):

In short, we are arguing that the delinquent may not stand as an alien in the body of society but may represent instead a disturbing reflection or a caricature. His vocabulary is different, to be sure, but kicks, big-time spending, and rep have immediate counterparts in the value system of the law-abiding. The delinquent has picked up and emphasized one part of the dominant value system, namely, the subterranean values that co-exist with other, publicly proclaimed values possessing a more respectable air. These subterranean values...bind the delinquent to the society whose laws he violates.

One of the main advantages of this perspective was that it was better able to explain the distribution of delinquency than the dominant deficit based theories of the time.

Explanations that are rooted in ideas such as status deprivation, social disorganisation and the like struggle to explain the occurrence of delinquency among the middle and upper classes in a way that lifestyle perspectives do not. Regardless of social class, for example, Matza and Sykes noted that all adolescents are, to some extent, members of a leisure class because they move in a 'limbo' between earlier parental domination and future integration in the social structure through work and marriage. Once all adolescents are viewed as members of a leisure class then it becomes much easier to explain the ubiquity of deviance and its presence at all levels of society.

Drawing heavily on this perspective, Jock Young (1971) argued that drug use can best be understood as a form of subterranean play. What was distinctive about his analysis was the way it linked subterranean values to the broader political economy of 'late industrial' or 'post-industrial' societies. Young endorsed the idea that there is a basic bifurcation of values in such societies, illustrating the point by drawing a series of contrasts between formal work values and subterranean values. In one important respect, however, he departed from Matza and Sykes' formulation, arguing that it oversimplifies the value systems of modern industrial societies. Rather than forming isolated moral regions, Young

(1971, 128) emphasised that formal values and subterranean values are mutually dependent upon one another, albeit with subterranean values being subsumed under the ethos of productivity:

Leisure is concerned with consumption and work with production; a keynote of our bifurcated society, therefore, is that individuals within it must constantly consume in order to keep pace with the productive capacity of the economy. They must produce in order to consume, and consume in order to produce. The interrelationship between formal and subterranean values is therefore seen in a new light: hedonism, for instance, is closely tied to productivity.

Formal values were held to be consistent with the structure of modern industry because they serve to maintain diligent, consistent work and assist the realisation of long-term productive goals, while subterranean values were held to be identical to the customary definition of play. Alcohol and other 'psychotropic' drugs fulfil a key function here because they can be used as a '*vehicle* which enhances the ease of transition from the world of formal values to the world of subterranean values' (Young, 1971, 135). In the hands of those who disdained the ethic of productivity, moreover, such substances can be used to access more radical accentuations of subterranean reality and this is why their use is regulated. According to the ethos of productivity, subterranean values can only be expressed legitimately if the individual has earned the right to do so by working hard and being productive. Where subterranean values interfere with productivity they are considered to be illegitimate and this has important implications for drug use. It means that the social reaction against drug use is strongest in relation to substances that challenge the work ethic. Substances which promote productivity (e.g. caffeine) or aid relaxation after work (e.g. 'social' drinking or tobacco) are approved, but those that are used for purely hedonistic ends (e.g. 'problem' drinking, marihuana and heroin) are condemned. It also follows that the social reaction against drug use is strongest in response to groups that are hedonistic and disdainful of work.

Although the ethos of productivity seeks to assimilate subterranean values it does not apply uniformly across the social spectrum and is not subject to universal acceptance. Young people, for example, are in the privileged position of not having to justify their play through productivity though they are expected to invest in their future through education and

training. There are, in addition, certain groups that disdain the workaday norms of formal society and accentuate subterranean values. In developing these points Young distinguished between three different types of youth culture – conformist youth culture, delinquent youth culture and bohemian youth culture. Although subterranean values are more strongly accentuated among young people than adults they take a quite different form depending on the context. Conformist youth, for example, were said to adopt the role that adults expect of them and keep subterranean values within certain bounds so as not to threaten their future productive roles. Some deviation did occur within this context but was generally hidden and short-lived. Illicit drugs were rarely taken ‘although marihuana may be deemed innocuous enough to deserve an occasional secretive puff’ (Young, 1971, 144).

Delinquent and bohemian youth, by contrast, both dissociated themselves from the world of work and school, though they did so from very different positions and in very different ways. Delinquent youths were described as being usually from the lower working class and as focusing almost entirely on leisure and the search for adventure, hedonism and excitement because they had little access to anything other than dead-end jobs with little promise of material success. Although drugs provided delinquent youths with a possible source of excitement and pleasure their independence from the adult world was strictly limited by their domestic and economic circumstances: they usually lived at home, had little economic independence and were surrounded by adults. While bohemian youth also occupied a position outside the workaday world their situation was held to be qualitatively different from that of delinquent youth because it involved a much greater degree of choice. In contrast to the delinquent youth, the bohemian youth was, initially at least, well capable of leading a materially successful life. Yet, according to Young (1971, 148):

The hippies have discovered that as middle class young people - which they largely are - it is possible for them to forgo the ethos of productivity. They can both disdain work and reject school. They can criticize ‘leisure’ as an outpost of work and demand that authentic ‘play’, the free expression of subterranean values, be the major focus of man’s existence.

The extent to which the hippies were able to attain a subterranean reality was limited by some fairly obvious contradictions in bohemian culture. There was, for example, a

'yawning gap' between the aspirations of the culture and what was, in many cases, a completely inadequate economic base. Nonetheless, by relying on handouts from parents, working friends, national assistance and part time hustling, the hippies acquired the status of a 'new leisured class'. Drug use was elevated to a paramount position, providing 'a distinctive badge of membership', which was ideologically and morally buttressed against criticisms from the outside world (Davis, 1970, 336; see also, Young, 1971). Greatest value was placed on substances that were functionally suited to achieving certain subterranean goals, with marihuana and LSD proving most popular because they helped create a culture that was short-term, hedonistic, spontaneous, expressive, and unalienated. Although the counter culture had already begun to fade by the early 1970s, contemporaries were moved to ask whether this way of life might point in the direction society was heading. There were those who felt that the hippies did not represent in any way what society would become, but there were others who suggested that the counter culture might be 'telling us more than we can now imagine about our future selves' (Davis, 1970, 340). This suggestion rested on the idea that the hippies were a product of deep-seated structural forces that would continue to shape the social world. In his essay, *Focus on the Flower Children: Why All of Us May Be Hippies Someday*, Fred Davies (1970, 330) claimed that hippie culture was a response to the incipient problems of identity, work, and leisure in an age of staggering material abundance and unprecedented opportunities for leisure:

... the hippies, in their collective yet radical breaks with the constraints of our present society, are - whether they know it or not (some clearly do intuit a connection) - already rehearsing *in vivo* a number of possible cultural solutions to central life problems by the emerging society of the future.

A point that was echoed by Jock Young (1971, 148) when he claimed that hippie culture had gained adherents in all advanced Western countries because it represented 'a common response to the problems of work and leisure which have arisen in post-industrial societies'.

Youth lifestyles at the Fin de Siècle

More than thirty years later, there can be little doubting the prescience of this earlier analysis. Post-industrial societies have continued to experience a general increase in leisure

(Gershuny, 2000), prompting Jock Young (1999) to argue that late modern sensibilities have been profoundly shaped by a culture of individualism, which stresses immediacy, hedonism and self-actualization. As a result, the 'Keynesian balance between hard work and hard play' has become 'tipped towards the subterranean world of leisure' (1999, 10). The elevation of leisure is particularly evident in the development of the night-time economy, which some commentators have argued has been significantly boosted by the post-industrial transformation. According to Dick Hobbs and colleagues (2003) deindustrialisation has created a void in many Western cities, which governments and entrepreneurs have sought to fill by establishing sites of consumption and leisure to replace nineteenth-century centres of production. Lying at the heart of this process, repeated city centre regeneration initiatives have resulted in a massively expanding night-time economy, which is geared towards young people, 'experiential consumption' and the weekend ritual. A place of 'dangerous adventure', offering release from 'the slate grey glare of daylight', the night-time economy is replete with suggestions of the illicit and has come to provide 'the amphitheatre of drug, alcohol and sexual experimentation' (Hobbs, 2003, 46).

Time out and the night-time economy

Recent surveys show that youth lifestyles are subject to considerable variation, with young adults differing markedly in their orientation towards the night-time economy and associated forms of consumption. The BCS confirms that the vast majority of young adults frequently go out after dark and regularly spend evenings in pubs and clubs, but also indicates that these experiences are by no means universal: slightly more than one in four young adults had not been out for an evening in the previous week, a similar proportion had not been to a pub in the evening during the previous month and more than half had not been to a night club in this time (see Table 23). Similar variations were highlighted by the YLS, which indicated that four-fifths of young adults go out three or more evenings a week, but that a quarter go out less than once a week; that three fifths had been to a pub and a party, dance, nightclub or disco in the last month, but that one-in-six had not been to either; and that one-in-eight had spent time 'hanging around' outside during the last month. The YLS also included more general measures of sociability, of which time spent with a close friend

proved to be the most important³. A fifth of young adults indicated that they ‘very often’ spent time with a close friend, two-fifths that they did so ‘often’, a quarter ‘occasionally’, one in twelve ‘rarely’ and one in thirty three ‘never’.

Table 23
Young adults’ use of leisure time – BCS

	Percentage	Confidence interval
<i>Frequency with which usually go out after dark</i>		
At least once a week	84	83 - 86
At least once a fortnight	6	5 - 7
At least once a month	4	3 - 5
Less than once a month	3	2 - 4
Never	3	2 - 4
	100	
<i>Number of evenings out in the last week</i>		
Six or seven	10	9 - 12
Four or five	12	11 - 14
Two or three - weekday and weekend	15	13 - 16
- weekend only	10	9 - 11
- weekday only	6	5 - 7
One - weekend only	12	10 - 13
- weekday only	8	6 - 9
None	28	26 - 29
	100	
<i>Evenings visited pub in last month</i>		
Almost every day	7	6 - 8
About three times a week	11	10 - 13
Once or twice a week	24	22 - 26
Less than once a week	33	31 - 35
None	25	23 - 27
	100	
<i>Visits to a nightclub or disco in last month</i>		
At least once a week	13	11 - 14
Less than once a week	29	27 - 31
none	58	56 - 61
	100	

Source: BCS (1998)

n = 2,855

Note: weekdays were defined as monday to thursday; weekends as friday to Sunday.

³ Respondents were asked about time spent with a particular close friend and time spent with a group of friends. Answers to these questions were strongly associated with one another and the multivariate analyses identified time spent with a particular close friend as the more powerful predictor of illicit drug use.

Drinking

Alcohol has become an increasingly prominent feature of young people's leisure over the last fifty years or so and is central to the workings of the night-time economy, providing 'the vital lubricant that aids the propulsion of young people into this carnivalesque and consumer-oriented world' (Hobbs et al., 2003, 36). Having previously made little effort to court the youth market, the drinks industry began to target young people during the early 1960s. Pub culture and alcohol were quickly installed as 'central pillars' of youth oriented leisure and by the 1980s many city centre pubs had become the preserve of 18 to 24 year olds (Osgerby, 1998). With the subsequent proliferation of marketing strategies encouraging the transgression of traditional drinking norms, the amount that young people drink has increased markedly (Hobbs et al., 2003; Rickards et al., 2004). According to one recent estimate two-fifths of all male drinking sessions involve bingeing (Alcohol Concern 2003)⁴.

Despite this, the majority of young adults do not tend to consume alcohol in large amounts. Most drink regularly but in moderation (see Table 24). According to both the BCS and YLS young adults commonly drink up to four days a week, consuming an average of four units a day on the days they drink and ten units a week during the weeks they drink. Although typically drinking beyond sensible daily limits, most have regular alcohol free days which keep them within recommended weekly limits. Current Department of Health (1995) guidance states that men who consistently drink four or more units of alcohol a day and women who consistently drink three or more units a day face progressive health risks, while previous guidance advised that drinking less than 21 units per week for men and 14 units per week for women is unlikely to damage health. Comparing these benchmarks to the BCS indicates that three in five young adults typically drank more than the sensible daily limit when they drank, but projected figures suggest that no more than one in five

⁴ Clinically, binge drinking refers to continuous drinking over a day or more to the point of unconsciousness, but the term is now used more generally to describe heavy drinking sessions. The amount of alcohol involved is a matter of debate though British studies tend to define binge drinkers as men who consume at least eight units and women at least six units in a day. This definition has been challenged by some commentators who favour subjective approaches which define binge drinking as that resulting in at least partial drunkenness (Institute of Alcohol Studies, 2005).

Table 24
Young adults' drinking habits

	Percentage / number	Confidence interval
BCS		
<i>Frequency with which usually drink alcohol (percentage)</i>		
Every day	3	2 - 4
Five or six days a week	5	4 - 5
Three or four days a week	18	16 - 20
One or two days a week	36	34 - 38
Two or three times a month	13	11 - 14
Once a month	8	6 - 9
Less than once a month	7	5 - 8
Less than once a year	2	2 - 3
Never drink	9	8 - 11
	100	
<i>Average number of drinks consumed on days that drink</i>		
Lower quartile	2	2 - 2
Median	4	4 - 4
Upper quartile	6	6 - 7
YLS		
<i>Frequency with which usually drink alcohol (percentage)</i>		
Every day	2	1 - 3
Five or six days a week	6	5 - 7
Two to four days a week	34	32 - 36
Once a week	23	21 - 25
Once or twice a month	12	11 - 14
Less than once a month	17	15 - 19
Not in the last year	3	2 - 3
Never had an alcoholic drink	4	3 - 5
	100	
<i>Number of days drunk alcohol in last week (for those who have had a drink in last year)</i>		
Lower quartile	1	0 - 1
Median	2	2 - 2
Upper quartile	3	3 - 4
<i>Number of drinks consumed in last week (for those who have had a drink in last week)</i>		
Lower quartile	5	4 - 6
Median	10	9 - 11
Upper quartile	18	16 - 20

Source: BCS (1998) and YLS (1998/9)

n = 2,855 (BCS) and 3,478 (YLS)

Note: both surveys defined a drink as ½ pint of beer, a glass of wine or a single measure of spirit

exceeded the sensible weekly limit⁵. A similar degree of excess was revealed by the YLS, which indicated that one in five young adults had consumed more than the sensible weekly limit during the previous week.

A more detailed classification of drinking styles was developed by combining measures of frequency and quantity (see Figure 4a and 4b). Based on the BCS, this classification indicates that nearly one in three young adults drink within sensible daily limits and have at least three alcohol free days a week; a further one in four drink up to twice the recommended daily limit on the days they drink but have three or more alcohol free days a week, which keeps most within sensible weekly limits; and approximately one in four binge drink at least once a month, with one in five do so on a weekly basis. In response to the YLS, nearly three in four young adults reported usually having three or more alcohol free days a week and having stayed within sensible limits during the previous week. But one in five reported usually drinking on a weekly basis and having exceeded the recommended limit in the previous week. Further evidence of regular heavy drinking was provided by the one in three young adults who reported having been very drunk at least once a month during the previous year⁶.

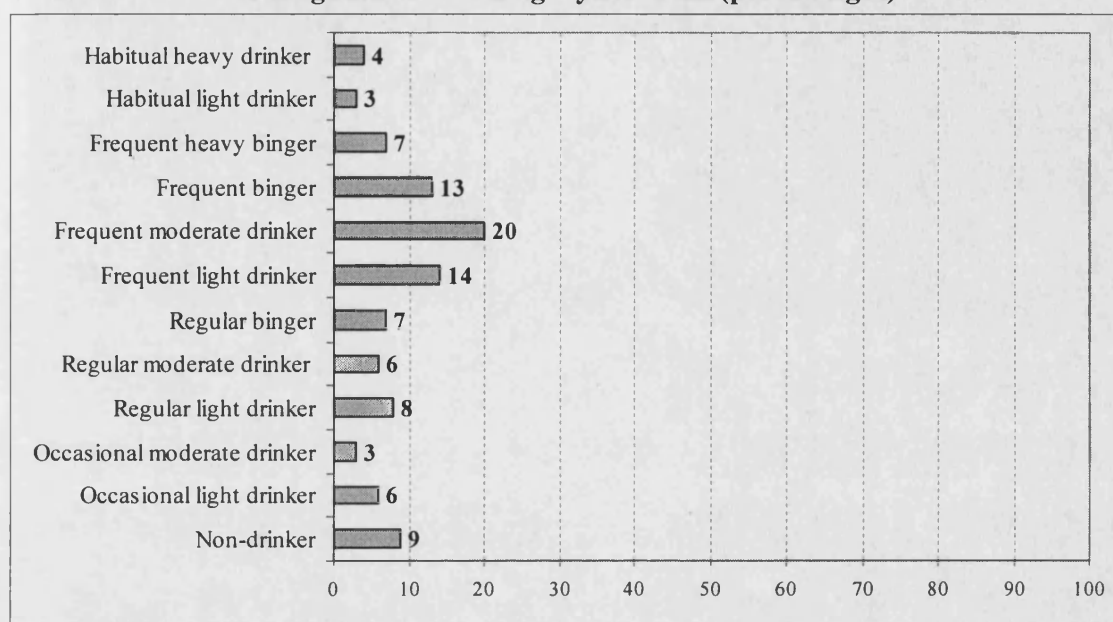
Smoking

Unlike alcohol and illicit drugs, tobacco rarely features in broader debates about youth culture and leisure. This is a significant omission because trends in smoking point in a very different direction from those relating to drink and drugs. Since the middle of the last century smoking has become increasingly socially marginalised as repeated governments have sought to discourage such behaviour by introducing greater price controls alongside advertising restrictions, smoking bans and substantial investment in health education and

⁵ Weekly totals were estimated by multiplying the number of drinks consumed per drinking day by the number of days that alcohol was usually consumed.

⁶ Rates of drunkenness during the last year were as follows: at least once a week = 8 per cent (6-9 per cent), several times a month = 8 per cent (7-9 per cent), once or twice a month = 15 per cent (13-16 per cent), every couple of months = 18 per cent (16-19 per cent), less often = 20 per cent (19-22 per cent) and not at all = 32 per cent (30-34 per cent).

Figure 4a
Young adults' drinking styles - BCS (percentages)⁷



Source: BCS (1998)

n = 2,850

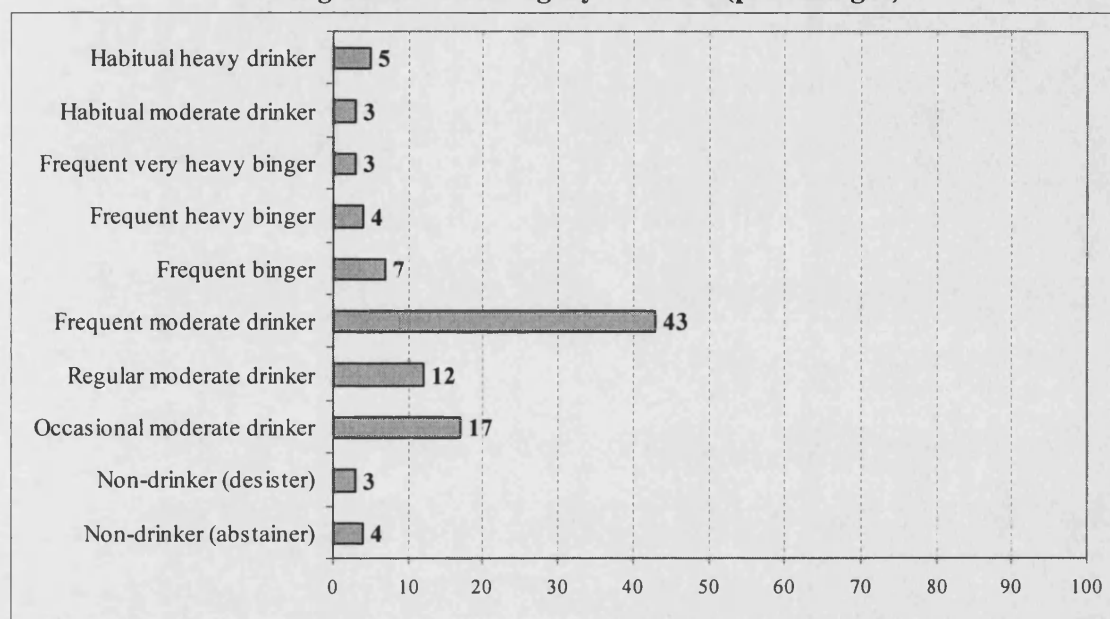
Key - drinking styles

	Frequency of drinking	Amount consumed on days that drink - average number of drinks shown in brackets ⁸
Habitual heavy drinker	Five or more days a week	More than the sensible daily limit (5)
Habitual light drinker	Five or more days a week	Within the sensible daily limit (2)
Frequent heavy binger	One to four days a week	At least four times the sensible daily limit (12)
Frequent binger	One to four days a week	More than twice the sensible daily limit (8)
Frequent moderate drinker	One to four days a week	One to two times the sensible daily limit (4)
Frequent light drinker	One to four days a week	Within the sensible daily limit (2)
Regular binger	One to three times a month	More than twice the sensible daily limit (7)
Regular moderate drinker	Less than once a week	One to two times the sensible daily limit (4)
Regular light drinker	One to three times a month	Within the sensible daily limit (2)
Occasional moderate drinker	Less than once a month	More than the sensible daily limit but only moderately so (4)
Occasional light drinker	Less than once a month	Within the sensible daily limit (1)
Non-drinker	Never	Does not apply

⁷ Confidence intervals: habitual heavy drinker = 3-5 per cent; habitual light drinker = 2-4 per cent; frequent heavy binger = 6-8 per cent; frequent binger = 11-14 per cent; frequent moderate drinker = 18-22 per cent; frequent light drinker = 13-16 per cent; regular binger = 5-8 per cent; regular moderate drinker = 5-7 per cent; regular light drinker = 7-9 per cent; occasional moderate drinker = 2-4 per cent; occasional light drinker = 5-7 per cent; and non-drinker = 8-11 per cent.

⁸ According to projected figures the average number of units consumed per week for weekly drinkers was as follows: habitual heavy drinkers = 33; frequent heavy bingers = 23; frequent bingers = 14; frequent moderate drinkers = 8; and frequent light drinkers = 3.

Figure 4b
Young adults' drinking styles - YLS (percentages)⁹



Source: YLS (1998/9)

n = 3,473

Key - drinking styles

Frequency of drinking

Amount consumed in last week - average number of drinks shown in brackets

Habitual heavy drinker	Five or more days a week	More than the sensible weekly limit (32)
Habitual moderate drinker	Five or more days a week	Within the sensible weekly limit (12)
Frequent very heavy binger	One to four days a week	More than twice the sensible weekly limit (46)
Frequent heavy binger	One to four days a week	More than one-and-a-half times the sensible weekly limit (31)
Frequent binger	One to four days a week	More than the sensible weekly limit (21)
Frequent moderate drinker	One to four days a week	Within the sensible weekly limit (8)
Regular moderate drinker	Once or twice a month	Almost all within the sensible weekly limit (5) ¹⁰
Occasional moderate drinker	Less than once a month	Almost all within the sensible weekly limit (3) ¹⁰
Non-drinker (desister)	Not in last year	Does not apply
Non-drinker (abstainer)	Never had a drink	Does not apply

anti-smoking campaigns. As a result, tobacco consumption has fallen sharply (Marsh and McKay, 1994; Peto et al., 2000; Townsend, 1988; Townsend et al., 1994). From a situation where nearly four in five men smoked in the late 1950s, just over one in four currently do

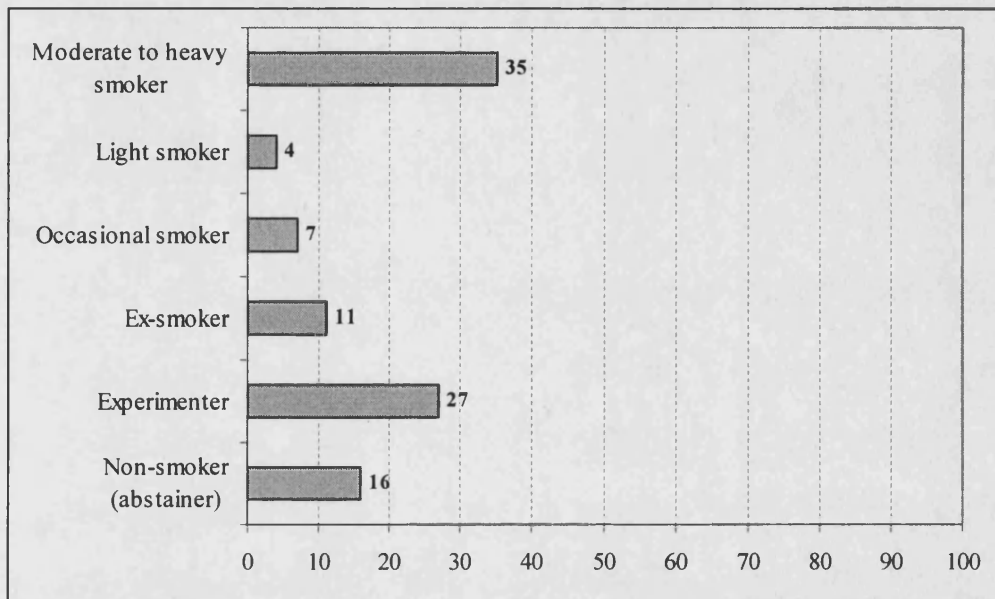
⁹ Confidence intervals: habitual heavy drinker = 4-6 per cent; habitual moderate drinker = 2-4 per cent; frequent very heavy binger = 3-4 per cent; frequent heavy binger = 3-4 per cent; frequent binger = 6-8 per cent; frequent moderate drinker = 40-45 per cent; regular moderate drinker = 11-14 per cent; occasional moderate drinker = 15-18 per cent; non-drinker (desister) = 2-3 per cent; and non-drinker (abstainer) = 3-5 per cent.

¹⁰ Of those classified as occasional or regular drinkers 98 per cent had remained within recommended limits during the previous week and fewer than one per cent had drunk more than one and half times this limit.

so. Smoking among women has also fallen to a similar level, albeit from a more modest peak of just over two in five during the late 1960s. The convergence of male and female prevalence rates has been accompanied by other important demographic shifts. Older smokers have given up in such large numbers that prevalence rates are now highest among 20 to 24 years olds, though there has been evidence of decline even here (Rickards et al., 2004). Recent trends have also exacerbated existing social class differences, with the decline in smoking being concentrated among higher income groups. As a result smoking has become strongly associated with poverty and social exclusion (Marsh and McKay, 1994).

Although most young adults do not go on to become long-term smokers the vast majority have had some experience of smoking. The YLS indicates that two in five young adults are regular smokers (light to heavy), while almost one in five have never smoked (see Figure 5). This leaves a considerable number that have smoked on a few occasions but have never done so regularly and a smaller number that have smoked regularly but no longer do so. The position that smoking has come to occupy is particularly noteworthy because it indicates that contemporary youth lifestyles cannot be fully understood in terms of increasingly hedonistic consumption. Indeed, the marginalisation of smoking highlights the importance of a competing set of influences based around health promotion and 'healthy' living, which have been considered symptomatic of a broader cultural shift (Bunton et al., 1995). As well as playing a central role in the political transformation of health care, health promotion has entered ever more deeply into the domain of consumer culture. Not only is this domain replete with images of youthful vitality, but the number of 'health-related' commodities has increased sharply so that they now cover an array of goods and services including food, drink, clothing, insurance policies, gym-membership, sports equipment, dietary supplements and so on. The consumption of such goods offers a potentially important source of identity, but is not necessarily organised into a coherent lifestyle based around a single organising principle. As such, extravagance and hedonism may co-exist with a culture of health and body maintenance.

Figure 5
Young adults' smoking habits (percentages)¹¹



Source: YLS (1998/9)

n = 3,490

Key - smoking habits

Moderate to heavy smoker: smokes every day or more than 10 cigarettes a week.

Light smoker: smokes 1-10 cigarettes a week.

Occasional smoker: smokes sometimes but not every week.

Ex-smoker: used to smoke but do not any more.

Experimenter: only ever smoked once or twice.

Abstainer: never smoked.

Drug use as lifestyle

Whether or not young adults use illicit drugs is closely connected to other aspects of their lifestyle, including participation in the night-time economy, drinking and smoking. On the basis of these links it is my contention that the types of drug use considered here involve a particular commitment to consumption and intoxication, while non-use and past use tend to be indicative of a more general emphasis on abstinence, moderation and desistance.

¹¹ Confidence intervals: moderate to heavy smoker = 32-37 per cent; light smoker = 3-5 per cent; occasional smoker = 5-8 per cent; non-smoker - desister = 9-12 per cent; non-smoker - experimenter = 25-29 per cent; and non-smoker abstainer = 16-19 per cent.

Participation in the night-time economy

Several studies have found that participants in the night-time economy are considerably more drug experienced than the general youthful population (Release, 1997; Petridis, 1996; Measham et al., 2001). The significance of this link was confirmed by the BCS and YLS, both of which found recent drug use to be most prevalent among young adults who made most use of pubs and clubs (see Table 25). According to the BCS, young adults who went to the pub most often reported the highest rates of recent drug use and the lowest rates of abstinence across all three drug-types. Conversely, those who had been to the pub least often consistently reported the lowest rates of recent use and the highest rates of abstinence. The same basic symmetry was evident in relation to time spent in clubs. Similarly, the YLS found that young adults who had been to a pub and club in the last month reported the highest rates of recent drug use and the lowest rates of abstinence across all three drug-types. By contrast, those who had not been to a pub or club during this period consistently reported the lowest rates of recent use and among the highest rates of abstinence.

Further analysis of the BCS showed that participation in the night-time economy continued to have a marked effect on the probability of drug use even when other factors had been taken into account (see Table 26). Going to the pub almost every day in the last month, rather than not at all, approximately doubled the probability of recent cannabis use, hallucinant use and cocaine use. Regular clubbing had a similar effect on the use of hallucinants and cocaine but had no such effect in relation to cannabis. The YLS, by contrast, provided rather less evidence of a direct link between participation in the night-time economy and illicit drug use. Evidence of such a link was limited to the hallucinants and was fairly modest even here: having been to a pub and a club in the last month, rather than having been to neither, increased the probability of recent use by slightly less than a half (from 0.11 to 0.16), but having been to one or the other had no discernable effect. The remaining YLS models indicated that pubbing and/or clubbing had no direct effect on the probability of either cannabis use or cocaine use. This suggests that links between these forms of drug use and participation in the night-time economy are mediated by the other factors included in the models.

Table 25
Prevalence of drug use by participation
in the night-time economy (percentages, young adults)

	Cannabis			Hallucinants			Cocaine		
	Never	Past	Recent	Never	Past	Recent	Never	Past	Recent
BCS									
<i>Evenings visited pub in last month</i>	..			..			..
Almost every day	31	24	45	50	25	25	83	7	11
About three times a week	40	22	38	57	27	16	91	3	6
Once or twice a week	51	23	27	72	16	13	95	2	3
Less than once a week	60	23	17	76	18	6	95	3	2
None	74	15	11	84	12	4	96	3	1
<i>Visits to a nightclub or disco in last month</i>									
		
At least once a week	43	18	39	58	19	23	89	4	7
Less than once a week	50	22	28	68	21	11	94	3	3
None	63	21	16	78	15	6	96	3	2
YLS									
<i>Visits to pub and/or nightclub etc in last month</i>									
		
Pub and club	44	19	36	59	22	19	87	5	8
Club but not pub	64	12	24	80	11	10	94	4	3
Pub but not club	51	26	23	68	25	7	92	4	4
Neither pub nor club	68	15	17	78	16	7	95	4	1
Source: BCS (1998) and YLS (1998/9)				** p < 0.01		* p < 0.05		ns p > 0.05	

Notes:

1. BCS, pub: Kendall's tau-c = 0.24 (cannabis); 0.17 (hallucinants); and 0.04 (cocaine).
2. BCS, club: Kendall's tau-c = 0.18 (cannabis); 0.16 (hallucinants); and 0.08 (cocaine).
3. YLS, pub and/or club: Kendall's tau-c = 0.15 (cannabis); 0.13 (hallucinants); and 0.05 (cocaine).

Two points are worth noting here, which may help to explain the differences between the surveys. On the one hand, the YLS contained less detailed information than the BCS about levels of participation in the night-time economy and this lack of detail may have masked some significant effects. Equally, the YLS contained more detailed information than the BCS about drinking and smoking and this extra level of detail may have mediated the effects associated with the night-time economy.

Table 26
Probability of drug use by participation in the
night-time economy – BCS (multivariate analysis, young adults)

	Cannabis			Hallucinants			Cocaine		
	Never	Past	Recent	Never	Past	Recent	Never	Past	Recent
<i>Visits to pub in last month</i>									
Almost every day	0.39	0.24	0.37	0.60	0.21	0.20	0.88	0.06	0.06
About three times a week	0.48	0.22	0.30	0.61	0.26	0.13	0.94	0.03	0.03
Once or twice a week	0.55	0.21	0.25	0.72	0.16	0.12	0.94	0.03	0.03
Less than once a week	0.61	0.21	0.18	0.75	0.18	0.08	0.94	0.03	0.03
None (reference)	0.61	0.21	0.18	0.75	0.18	0.08	0.94	0.03	0.03
<i>Visits to club in last month</i>									
At least once a week	ns	ns	ns	0.62	0.20	0.18	0.89	0.04	0.07
Less than once a week	ns	ns	ns	0.70	0.19	0.12	0.94	0.03	0.03
None (reference)	-	-	-	0.75	0.18	0.08	0.94	0.03	0.03

Source: BCS (1998)

Model: Lifestyle model

Notes:

1. Statistically significant effects are highlighted in bold.
2. Effects on past or recent use were estimated vis-à-vis the probability of never having used.
3. Categories that had no significant effect on recent use or past use were excluded from the model and formed part of the reference category.
4. The effect of having been to the pub almost every day in the last month on past cocaine use was close to the cut-off denoting statistical significance ($p=.06$).

Drinking

Drinking habits provide an obvious mediating factor linking drug use to participation in the night-time economy. Several commentators have identified the incorporation of ecstasy culture into the world of corporate youth entertainment as being of particular importance in this regard. What started out as an ‘underground’ of unlicensed outdoor events and warehouse parties, where alcohol was consciously rejected in favour of ecstasy, has been co-opted and repackaged by established commercial interests, including the drinks industry (Collin and Godfrey, 1997). As part of this process distinctions between pubs and bars, night clubs and dance clubs, ‘raves’ and festivals have become blurred and a pattern of ‘serious’ recreational drug use has emerged which commonly involves the use of alcohol alongside cannabis, ecstasy, amphetamines and cocaine (Measham et al., 2001).

That drinking and drug use are strongly linked is clear from recent surveys. The BCS shows that drug use is most prevalent among young adults who drink most frequently and

most heavily (see Table 27). In broad terms, habitual drinkers and frequent bingers reported the highest rates of drug use, while non-drinkers and occasional or regular light drinkers reported the lowest rates of use, with moderate drinkers tending to be located somewhere in-between. This general pattern was evident across all three categories of drug use and was broadly replicated by the YLS, which confirmed that the highest rates of use

Table 27
Prevalence of drug use by drinking style – BCS (percentages, young adults)

	Cannabis			Hallucinants			Cocaine		
	Never	Past	Recent	Never	Past	Recent	Never	Past	Recent
Habitual drinker		**			**			**	
- heavy	33	24	43	52	30	18	88	6	7
- light	46	24	30	79	10	12	90	3	7
Frequent drinker									
- heavy binger	38	23	39	51	31	18	88	4	8
- binger	46	22	33	65	20	14	93	4	4
- moderate	51	23	27	67	20	13	93	3	4
- light	55	27	18	78	16	6	95	3	2
Regular drinker									
- binger	55	28	17	66	23	11	97	3	1
- moderate	69	16	14	79	15	5	96	1	3
- light	74	18	8	86	11	3	97	3	*
Occasional drinker									
- moderate	63	22	15	80	15	5	96	4	0
- light	76	13	12	86	7	6	99	1	0
Non-drinker	82	9	9	90	6	3	96	4	1

Source: BCS (1998) * < 0.5 per cent ** p < 0.01 * p < 0.05 ns p > 0.05

Note: BCS: Kendal's tau-c = 0.25 (cannabis); 0.18 (hallucinants); 0.04 (cocaine).

are to be found among habitual drinkers and (very) heavy bingers, followed by more modest drinkers and non-drinkers (see Table 28). Notable differences were also evident among non-drinkers depending on whether or not they had ever drunk alcohol. Among those who never had, negligible rates of drug use suggested a broader commitment to abstinence. But among those who had drunk at some earlier time, moderate rates of use suggested a greater affinity with the more modest drinkers. Evidence of recent drug use among former drinkers suggests that some young adults use illicit drugs in preference to alcohol, but this pattern of consumption remains very unusual. Only a small proportion of young adults stop drinking and those who use drugs tend to drink more frequently and more

heavily than those who do not.

Table 28
Prevalence of drug use by drinking habits – YLS (percentages, young adults)

	Cannabis			Hallucinants			Cocaine		
	Never	Past	Recent	Never	Past	Recent	Never	Past	Recent
<i>Drinking style</i>	**			**			**		
Habitual drinker									
- heavy	23	21	56	38	27	36	71	7	23
- moderate	33	11	56	47	22	31	79	5	16
Frequent drinker									
- very heavy binger	22	16	63	30	26	44	73	13	14
- heavy binger	33	26	42	48	20	32	80	7	13
- binger	37	23	40	53	24	23	84	3	14
- moderate	49	21	30	66	22	12	91	5	5
Regular moderate drinker	61	19	20	74	20	6	97	2	1
Occasional moderate drinker	62	17	21	74	18	8	95	4	1
Non-drinker									
- desister	68	13	19	73	14	12	92	4	3
- abstainer	96	1	3	99	0	2	99	1	1
<i>Drunkenness in last year</i>	**			**			**		
At least once a week	23	19	58	41	21	39	76	8	17
Several times a month	31	16	53	39	31	30	78	7	15
Once or twice a month	33	21	46	50	26	24	85	6	9
Every couple of months	44	22	34	62	23	15	88	5	6
Less often	53	24	23	71	23	7	93	4	3
Not at all	71	16	13	80	15	5	96	3	1

Source: YLS (1998/9) ** p < 0.01 * p < 0.05 ns p > 0.05

Notes:

1. *Drinking style*: Kendall's tau-c = 0.26 (cannabis); 0.22 (hallucinants); 0.11 (cocaine).
2. *Drunkenness*: Kendall's tau-c = 0.32 (cannabis); 0.27 (hallucinants); 0.11 (cocaine).

The concentration of recent drug use among habitual drinkers and binge drinkers suggests that such behaviour often entails a particular commitment to excess and intoxication. As further evidence of this pattern, the YLS highlighted a clear link between drug use and frequent drunkenness: rates of use increased sharply with more frequent drunkenness, so that those who got drunk most often displayed considerably higher rates of recent use than those who got drunk rarely if at all (see Table 28).

The multivariate models confirmed the link between drinking and drug use. Even allowing for the influence of other variables, the BCS indicated that heavy drinking increased the probability of cannabis use, hallucinant use and cocaine use (see Table 29)¹². The influence of the more modest drinking styles was rather more varied, depending on the substance. Being an occasional or light drinker, rather than a non drinker, had most effect in relation to cannabis, which suggests that this type of drug use is particularly sensitive to slight differences in drinking habits. The effects of these more modest drinking styles also tended to be concentrated on past use rather than recent use, suggesting a particular propensity towards desistance. All things being equal, habitual drinkers and frequent (heavy) bingers were more likely to be recent cannabis users than past users, while modest drinkers were more likely to be past users than recent users. It follows, therefore, that modest drinking styles are linked to particularly tentative forms of cannabis use and may form part of a broader process of ‘calming down’, whereby young adults moderate both their drinking habits and their drug use.

A rather less finely graded set of effects was evident in relation to the hallucinants and cocaine. Drinking modestly had relatively little impact on the use of these substances, resulting in more polarised patterns of use: not drinking or drinking modestly was associated with a high probability of abstinence, while more frequent and/or heavier drinking increased the probability of use. That said, there was some evidence of a middle ground in relation to the hallucinants as both frequent light drinking and regular moderate drinking increased the probability of past use while having no discernable effect on recent use. As noted above this pattern suggests a particular propensity towards desistance and is consistent with the process of ‘calming down’.

The YLS provided further evidence of a direct link between drinking and drug use, though once again the precise nature of this link varied depending on the substance. Cannabis use was simultaneously linked to drinking style and frequency of drunkenness, with both

¹² Heavier drinking styles include frequent bingers, frequent heavy bingers and heavy habitual drinkers. More modest styles include occasional drinkers (light and moderate), regular light drinkers and frequent light drinkers, leaving regular moderate drinkers, regular bingers, frequent moderate drinkers and habitual light drinkers as borderline cases.

Table 29
Probability of drug use by drinking
style – BCS (multivariate analysis, young adults)

	Cannabis			Hallucinants			Cocaine		
	Never	Past	Recent	Never	Past	Recent	Never	Past	Recent
Habitual drinker									
- heavy	0.46	0.21	0.33	0.64	0.23	0.13	0.88	0.07	0.05
- light	0.46	0.21	0.33	0.80	0.12	0.08	0.88	0.03	0.09
Frequent drinker									
- heavy binger	0.39	0.28	0.33	0.55	0.31	0.14	0.86	0.07	0.07
- binger	0.49	0.21	0.30	0.68	0.21	0.11	0.92	0.03	0.05
- moderate	0.52	0.23	0.25	0.68	0.21	0.11	0.92	0.03	0.05
- light	0.53	0.26	0.21	0.74	0.18	0.08	0.95	0.03	0.02
Regular drinker									
- binger	0.52	0.26	0.22	0.63	0.25	0.12	0.95	0.03	0.02
- moderate	0.63	0.18	0.19	0.73	0.20	0.07	0.92	0.03	0.05
- light	0.69	0.19	0.12	0.80	0.12	0.08	0.95	0.03	0.02
Occasional drinker									
- moderate	0.62	0.20	0.18	0.80	0.12	0.08	0.95	0.03	0.02
- light	0.69	0.19	0.12	0.80	0.12	0.08	0.95	0.03	0.02
Non-drinker (reference)	0.78	0.12	0.12	0.80	0.12	0.08	0.95	0.03	0.02

Source: BCS (1998)

Model: Lifestyle model

Notes:

1. Statistically significant effects are highlighted in bold.
2. Effects on past or recent use were estimated vis-à-vis the probability of never having used.
3. Categories that had no significant effect on recent use or past use were excluded from the model and formed part of the reference category.

indicators having an effect that was independent of the other¹³. Although the influence of drunkenness tended to overshadow the influence of drinking style both sets of effects pointed in the same direction, producing a clear cumulative pattern whereby cannabis use becomes increasingly likely the more that young adults drink and the more often they get drunk. For an average young adult who got drunk at least once a week, the probability of

¹³ The frequency with which people get drunk clearly implies a certain drinking style and these variables were fairly strongly associated with one another (Kendall's tau-c = 0.46). Consequently considerable care was required when entering them into the models. For each category of drug use two models were developed – one which included both variables individually and one which combined them into a single variable. The Pseudo R² statistic indicated - in each case - that the two models were virtually identical. Where both variables were included individually the models were able to separate out the effects associated with each and provided robust estimates (the standard errors were not particularly large compared to those for the other effects included in the models). These models were preferred on the grounds that the effects of drinking style could be compared to the effects of drunkenness.

recent cannabis use was five times greater than that for a non-drinker who had never drunk alcohol (see Table 30). Broadly similar patterns were evident in relation to the hallucinants and cocaine though they were rather less dependent on the effects of drinking style. Frequency of drunkenness had a marked effect on both these categories of drug use, while drinking style had a much more limited role (see technical appendix for details). Being a non-drinker or light drinker did reduce the probability of hallucinant use but tended to do so only modestly and none of the remaining drinking styles had any direct effect on this type of drug use. In terms of their effect on hallucinant use, therefore, distinctions between the various forms of bingeing and habitual drinking were mediated by the frequency with which young adults got drunk. Drinking style had an even more limited role in relation to cocaine, where it was almost entirely eclipsed by the influence of drunkenness.

Table 30
Probability of drug use by drinking style and
drunkenness combined - YLS (multivariate analysis, young adults)

	Cannabis			Hallucinants			Cocaine		
	Never	Past	Recent	Never	Past	Recent	Never	Past	Recent
<i>Drunkenness in last year</i>									
At least once a week	0.38	0.21	0.41	0.51	0.20	0.29	0.78	0.06	0.16
Several times a month	0.36	0.19	0.45	0.42	0.35	0.23	0.80	0.07	0.13
Once or twice a month	0.34	0.24	0.43	0.51	0.26	0.24	0.82	0.07	0.11
Every couple of months	0.45	0.22	0.33	0.63	0.22	0.15	0.88	0.05	0.08
Drunk less often	0.48	0.22	0.30	0.68	0.20	0.12	0.94	0.03	0.03
Not in last year (reference)	0.68	0.17	0.16	0.76	0.16	0.08	0.95	0.03	0.02
Non-drinker (abstainer)	0.91	0.01	0.08	0.88	0.05	0.08	0.95	0.02	0.03

Source: YLS (1998/9)

Model: Lifestyle model

Notes:

1. Differences in drinking style were taken into account by weighting the relevant effects according to the drinking profile associated with the given rate of drunkenness. It was assumed that abstainers had never been drunk.
2. Statistical significance was assessed primarily in relation to drunkenness. 'Not been drunk in the last year' provided the reference category and all significant effects associated with the drunkenness variable have been marked in bold. Where the effect of being a 'non drinker (abstainer)' was significant compared to being a 'habitual heavy drinker' (the reference category for drinking style) this has also been marked in bold. See technical appendix for details.
3. Effects on past or recent use were estimated vis-à-vis the probability of never having used. 4. Categories that had no significant effect on recent use or past use were excluded from the model and formed part of the reference category.

The combined effects of drinking style and drunkenness reinforce the suggestion that cannabis use is particularly sensitive to slight differences in alcohol consumption. As with

the BCS, drinking habits were associated with a rather more finely graded set of effects in relation to cannabis than either the hallucinants or cocaine. Such differences were most apparent in relation to modest drinking styles and infrequent drunkenness, which had relatively little effect on recent hallucinant use or recent cocaine use and resulted in relatively polarised patterns of use. This was especially the case in relation to cocaine.

Despite these differences, a number of general patterns can be identified which cut across all three categories of drug use. *First*, heavy drinking and frequent drunkenness are consistently associated with a particularly high probability of recent drug use. *Second*, moderate drinking habits are associated with relatively high odds of desistance: that is, the probability of past use relative to recent use was highest among those who drank moderately and got drunk infrequently. This suggests that modest drinking habits tend to be accompanied by a shift from recent to past drug use, which reinforces the earlier suggestion, based on the BCS, that such habits may form part of a broader process of ‘calming down’. *Third*, having never drunk alcohol carries a very low probability of any kind of drug use, whether recent or past, and a very high probability of abstinence. Where non-drinkers (abstainers) had used drugs, they tended to have done so recently and there was relatively little evidence of desistance. Such effects can be explained by the relatively small number of young adults who choose to use drugs in preference to alcohol.

Smoking

Post-war trends suggest a degree of convergence between illicit drug use and tobacco consumption. Recent figures indicate that the proportion of young adults that have used an illicit drug in the previous year is now very similar to the proportion that smoke tobacco¹⁴ and there is clearly considerable overlap between these types of consumption. The YLS confirms that current smokers are the most active users of illicit drugs, with moderate to heavy smokers reporting the highest rates of recent drug use, followed by light and

¹⁴ The 2002/3 General Household Survey found that 32 per cent of 16 to 24 year olds were cigarette smokers (Rickards et al., 2004), while the 2002/3 British Crime Survey found that 28 per cent had used an illicit drug in the last year (Chivite-Matthews et al., 2005). Similarly, the 1998 YLS found that 38 per cent of 16 to 30 year olds were regular smokers and that 33 per cent had used an illicit drug in the last year.

occasional smokers (see Table 31). A rather different pattern was evident among ex-smokers, who combined moderate rates of recent drug use with relatively high rates of past use, suggesting a particular propensity towards desistance. Non-smokers were different again as they reported very low rates of both recent and past drug use, suggesting a particular propensity towards abstinence. The nature of the link with tobacco consumption was similar across all three categories of drug use but was strongest in relation to cannabis, presumably because both substances are typically smoked.

Table 31
Prevalence of drug use by smoking habits – YLS (percentages, young adults)

	Cannabis			Hallucinants			Cocaine		
	Never	Past	Recent	Never	Past	Recent	Never	Past	Recent
	**			**			**		
Moderate to heavy smoker	27	22	52	44	28	28	81	8	12
Light smoker	30	24	46	51	32	17	89	4	7
Occasional smoker	36	20	44	56	25	19	86	7	8
Ex-smoker	39	38	24	61	31	7	90	7	3
Experimenter	67	17	17	81	13	6	96	2	2
Non-smoker (abstainer)	92	5	2	90	7	3	98	*	2
Source: YLS (1998/9)	** p < .01			* p < .05			ns p > .05		

Notes: Kendall's tau-c = 0.44 (cannabis); 0.33 (hallucinants); 0.12 (cocaine).

Links between smoking and drug use were confirmed by the multivariate models. Striking effects were evident across all three categories of drug use, which broadly followed the pattern described above. An average young adult who had never smoked tobacco was unlikely to have used illicit drugs and the probability of such use was greatly increased if they had smoked, particularly if they had done so on more than an experimental basis (see Table 32). Whether or not they continued to smoke also had important implications for their patterns of drug use. Being a current smoker, in all its various guises, increased the probability of recent drug use to a much greater degree than being an ex-smoker, though its effect on the probability of past use was more limited. Giving up smoking, by contrast, tended to have a greater effect on the probability of past use than recent use, which increased the odds of desistance. All things being equal, ex-smokers were much more likely to have used illicit drugs than non-smokers, but were much more likely to have stopped doing so than current smokers.

Table 32

Probability of drug use by smoking habits – YLS (multivariate analysis, young adults)

	Cannabis			Hallucinants			Cocaine		
	Never	Past	Recent	Never	Past	Recent	Never	Past	Recent
<i>Smoking habits</i>									
Moderate to heavy smoker	0.23	0.19	0.58	0.46	0.28	0.27	0.79	0.09	0.12
Light smoker	0.26	0.22	0.52	0.47	0.31	0.22	0.86	0.05	0.09
Occasional smoker	0.31	0.21	0.47	0.56	0.27	0.18	0.82	0.09	0.09
Ex-smoker	0.36	0.35	0.29	0.60	0.29	0.11	0.89	0.08	0.03
Experimenter	0.65	0.16	0.20	0.87	0.09	0.05	0.97	0.01	0.02
Non-smoker (reference)	0.92	0.05	0.03	0.87	0.09	0.05	0.97	0.01	0.02

Source: YLS (1998/9)

Model: Lifestyle model

Notes:

1. Statistically significant effects are highlighted in bold.
2. Effects on past or recent use were estimated vis-à-vis the probability of never having used.
3. Categories that had no significant effect on recent use or past use were excluded from the model and formed part of the reference category.

Onset of drinking and smoking

By the time they use illicit drugs the vast majority of young people have already started to drink and smoke. For the most part, therefore, drug use represents an extension of existing patterns of behaviour. Recent surveys have repeatedly identified the 11 to 15 year age range as a key period of experimentation, during which many young people start to use alcohol, tobacco and/or illicit drugs (Goddard and Higgins, 2000; Boreham and McManus, 2003; Fuller, 2005). These surveys have also shown that such early experiences tend to follow a particular order, with alcohol and tobacco use typically starting some time earlier than illicit drug use. This gap in onset is conceptually significant because it underpins the suggestion that drinking and smoking may be considered predictors of illicit drug use. Empirical analysis confirms that this is indeed the case, having shown that early experiences of drinking and smoking are associated with heightened rates of drug use (Boreham and McManus, 2003; Fuller, 2005).

That drinking and smoking are powerful predictors of illicit drug use is evident from the YLS. Even allowing for fading memories, respondents to this survey confirmed that they

typically used illicit drugs some time after they first tried alcohol and tobacco¹⁵. Young adults reported having had their first ‘proper’ alcoholic drink at an average of 14 years of age and of having first tried smoking at around the same time¹⁶. Those who had used illicit drugs reported slightly earlier experiences of drinking and smoking than those who had not, extending the gap between these different forms of consumption a little further. On average, therefore, young adults reported having first tried illicit drugs three years after having had their first proper alcoholic drink and/or first trying smoking.

The YLS also confirmed that early experiences of drinking and smoking are associated with heightened rates of drug use. Young adults who had their first alcoholic drink and/or tried smoking before their 10th birthday consistently reported the highest rates of recent drug use: one in two had used cannabis in the last year, one in three had used a hallucinant during this period and one in ten had used cocaine. These prevalence rates were more than twice those reported by young adults who did not drink or smoke until they were 14 or 15 years old and were more than three-and-a-half times those reported by young adults who did not drink or smoke until after their 15th birthday. Similar, albeit slightly reduced, differences were evident from the multivariate models (see Table 33). These models show that early onset drinking and/or smoking dramatically increased the probability of recent use across all three drug-types. They also indicate that later onset was associated with heightened odds of desistance, which suggests particularly tentative forms of drug use.

¹⁵ This analysis was based on the age at which respondents said they first tried alcohol, tobacco and illicit drugs. Statistical tests revealed no significant differences between the reported age at which young adults started to drink and smoke, but did reveal significant differences between the age at which they first drank or smoked and the age at which they first tried illicit drugs. None of the young adults included in the survey had used drugs without also smoking or drinking and the vast majority (88 per cent) were older when they first tried drugs than when they had their first proper alcoholic drink or first tried smoking. Slightly less than one-in-ten (eight per cent) started to drink and/or smoke at the same age that they first tried drugs, which left two per cent who had used drugs before they first tried drinking and/or smoking.

¹⁶ The vast majority of young adults had their first ‘proper’ alcoholic drink and/or first tried smoking when they were between 10 and 15 years old: 37 per cent had done so when they were 10 to 13 and 35 per cent had done so when they were 14 or 15. This left seven per cent who drank and/or smoked before their 10th birthday and 18 per cent who did not drink or smoke until after their 15th birthday. A very small proportion (two per cent) had abstained from both drinking and smoking.

Table 33
Probability of drug use by early onset drinking
and/or smoking – YLS (multivariate analysis, young adults)

	Cannabis			Hallucinants			Cocaine		
	Never	Past	Recent	Never	Past	Recent	Never	Past	Recent
<i>Age first drank or smoked</i>									
< 10 years (reference)	0.28	0.25	0.47	0.53	0.26	0.21	0.86	0.06	0.09
10-13 years	0.39	0.22	0.39	0.53	0.26	0.21	0.86	0.06	0.09
14-15 years	0.55	0.20	0.25	0.68	0.20	0.12	0.91	0.05	0.04
16 years or older	0.67	0.16	0.17	0.82	0.12	0.06	0.96	0.02	0.02

Source: YLS (1998/9)

Model: Lifestyle model

Notes:

1. Statistically significant effects are highlighted in bold.
2. Effects on past or recent use were estimated vis-à-vis the probability of never having used.
3. Categories that had no significant effect on recent use or past use were excluded from the model and formed part of the reference category.

Combined effects of drinking and smoking

The analysis presented so far has concentrated on separating out the effects of particular lifestyle indicators. Such an approach helps to specify the nature of the relationships involved, but takes little account of the links between these indicators. This is particularly important in relation to drinking and smoking because young adults are more likely to smoke the more they drink and the more often they get drunk and vice versa. Those who smoke and drink most heavily are, in addition, the most likely to have had their first alcoholic drink and/or tried smoking at a relatively young age¹⁷. In relation to drug use, this means that the effects of drinking and smoking tend to be cumulative (see Table 34). Young adults who had little or no experience of these forms of consumption had a very low probability of any kind of illicit drug use, be it recent or past. By comparison, even fairly unremarkable drinking and smoking profiles (e.g. Type C, see below) greatly increased the probability of drug use, though much of their effect was evident in relation to past use, which suggests a particular propensity towards desistance and moderation. Heavier drinking and smoking profiles (e.g. Type D, see below) had a rather different set of effects, dramatically increasing the probability of recent use, while having a marked but less

¹⁷ Kendall's tau-c = 0.13 (drinking style by smoking habits); 0.18 (drunkenness by smoking habits); 0.16 (drinking style by age at which first drank and/or smoked); 0.19 (drunkenness by age at which first drank and/or smoked); and 0.28 (smoking by age at which first drank and/or smoked). In all cases, $p < .01$.

striking effect on past use. Such effects clearly suggest that heavier drinking and smoking profiles are linked to relatively active patterns of drug use.

Table 34
Probability of drug use by drinking and smoking
habits combined – YLS (multivariate analysis, young adults)

	Cannabis			Hallucinants			Cocaine		
	Never	Past	Recent	Never	Past	Recent	Never	Past	Recent
<i>Drinking and smoking habits</i>									
Type A	0.99	*	0.01	0.95	0.02	0.03	0.98	0.01	0.01
Type B	0.97	0.03	0.01	0.94	0.05	0.01	0.99	0.01	*
Type C	0.54	0.23	0.23	0.74	0.17	0.09	0.92	0.04	0.04
Type D	0.09	0.15	0.77	0.19	0.31	0.50	0.49	0.12	0.39

Source: YLS (1998/9)

* = < .005

Model: Lifestyle model

Key - drinking and smoking habits

- Type A: Never had a proper alcoholic drink and never tried smoking.
Type B: Not been drunk in last year, but do drink; never smoked; had first drink when 16 years or older.
Type C: Been drunk regularly in last year (once or twice a month or once every couple of months); has smoked but does not currently do so; first drank and/or smoked when 14 or 15 years old.
Type D: Been drunk frequently in last year (several times a month or at least once a week); current smoker; first drank and/or smoked before 13 years old

Note: the effects of drinking style were taken into account by weighting them according to the profile associated with the given rate of drunkenness.

Time spent with friends and 'hanging about'

Social networks have been identified as an important influence on young people's relationship with illicit drugs. It is well established that drug use provides a basis for peer clustering, with users and non-users tending to form distinct networks, but there is some disagreement over the precise interpretation of this pattern. In particular, explanations that have focused on the role of peer pressure have been challenged on the basis that peer selection provides a more appropriate basis for understanding (Coggans and McKellar, 1994; but see Santor et al., 2000). What remains clear, however, is that some social networks have a greater degree of involvement with illicit drugs than others and differences in this regard may be related to broader socio-environmental factors. Several commentators have pointed to a link with social exclusion, for example, arguing that where

young people are involved in street-centred networks this is likely to increase their knowledge about, and access to, illicit drugs (Johnston et al., 2000; Shildrick, 2002).

The role of social networks could only be assessed in a fairly rudimentary way on the basis of the BCS and YLS because neither survey covered this area in much detail. Nonetheless, the YLS clearly shows that drug use is linked to sociability and participation in street networks. Rates of recent use increased quite sharply according to the frequency with which young adults spent time with friends: those who were in such company most often reported rates of recent use that were at least four times the rate reported by those who were never in such company¹⁸. According to the multivariate models, this pattern continued to be evident even when other factors had been taken into account. Spending little or no time with close friends consistently reduced the probability of recent drug use and involved some very marked effects. For an average young adult, never spending time with a close friend, as opposed to doing so very often, reduced the probability of recent cannabis use from 0.31 to 0.09 and reduced the probability of recent hallucinant use from 0.15 to 0.03. Rarely or never spending time with a close friend also reduced the probability of recent cocaine use from 0.06 to 0.01¹⁹.

Participation in street networks is also associated with heightened rates of drug use, though this relationship is largely mediated by other factors. Of those young adults who had ‘hung around’ on the street in the last month, almost half had recently used cannabis, slightly more than one in five had recently used a hallucinant and approximately one in ten had recently used cocaine. These rates of use were approximately one-and-a-half-times those reported by young adults who had not recently ‘hung around’ on the streets²⁰. The

¹⁸ Kendall’s tau-c = 0.15 (cannabis use by time spent with a close friend); 0.10 (hallucinant use by time spent with a close friend); and 0.07 (cocaine use by time spent with a close friend). $P < 0.01$ in all cases. Very similar relationships were evident in relation to time spent with a group of friends.

¹⁹ In addition, occasionally or rarely spending time with a close friend reduced the probability of recent cannabis use from 0.31 to 0.25 and occasionally spending time with a close friend reduced the probability of recent hallucinant use from 0.15 to 0.11.

²⁰ Cramer’s V = 0.15, $p < .01$ (cannabis use by hanging around on street); 0.08, $p < .01$ (hallucinant use by hanging around on street); and 0.08, $p < .05$ (cocaine use by hanging around on street).

multivariate models confirmed that participation in street networks increased the probability of recent drug use, but these effects were modest when compared to differences in rates of use. For an average young adult, 'hanging around' on the street increased the probability of recent cannabis use from 0.26 to 0.30, of recent hallucinant use from 0.13 to 0.17 and of recent cocaine use from 0.05 to 0.08. To a large extent, therefore, the link between participation in street networks and drug use appears to be mediated by other variables included in the models. Age plays a particularly important role in this regard because 'hanging around' on the street is largely limited to young adults in their late teens and early twenties, which also happens to be the peak period for illicit drug use (see chapter seven)²¹.

Conclusion

Having rejected traditional claims that drug use can be explained as the result of individual or social pathology, recent perspectives have come to focus on the related notions of leisure, consumption and lifestyle. Accordingly, drug use is seen as being essentially hedonistic, part of a broader search for pleasure, excitement and enjoyment. The analysis presented in this chapter provides strong empirical support for such perspectives and clearly shows that illicit drug use is linked to other leisure-related activities, including participation in the night-time economy and associated forms of consumption. Drinking and smoking play a particularly important role in this regard, reinforcing previous suggestions that alcohol and tobacco often serve as a gateway to illicit drug use (Parker et al., 1998). Very few young people use illicit drugs without first gaining some experience of drinking and/or smoking and the earlier they start to drink or smoke the more likely they are to go on to use illicit drugs. The extent of young adults involvement in the night-time economy and related forms of consumption varies markedly, however, and these variations tend to coincide with one another. As such, recent drug use tends to form part of a package which also involves considerable use of pubs and clubs, 'binge' drinking, frequent drunkenness and regular smoking. Past drug use, on the other hand, is often indicative of a broader process of

²¹ The proportion of young adults who had 'hung around' on the streets in the previous month varied from 42 per cent of 16-17 year olds to 13 per cent of 18-22 year olds, five per cent of 23-26 year olds and three per cent of 27 to 30 year olds. Cramer's $V = 0.41$, $p < .01$.

‘calming down’, while non-use may reflect a more general emphasis on abstinence. Far from being a universal feature of early adulthood, therefore, these patterns indicate that recreational drug use tends to involve a particular commitment to hedonistic consumption and intoxication.

Claims that illicit drug use should be considered a form of leisure-related consumption have been presented as something of a departure in the recent literature. Where these claims have been linked to the onset of post-modernity, moreover, they have been viewed as providing an explanation for rising rates of use. There are, however, a number of difficulties with such claims. For one thing they tend to pay insufficient attention to the past. Ever since late Victorian times, British youth culture has been fuelled by expanding opportunities for leisure-related consumption and the emergence of widespread drug use in the mid-to-late 1960s was quickly interpreted in these terms. Jock Young’s (1971) early work was particularly important in this regard and highlights a much greater degree of continuity than is often acknowledged. After all, illicit drug use can still be plausibly viewed as an expression of subterranean values, which act as a bridge between licit and illicit forms of consumption. Attempting to explain the proliferation of drug use as part of an inexorable shift towards consumption also runs the risk of cultural determinism. Such perspectives do not readily explain why some young people use drugs, while others do not and take little account of countervailing trends, such as the rise of ‘healthy lifestyles’ and the long-term decline in smoking. Finally, to view drug use as a purely, or even mainly, cultural product is to underplay the significance of other, potentially more important, influences, including those relating to structure and opportunity. It is to these matters that the next chapter turns.

Just a phase?

Young people certainly do seek to inhabit worlds (the pub, the club, the disco floor) in which they are in control. But so do adults, who also indulge in leisure, use it as a source of fantasy, a place to act out 'subterranean values'. The distinctive nature of youth culture must be explained, then, not by reference to leisure itself, but to young people's position in work and family, to the 'reality' from which leisure is, on occasion, an escape (Frith, 1985, 360).

The transition from childhood to adulthood is generally considered to be a critical phase in human development, but is one that is not easily defined. Although social scientists routinely refer to this period as adolescence or youth there is considerable ambiguity surrounding these terms (Coleman and Hendry, 1999). The boundary between youth and adulthood is often blurred and, legal definitions aside, there is no simple way of distinguishing one phase from the other. Becoming adult is clearly linked to age, but cannot be fully understood in such terms because it also involves changing roles and responsibilities. Because these changes do not occur simultaneously, moreover, but are staggered over time and take effect at different ages for different people, youth 'has neither a clear chronological beginning nor end' (Coles, 1995, 7). As a further complication, youth is an 'elastic' concept which means different things at different times and in different places (Newburn, 2002b). In Britain, for example, the transition from childhood to adulthood has changed quite dramatically in recent times, prompting considerable debate about how this phase of the life-course is to be understood (Furlong and Cartmel, 1997; Coleman and Hendry, 1999). Adolescence is starting earlier than in previous generations but is taking longer to complete, with the result that young people are experiencing an extended period of semi-dependency and an increasingly fragmented transition. Such developments have reinforced existing doubts about whether adolescence can realistically be considered a single phase and have added to claims that it should be seen as a series of transitions, each of which should be understood as a separate event.

Within criminology, the changing nature of adolescence has raised questions about whether young people are growing out of crime in the way that they used to (Graham and Bowling,

1995). Such developments have also been identified as offering a possible explanation for recent trends in crime and related psychosocial disorders (Rutter et al., 1998). The extent to which these suggestions can plausibly be applied to drug use provides a key focus for much of this chapter. Particular attention is given to assessing the value of a transitions perspective in explaining the place and meaning of drug use among young adults. In order to identify the broader implications of this analysis it is considered in the light of recent developments in life-course criminology and early adult transitions.

Life-course criminology

The observation that crime is mostly committed by young people has prompted suggestions that any theory of criminal offending should seek to explain how such behaviour fits with the course of individual development from infancy to old age (Smith, 2002; Laub and Sampson, 2003). Travis Hirschi and Michael Gottfredson famously claimed that the age distribution of crime - its onset and desistance - is invariant across time, space and historical context and therefore cannot be explained by any of the variables currently available in criminology (Hirschi and Gottfredson 1983; Gottfredson and Hirschi, 1990). According to this perspective age has a direct effect on crime and desistance is something that 'just happens' due to 'the inexorable aging of the organism' (Hirschi and Gottfredson, 1990, 141). Unsurprisingly, perhaps, this has proved to be a controversial claim. Several authors have shown that desistance is related to changes in a range of sociological and psychological variables, including life-course events such as marriage, employment and education (see Farrall and Bowling, 1999; Laub and Sampson, 2003). Many others have challenged the claim that the relationship between age and crime is invariant and have rejected the notion that age 'causes' desistance. Age, they maintain, is not a personal characteristic but an index of the likely stage of development that someone has reached and of their social standing. As such, the explanation for 'age effects' must lay in the detailed process of development and their associated social meanings and roles (Smith, 2002; Gadd and Farrall, 2004; see also Rutter et al., 1998).

In one of the most notable recent developments in life-course criminology, John Laub and Robert Sampson have developed an 'age-graded theory of informal social control' (Sampson and Laub, 1993; Laub and Sampson, 2003). As this description implies, their approach rests on a sympathetic critique of control theory. Rather than trying to explain deviant impulses, control theory assumes that individuals are subject to many temptations to engage in rewarding criminal behaviour and will do so unless they are held in check. As one of the leading advocates of this perspective, Travis Hirschi (1969) argued that the key to delinquency control is provided by the social bond, which is made up of attachment, commitment, involvement and belief. Attachment refers to the emotional connection that individuals feel towards others and includes sensitivity to their opinions, feelings and expectations; commitment concerns the accumulated investment that people have in relationships, activities and objects and is, in effect, their stake in conformity; involvement relates to participation in legitimate activities and the extent to which individuals are tied to appointments, deadlines, hours and plans; and belief concerns the extent to which they feel they should obey the rules of society.

According to Laub and Sampson (2003) traditional control theory suffers from various weaknesses, the most important of which is its failure to address the role of human agency and motivation. Nonetheless, they initially viewed informal social control as providing the primary explanation of crime and desistance over the life-course and have continued to favour a modified version of this position. In their more recent work, Laub and Sampson identify several components, including human agency, situational choice, routine activities, ageing and historical context, which they feel should be incorporated into social control theory in order to provide a fuller explanation of criminal behaviour. Drawing on the work of new deviancy theorists, such as David Matza and Howard Becker, their emphasis on the importance of human agency leads them to view crime as a vehicle for demonstrating freedom and choice. Such behaviour, they argue, is purposeful, systematic and meaningful; attractive because it offers a source of excitement and, as such, represents more than a weakening of the social bond. At the same time, however, these 'agential processes' are said to be reciprocally linked to situations and larger structures: that is to say, situations and structures are partly determined by the choices that individuals make yet simultaneously

constrain, modify and limit the choices that are available to them. Because situations are said to vary in the extent to which they constrain behavioural choices, persistence and desistance from crime are considered to be the result of 'situated choice'. What is considered important, therefore, is the interplay of agency, action and structure through time.

Based on this interplay, Laub and Sampson maintain that persistence in and desistance from crime can be meaningfully understood within the same theoretical framework. Persistence, they note, is explained by a lack of social controls, few structured routine activities and purposeful human agency, while desistance is attributed to a confluence of social controls, structured routine activities and purposeful human agency. Arguing that persistence and desistance are ongoing processes, Laub and Sampson emphasise that social ties play an important role across all stages of the life-course: informal and formal social controls are said to become more salient with age, however, and the influence of social bonds is said to interact with age and life experiences. During adolescence the bonds that tie children to family and school tend to weaken and are yet to be replaced by a new set of adult relationships and associated commitments. As a result young people are generally less constrained during adolescence than at any other time of their lives and are freer to engage in acts of delinquency and deviance. Thereafter new bonds are acquired through spouses, children, employers and friends, which have the potential to act as catalysts for change.

According to Laub and Sampson desistance from crime is facilitated by 'turning points' or changes in situational and structural life circumstances like a 'good' marriage or a stable job. These turning points are not considered to be deterministic and nor is desistance said to depend on cognitive transformation or identity shifts. Rather, it is said to occur by default (2003, 278-9):

Desistance for our subjects was not necessarily a conscious or deliberate process but rather a consequence of what Howard Becker calls 'side bets' (1960, 38). Many men made a commitment to go straight without even realizing it. Before they knew it they had invested so much in the marriage or job that they did not want to risk losing their investment.

The main turning points identified by Laub and Sampson are marriage, employment and military service, which are said to have the potential to reshape life-course trajectories by reordering short-term situational inducements to crime and redirecting long-term commitments to conformity. Social ties created through marriage are considered to be important in so far as they create interdependent systems of obligation and restraint that impose significant costs on criminal activity. Marriage may also facilitate desistance through direct monitoring and social control by spouses and consequent changes in everyday routines. Marital obligations tend to reduce leisure activities outside of the family and thus have the potential to separate individuals from delinquent peer groups. Parenting responsibilities bring further changes to routine activities as more and more time is spent in family-centred activities rather than unstructured time with peers¹. Finally, marriage and parenthood may encourage desistance through a reorganisation of self-identity as people come to think of themselves as getting 'serious' or 'settling down'.

Laub and Sampson acknowledge that desistance may occur in response to enduring attachments rather than to marriage per se, but emphasise the special qualities of marital bonds. In doing so, they support the view that marriage differs from cohabitation and has a more significant role in crime prevention. While some, such as Gottfredson and Hirschi (1990), consider the marriage-crime relationship to be spurious on the grounds that marital bonds do not 'just happen' and are created by individual choice, Laub and Sampson maintain that the impact of marriage can not simply be dismissed as a selection-effect. In particular they argue that selection into marriage is less systematic than many people assume, often originating in fortuitous contacts made through routine activities; that the personality and interactional styles individuals bring to the marriage are malleable and can be altered by the emergent qualities of the marriage itself; and that the individual differences which are presumed to influence the marriage process do not explain desistance, much less the marriage effect.

¹ Statistical analysis indicated that becoming a parent was not a significant factor in explaining desistance from crime once marital attachment had been taken into account, but life-history narratives suggested that parenting was important (Sampson and Laub, 1993; Laub and Sampson, 2003).

The processes by which work and military service are held to encourage desistance are very similar to those already described in relation to marriage. Work, even more than marriage, changes routine activities and provides social ties, monitoring, direct supervision as well as an alternative source of identity. These changes are felt particularly sharply in relation to the military, which introduces a major source of discontinuity in the life-course. A prominent feature of military service is said to be the 'knifing off' of past experiences and its potential for reorganising social roles and life opportunities. Similar to marriage and work, but more consciously by design, the military changes routine activities, provides direct supervision and social support, and allows for the possibility of identity change. While highlighting the importance of marriage, work and military service, Laub and Sampson are careful to emphasise that these turning points are historically embedded, yet are equally clear that their theory has relevance beyond the immediate context in which it was developed: 'the patterns of persistence and desistance from crime that we have uncovered are more general than specific with respect to place, historical time, gender and race' (Laub and Sampson, 2003, 283).

The changing nature of early adult transitions

At the beginning of the twentieth century the pioneering American psychologist Granville Stanley Hall (1904) famously described adolescence as a period of 'storm and stress'. His legacy can still be seen in the way that this phase of the life-course is generally thought to be characterised by turmoil and upheaval, though such views have been criticised for creating a misleading impression which is unsupported by the empirical evidence (Coleman and Hendry, 1999). Since the 1950s repeated studies have shown that only a minority of young people experience what might be described as a stressful or turbulent adolescence and that the majority manage this transition reasonably well. That said, the journey from childhood to adulthood has become demonstrably more complex and difficult in recent times (Furlong and Cartmel, 1997; Coleman and Hendry, 1999). As well as taking longer to complete, this journey has become increasingly fragmented and pluralized, emphasising the point that there is no one clearly delineated moment when individuals become adult. Under these circumstances several authors have sought to identify multiple markers for the

transition out of adolescence. According to Bob Coles (1995), for example, there are three main 'youth transitions', which denote entry into adulthood: the transition from full-time education and training to a full-time job in the labour market (the school to work transition); the transition from family of origin (mainly the biological family) to family of destination (the domestic transition); and the transition from living with parents (or surrogate parents) to living away from them (the housing transition).

Of the main youth transitions those relating to work and family have probably changed the most in recent years, due largely to the restructuring of the labour market (Furlong and Cartmel, 1997; Coleman and Hendry, 1999). Like much of the industrialised world, Britain experienced a major economic shift during the final third of the twentieth century based on the continuing decline of manufacturing and a marked expansion of the service sector. This shift dramatically reduced the demand for unskilled labour and led to the collapse of the youth labour market, which greatly affected the school to work transition. Henceforth school leavers experienced much greater difficulty finding work, unemployment became commonplace and employment opportunities were reconfigured within a policy framework that prioritised training, flexibility and reduced labour costs. Whereas the ready availability of relatively unskilled positions in large manufacturing units had previously meant that most young people made fairly direct transitions from school to full-time employment the collapse of the youth labour market meant that this transition took longer and became more fragmented and less predictable. From the mid-1980s the proportion of young people who left school to enter the labour market at the earliest opportunity fell sharply and by the end of the century most of those who reached the school leaving age faced a choice of staying on in full-time education or finding a place on a training scheme: during the late 1980s and early 1990s the proportion of 16 to 17 year olds in full-time education almost doubled, rising from 37 per cent in 1985 to 66 per cent in 1992 and by the end of the decade almost three quarters of this age group were engaged in full-time education (Osgerby, 1998; Coleman and Hendry, 1999; DfES, 2003a, 2003b, 2005).

The recent expansion of education and training has also been evident in relation to higher education though this particular trend dates back to the middle of the last century. Between

1938 and 1962 the proportion of British school leavers continuing into full-time higher education tripled from approximately 2.7 per cent to 8.5 per cent (Osgerby, 1998). Thereafter participation in higher education doubled in just a few years and did so again during the course of 1980s. From 1980 to 2000 the proportion of young people going to university to study full time increased from 13 per cent to 33 per cent and slightly more than two in five 18 to 30 year olds currently enter higher education (Walker and Zhu, 2003). Recent trends mean that young people from all social classes tend to remain in full-time education longer than they used to and that higher education is no longer the preserve of a relatively small elite (Coleman and Hendry, 1999). A significant minority of young people are not engaged in either education, training or work, however, with recent figures from the Youth Cohort Survey indicating that eight per cent of 16 and 17 year olds and 12 per cent of 18 year olds find themselves in this position (DfES, 2000; Newburn and Shiner, 2005). Some of these young people may be actively seeking work but others, having experienced unemployment after completing their education or training, may withdraw from the labour market (Furlong and Cartmel, 1997).

With the extension and fragmentation of the school to work transition young people are financially dependent on their parents for longer than before and this has had far reaching implications for the transition into adulthood as a whole. During the 1950s and 1960s, full employment and relative prosperity facilitated rapid housing and domestic transitions which tended to follow a sequence of events, whereby young people typically left school, then had their first sexual encounter, left home and married sometime later (Kiernan, 1985; Furlong and Cartmel, 1997). With the subsequent collapse of the youth labour market, the rise in unemployment, and changes to the benefits system the government effectively relinquished economic responsibility for young people, making parents financially responsible for their children for longer and extending the period of dependency to the age of 18 and of semi-dependency to the age of 25 (Jones, 1995). As the foundations of economic independence collapsed, housing and domestic transitions have been extended and have become less stable and ordered. Thus, young people now tend to become sexually active prior to leaving school and leave home earlier than they did in previous generations, yet marry and have children later.

One of the most striking trends in these areas has been the greater separation of housing and domestic transitions (Jones, 1995; Furlong and Cartmel, 1997). Although young people have become dependent on their families for longer, the average age at which they first move away from the family home has declined. This trend is due, in no small part, to the expansion of higher education, particularly for young people from middle class backgrounds, though it is evident more generally. Until fairly recently, young people from working class families tended to leave home when they got married and assumed parental responsibilities at a relatively young age. As a result, housing and domestic transitions were often made simultaneously, while residence with peers, cohabitation and independent living were largely restricted to the middle classes. With increasingly complex and fragmented transitions, however, such distinctions have largely disintegrated. By the 1990s most young people left home for reasons other than marriage regardless of their social class, with the desire to live independently assuming greater significance. As a result, intermediary housing has become increasingly important and many young people spend time living alone or with peers before getting married or cohabiting.

With the greater separation of housing and domestic transitions marriage and parenthood have come to be seen as the 'definitive step to adulthood' (Kiernan, 1986, 11). Changes in this regard are, therefore, particularly significant. In *The End of Marriage?*, Jane Lewis (2001, 4) argues that the 'facts' of family change are real and hard to exaggerate:

In one generation, the numbers marrying have halved, the numbers divorcing have trebled and the proportion of children born outside marriage has quadrupled. Attitudes have also changed, becoming less traditional on the issues of marriage, divorce, cohabitation and working mothers.

The decline of marriage reflects sharp increases in cohabitation and living alone. By 1998/9 one in seven households in Britain were made up of single people below pensionable age living alone, while one in four non-married adults aged between 16 and 59 were cohabiting (Matheson and Summerfield, 2000). For some cohabiting couples this arrangement provides an alternative to marriage but most still go on to marry. Regardless of whether they cohabit, moreover, most people do get married at some point in their lives: among women born between 1961 and 1965, for example, two in three were married by the

age of 30 (Matheson and Summerfield, 2000, 2001). Nonetheless the rise of cohabitation before marriage constitutes one of the most important recent changes in patterns of family formation and has contributed to a growing trend towards later marriage: between 1970 and 2000 the average age at first marriage climbed from 21.3 to 27.5 for women and from 23.2 to 29.6 for men (ONS, 2002; see also Matheson and Summerfield, 2000).

As well as getting married later, young adults are waiting longer to have children. Across all social classes, the average period of time between marriage and birth of first child has increased since the 1970s, while fertility rates of young women under the age of 30 have fallen. As a result, the average age of women at the birth of their first child has risen, from 23.7 years in 1971 to 25.6 years in 1991 and to 26.5 years in 2001 (Summerfield and Babb, 2004). This does not mean young adults are necessarily waiting to get married before having children, however, and births outside marriage have become increasingly common since the early 1960s. By 1998 almost two in five live births in Britain occurred outside marriage, mostly to cohabiting couples but also to a significant and growing number of lone parents. Whereas lone parents and their children made up four per cent of household in Britain in 1971 this figure had almost trebled to 11 per cent by 1998/9 (Matheson and Summerfield, 2000).

Surveying early adult transitions

The BCS and YLS provided a range of indicators relating to the main youth transitions described above. According to both surveys approximately one in two young adults were working full time, a fifth were married, a quarter had dependent children and a similar proportion were buying their own home (see Table 35). Although the surveys were generally consistent on these matters there were some notable differences between them. Most significantly, perhaps, the BCS indicated that fewer young adults were studying full-time than the YLS and that more were working part-time. These discrepancies can largely be explained by differences in the way that questions were asked and the way that the BCS

privileged paid work over other activities such as education². Further discrepancies between these surveys appear to reflect slight differences in the age composition of the samples: those young adults who responded to the BCS had a slightly older age profile than those who responded to the YLS, which helps to explain their slightly higher rate of marriage and cohabitation and the lower rate at which they were living with parents³.

Table 35
Young adults' work and domestic circumstances

	BCS		YLS	
	Percentage	Confidence interval	Percentage	Confidence interval
<i>Work status</i>				
Working full-time	52	50-54	53	50-55
Working part-time	15	14-17	9	7-10
Studying full-time	14	12-15	21	19-23
Looking after home or family	10	9-12	8	7-9
Unemployed, looking for work	4	3-5	7	5-8
Other	5	4-6	3	2-4
	100		100	
<i>Housing status</i>				
Buying own home	29	27-31	26	24-28
Social renting	12	11-13	12	11-14
Private renting	20	18-22	16	14-18
Living with parents	39	37-41	46	43-50
	100		100	
<i>Marital status</i>				
Married	21	20-23	18	16-20
Divorced, separated or widowed	3	2-4	3	2-3
Cohabiting	17	15-19	14	12-15
Single	59	56-61	65	63-68
	100		100	
<i>Parental status</i>				
Have dependent children	26	24-28	25	23-27
Not have dependent children	74	72-76	75	73-77
	100		100	

Source: BCS (1998) and YLS (1998)

n = 2,855 and 3,548

² The BCS asked respondents if they had engaged in paid work during the previous week and *only* asked about other activities such as full-time study if they had not worked during this period. Thus full-time students who worked part-time were classified as working part-time rather than as studying full-time. The YLS, by contrast, asked respondents which of a list of options constituted their main activity and this list included working part-time and studying full-time as alternative options.

³ The BCS included a slightly smaller concentration of 16 and 17 year olds than the YLS (15 per cent of young adult respondent compared with 12 per cent) and a slightly larger concentration of young adults in their late 20s (32 per cent compared with 30 per cent).

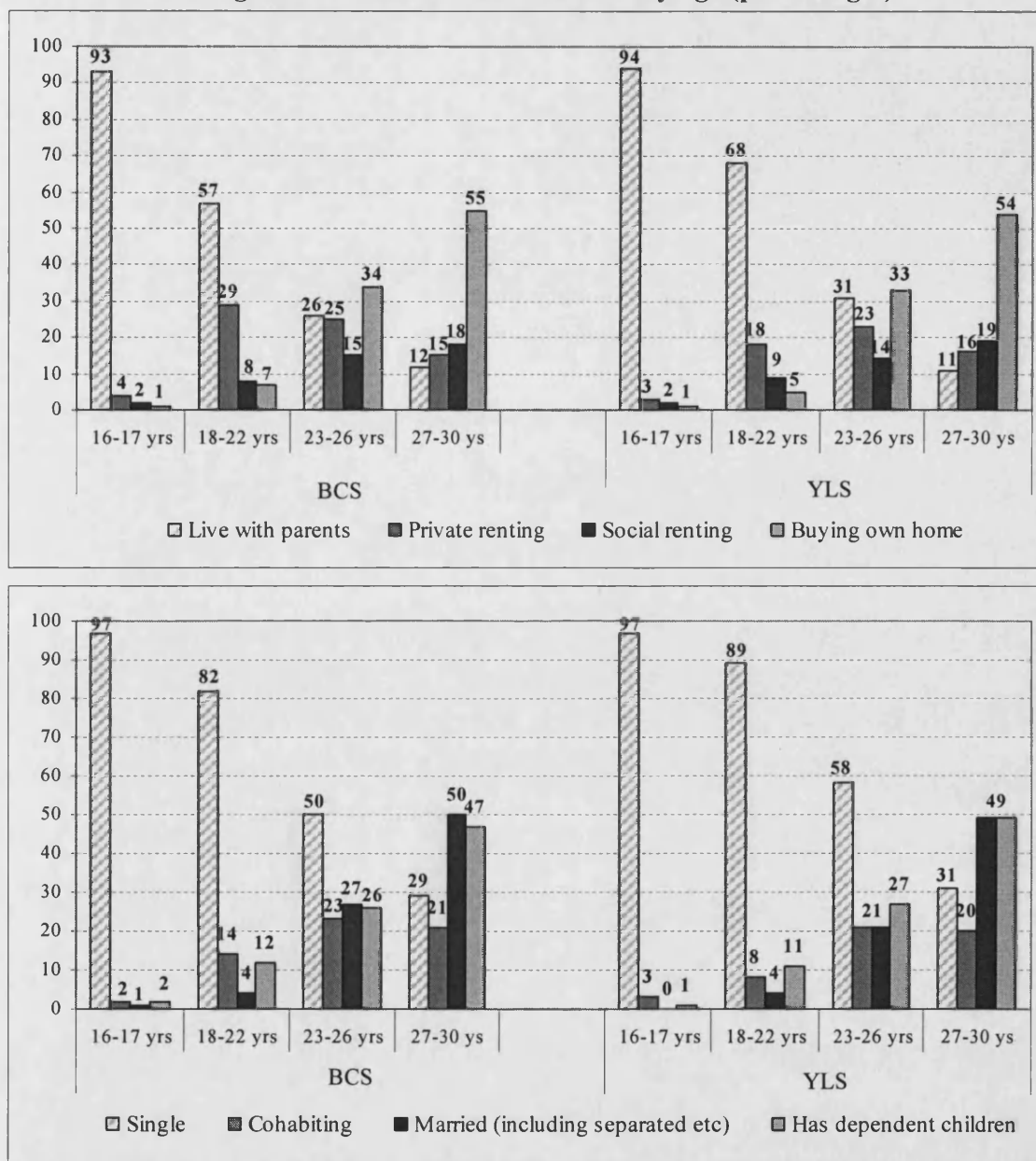
Although early adult transitions have become increasingly fragmented they still give rise to some clearly identifiable patterns. Most notably, perhaps, young adults' relationships with work, family and housing continue to be strongly linked to age. This can be demonstrated most clearly in the context of the school-to-work transition by comparing the number of young adults engaged in full-time education with the number engaged in full-time work. Among 16 and 17 year olds, the BCS indicated that there were three times as many full-time students as full-time workers, but that this balance was reversed in the older groups. Among 18 to 22 year olds those who were working full-time outnumbered those who were studying full-time by two-to-one, increasing to thirteen-to-one among 23 to 26 year olds and to thirty-to-one among 27 to 30 year olds. While the YLS revealed a very similar pattern⁴, both surveys indicated that looking after the home or family became increasingly common among the older groups and that this reflected marked differences in housing and domestic circumstances: the vast majority of 16 and 17 year olds were single, childless and living with parents whereas approximately half the 27 to 30 year olds were married, had dependent children and/or were buying their own home (see Figure 6).

As well as being linked to age, these various transitions are closely connected to one another⁵. Despite the growth of lone parenthood, for example, having dependent children continues to be fairly strongly related to broader process of family formation, particularly marriage. Both the BCS and YLS found that the proportion of young adults who had dependent children was greatest among those who were or had been married, followed by those who were cohabiting and then those who were single. Among married or previously married young adults, both surveys indicated that parents outnumbered non-parents by almost two-to-one, but that among those who were single non-parents outnumbered parents

⁴ According to the YLS the ratio of young adults who were working full-time to studying full-time increased from approximately one-to-five among 16 and 17 year olds; to two-to-one among 18 to 22 year olds; to thirteen-to-one among 26 to 26 year olds; and twenty-two-to-one among 27 to 30 year olds. Kendall's tau-c=0.23 and $p < .01$ (work status by age). Based on the BCS, Kendall's tau-c=0.18 and $p < .01$ (work status by age).

⁵ According to the BCS, Kendall's tau-c = 0.47 (marital status by parental status); 0.53 (marital status by housing status); and 0.41 (parental status by housing status). $P < .01$ in all cases. According to the YLS, Kendall's tau-c = 0.46 (marital status by parental status); 0.48 (marital status by housing status); and 0.41 (parental status by housing status). $P < .01$ in all cases.

Figure 6
Young adults' domestic circumstances by age (percentages)



Source: BCS (1998) and YLS (1998)

n = 2,855 (BCS) and 3,548 (YLS)

Notes:

- BCS: Kendall's tau-c = 0.41 (marital status by age); 0.50 (housing status by age); and 0.36 (parental status by age). $P < .01$ in all cases.
- YLS: Kendall's tau-c = 0.41 (marital status by age); 0.52 (housing status by age); and 0.39 (parental status by age). $P < .01$ in all cases.

by approximately eleven-to-one. The position of cohabitants was rather less clear cut, though both surveys indicated that young adults in this position were less likely to have dependent children than those who were or had been married. Among those who were cohabiting, the BCS found that non-parents outnumbered parents by two-to-one, while the YLS found almost equal numbers of parents and non-parents.

Similar patterns were evident in relation to housing status, with both surveys reporting the highest rates of home ownership among young adults who were or had been married, followed by those who were cohabiting and then those who were single. Not only were cohabitants less highly concentrated among home owners than those who were or had been married but they were also twice as likely to be living in private rented accommodation. Single young adults were different again because they were mainly living with parents but were otherwise highly concentrated in the private rented sector. Patterns of housing also varied according to parental status. The vast majority of young adults who had dependent children were living independently and were concentrated in the more stable forms of accommodation: four-in-five were either buying their own home or were renting from a social landlord, with almost equal numbers in these different types of accommodation.

Overall, approximately one in eight young adults were married with dependent children (see Table 36). A further one in fifty were divorced, separated or widowed and had children, one in twenty were cohabiting and had children, while a similar proportion were single parents. Most were single and childless, however, and the majority of those in these circumstances were living with their parents. In total, approximately two-in-five young adults were single, did not have dependent children and were yet to (permanently) leave home.

Drug use and early adult transitions

The idea that young people tend to grow out of illicit drug use has considerable common-sense appeal, but has received surprisingly little attention from British academics and researchers. Despite recent attempts to highlight the value of such a perspective, there

Table 36
Young adults' domestic circumstances (combined)

	BCS		YLS	
	Percentage	Confidence interval	Percentage	Confidence interval
Single				
- no children, live with parents	36	34-39	43	40-45
- no children, private renting	12	10-13	10	9-12
- no children, social renting	2	1-2	2	1-3
- no children, buying own home	4	3-5	5	4-6
- with children	5	4-7	5	4-6
Cohabiting				
- no children, renting	5	4-6	3	2-4
- no children, buying own home	7	6-8	5	4-6
- with children	5	4-6	6	5-7
Divorced, separated or widowed				
- no children	1	1-1	1	0-1
- with children	2	1-3	2	1-3
Married				
- no children	7	6-9	7	6-8
- with children	14	12-16	12	10-13

Source: BCS (1998) and YLS (1998)

n = 2,831 and 3,548

Note: when combining domestic and housing circumstances priority was given to marital status and parental status because of their particular importance in the transition to adulthood (see above). Housing status has been taken into account for young adults who did not have dependent children and were either cohabiting or single. The nature of the distinctions that were made in this regard depended on the number of cases in each category.

continues to be a dearth of empirical work in this area (Ward, 1998)⁶. Where a transitions perspective has been considered, moreover, doubts have been expressed about its ability to explain contemporary patterns of drug use. Such doubts were expressed by the main authors of the normalisation thesis, for example, when they questioned whether 'recreational drug use will be left behind by 1990s adolescents as they reach young adulthood' (Parker et al., 1998, 20). When participants in this study were approximately 18 years old there were no signs that their drug use was slowing down and this prompted the claim that such behaviour is neither 'transitory nor closely tied to the period of adolescence' (1998, 91). Similar claims were repeated following the final survey, which

⁶ North American researchers have shown much greater interest in relating drug use to early adult transitions. See, for example, Bachman et al., (1997; 2002) and Schulenberg et al., (1997).

was administered some four years later. By this time there were signs of more moderate and strategic substance use, which were attributed to the requirements of the working week, but overall there was said to be a 'remarkable consistency in on-going drug taking' (Williams and Parker, 2001, 405). Thus it was concluded that recreational drug use is extending beyond 'traditional markers' (Parker et. al., 2002, 960) and that the 'drug-wise children of the nineties are indeed bringing their psycho-active substance use with them into young adulthood' (Williams and Parker, 2001, 410).

Despite these claims, the authors of the normalisation thesis were not particularly well placed to assess the value of a transitions perspective. For one thing, participants in their study were only surveyed up to the age of 22 years, which is arguably too early to judge the extent to which they 'grow out' of drug use. Added to this, no attempt was made to distinguish between respondents according to their work and/or domestic status. By implication, therefore, the transition into adulthood was treated as though it were simply a matter of age (Wiessing, 2001). In the following discussion, by contrast, the role of age is considered alongside various life-course indicators. Particular attention is paid to the possibility that early adult transitions are experienced differently by young men and young women and that this has important implications for their drug use. Finally, the relationship between early adult transitions and drug use is considered in the light of broader lifestyle choices.

Age

If young people are no longer 'growing out' of drug use in the way that has been claimed, we would expect to see a discernable shift in the age distribution associated with this behaviour. There is little evidence of such a shift, however, which suggest that the relationship between age and drug use is more stable than is often supposed. Surveys dating back to the mid-1980s have repeatedly highlighted a pattern which conforms to the widely observed age-crime curve: drug use is relatively unusual among young people in their early teens but increases sharply in the last few years of compulsory education, before reaching a peak among those in their late teens and early 20s and then falling away quite

sharply (see, for example, ISDD, 1993; Graham and Bowling, 1995; Ramsay and Percy, 1996; Ramsay et al., 2001; Chivite-Matthews et al., 2005; Roe, 2005).

Conforming to this general pattern, the 1998 BCS and 1998/9 YLS found recent drug use to be most widespread among young adults in their late teens and early 20s (see Table 37). These surveys also indicate that the balance between recent use and past use varies quite sharply with age. Among 16 to 17 year olds recent cannabis users outnumbered past users by two or three to one, but among young adults in their late 20s past users outnumbered recent users. A broadly similar pattern was evident in relation to the hallucinants: among 16 to 17 year olds there were at least as many recent users as past users, but among those in their late 20s past users outnumbered recent users by almost three to one. The situation was rather less clear-cut in relation to cocaine although the YLS did indicate that the ratio of past to recent users was greater among those in their late 20s than those in their late teens to mid 20s. Across all three categories of drug use, therefore, older young adults displayed a particular propensity towards desistance.

Table 37
Prevalence of drug use by age (percentages, young adults)

	Cannabis			Hallucinants			Cocaine		
	Never	Past	Recent	Never	Past	Recent	Never	Past	Recent
<i>BCS</i>		..			..			..
16-17 years	59	14	27	80	9	10	99	1	1
18-22 years	51	19	31	67	19	15	93	4	4
23-26 years	55	23	22	69	22	9	91	5	4
27-30 years	63	24	13	79	16	6	96	2	2
<i>YLS</i>		..			..			..
16-17 years	58	10	32	79	9	12	97	2	2
18-22 years	44	16	40	58	20	23	87	4	9
23-26 years	47	23	30	59	27	14	86	6	8
27-30 years	57	24	18	70	23	8	91	5	4

Source: BCS (1998) and YLS (1998/9)

** p < 0.01

* p < 0.05

ns p > 0.05

Notes:

1. BCS: Cramer's V=0.13 (cannabis); 0.11 (hallucinants); and 0.07 (cocaine).
2. YLS: Cramer's V=0.16 (cannabis); 0.16 (hallucinants); and 0.10 (cocaine).

Notable differences were also evident in relation to abstinence. A relatively large proportion of young adults in their late 20s had never used cannabis, the hallucinants or cocaine and this can best be explained in terms of a cohort effect. Compared to their slightly younger counterparts, fewer of those in this age group had used illicit drugs because they had gone through the peak age of use at a time when such behaviour was less common. The most marked differences were evident in relation to the hallucinants and cocaine, which is to be expected given that the use of these substances increased most markedly during the subsequent period.

The multivariate models confirmed that age is a significant predictor of illicit drug use. Both surveys highlighted a series of direct age effects, which persisted when other demographic, life-course and lifestyle factors had been taken into account (see Table 38). Although precise nature of these effects varied between the surveys⁷, there was a clearly discernable pattern, whereby desistance became increasingly likely with age. According to the final lifestyle models, young adults in their late 20s were, simply by virtue of their age, approximately two to three times more likely to have stopped using cannabis than those aged 16 or 17 (see Figure 7). Similar effects were evident in relation to the hallucinants, with young adults in their late 20s again being two to three times more likely to have stopped using these substances than those aged 16 or 17. The situation regarding cocaine was less clear-cut due to differences between the surveys. The BCS indicated that there was very little by way of a direct relationship between age and cocaine use, while the YLS revealed a series of direct age-effects which were broadly consistent with the pattern described above: all things being equal, young adults in their mid-to-late 20s were almost

⁷ All things being equal, the BCS indicated that recent cannabis use and recent hallucinant use were most likely among 16 to 17 year olds, while the YLS indicated that they were most likely among 18 to 22 year olds. This apparent discrepancy was linked to the influence of lifestyle indicators, however, and was largely an artefact of the modelling process. The BCS indicated that being 16 or 17 years old substantially increased the probability of recent cannabis use and recent hallucinant use only when lifestyle indicators had been added to the models. While 16 and 17 year olds spent fewer evenings in the pub than older young adults and tended to be concentrated among non-drinkers and occasional drinkers, the multivariate models show that recent cannabis use and recent hallucinant use were much more prevalent within this age group than we would expect given their drinking styles and participation in the night time economy. The YLS produced a different set of results because the influence of participation in the night-time economy and drinking style was largely eclipsed by the frequency of drunkenness. Despite their more moderate drinking styles, moreover, 16 and 17 year olds got drunk fairly frequently (see below) and the rates of drug use they reported were broadly consistent with the frequency with which they got drunk.

three times as likely to have stopped using cocaine as those in their mid-to-late teens or early 20s.

Table 38
Probability of drug use by age (multivariate analysis, young adults)

	Cannabis			Hallucinants			Cocaine		
	Never	Past	Recent	Never	Past	Recent	Never	Past	Recent
<i>BCS</i>									
16-17 years	0.39	0.19	0.42	0.69	0.14	0.17	0.95	0.03	0.02
18-22 years	0.49	0.23	0.28	0.68	0.21	0.11	0.95	0.03	0.02
23-26 years	0.58	0.20	0.22	0.71	0.20	0.09	0.92	0.04	0.05
27-30 years (reference)	0.64	0.21	0.15	0.78	0.17	0.06	0.95	0.03	0.02
<i>YLS</i>									
16-17 years	0.64	0.12	0.24	0.81	0.09	0.10	0.97	0.01	0.02
18-22 years	0.48	0.18	0.34	0.60	0.21	0.19	0.90	0.04	0.07
23-26 years	0.48	0.22	0.30	0.60	0.26	0.14	0.88	0.07	0.05
27-30 years (reference)	0.55	0.22	0.23	0.69	0.21	0.10	0.88	0.07	0.05

Source: BCS (1998) and YLS (1998/9)

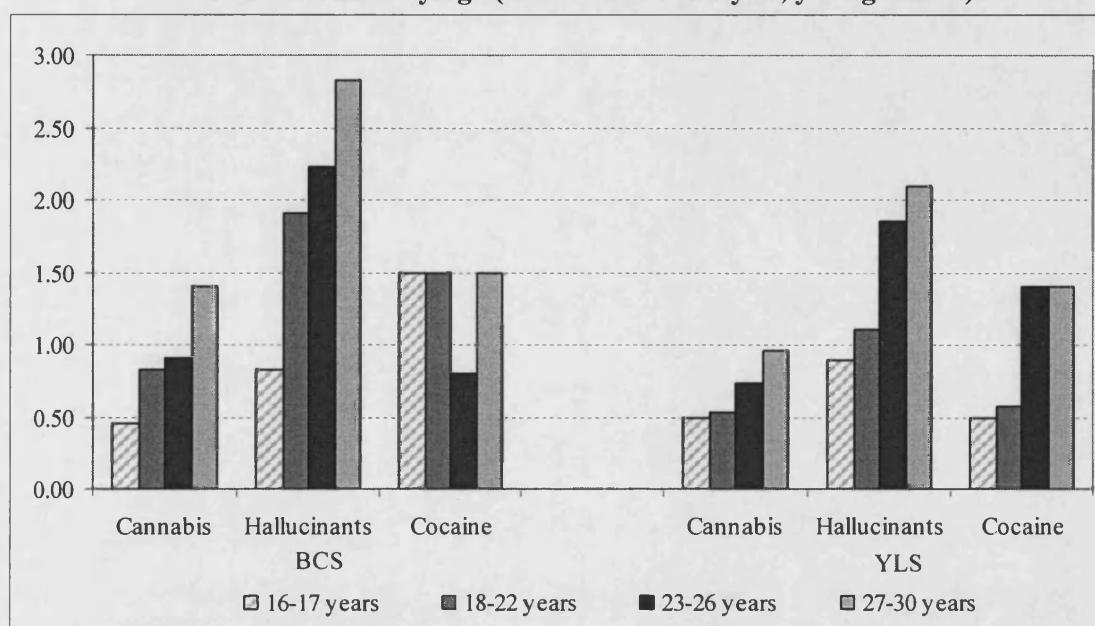
Model: Lifestyle model

Notes:

1. Statistically significant effects are highlighted in bold (including interaction effects).
2. Effects on past or recent use were estimated vis-à-vis the probability of never having used.
3. Categories that had no significant effect on recent use or past use were excluded from the model and formed part of the reference category.
4. Analysis of the YLS indicated that the effect of being 18-22 years old on recent hallucinant use was very close to the cut-off denoting statistical significance ($p=.06$). For the purposes of the analysis shown here, this has been treated as a significant effect (see Chapter 3 for explanation).

The effects described here can be attributed directly to age in the sense that they are independent of all the other variables included in the models, but this does not necessarily mean that there is a causal relationship. After all, age is an ambiguous variable which is linked to various physical, psychological and emotional developments, so that apparent age effects may actually reflect the process of maturation (Rutter et al., 1998; Laub and Sampson, 2003). It is also important to note that desistance is not simply the product of objective transformations, but involves a range of subjective phenomena (Gadd and Farrall, 2004). As such, links between drug use and age may be mediated by social and cultural influences, including judgements about the types of behaviour that are considered to be appropriate to a certain age.

Figure 7
Odds of desistance by age (multivariate analysis, young adults)



Source: BCS (1998) and YLS (1998/9)

Model: Lifestyle model

Notes:

- Odds of desistance were calculated by dividing the estimated probability of past use by the estimated probability of recent use (see Table 38). A value of one indicates parity; a value of less than one indicates a tendency towards recent use; and a value of more than one indicates a tendency towards past use. The higher the value the greater the odds of desistance.
- The final models were respecified with recent use set to the reference category. This meant that the effects of age could be assessed specifically in relation to desistance (i.e. past use versus recent use). Compared to being 27-30 years old the following categories had a significant effect on the odds of desistance:
 - BCS - cannabis: 16-17 years, 18-22 years, and 23-26 years;
 - hallucinants: 16-17 years;
 - cocaine: 23-26 years.
 - YLS - cannabis: 16-17 years and 18-22 years;
 - hallucinants: 16-17 years and 18-22 years;
 - cocaine: 18-22 years; 16-17 years formed part of an interaction effect (with sex) that was very close to the cut-off for statistical significance ($p=.051$).

Life-course

Acquiring adult roles and responsibilities may limit opportunities for drug use in a variety of ways. As adolescence gives way to early adulthood new social bonds tend to create a greater sense of responsibility, investment and constraint. Work, home ownership, marriage and/or parenthood often result in increased monitoring and informal social control, separation from established peer groups, changes in routine activities and/or shifts

in self-identity, all of which may reinforce non-use and encourage desistance. Such factors may also help to explain recent trends in drug use. After all, the extension and fragmentation of early adult transitions has helped to reshape leisure opportunities and create a space where young people can experiment with different lifestyles and establish identities free from some of the constraints that faced previous generations (Ainley, 1991; Furlong and Cartmel, 1997).

There is little to suggest from either the BCS or YLS that the school-to-work transition constitutes much by way of a watershed in relation to illicit drug use (see Table 39). Young adults who were working full-time reported similar rates of recent use to students and though they tended to report higher rates of past use these differences could be readily explained by the influence of other variables such as age⁸. Recent use tended to be more widespread among the unemployed and those who were otherwise marginalised from the labour market, however, and the significance of these differences was confirmed by the multivariate analysis. Life-course models, particularly those based on the YLS, indicated that unemployment and other forms of marginalisation from the labour market increased the probability of use, though many of these effects could be explained in terms of broader lifestyle choices (see chapter six and technical appendix for details).

Based on the insights provided by new deviancy theories it is, perhaps, not surprising that drug use continues to be reasonably widespread among young adults who have completed the transition into full-time work. After all, as Young (1971) noted, consumption and production are closely entwined and the working week leaves regular spaces for the expression of subterranean values, primarily through the weekend ritual. Nonetheless, for young adults who work or engage in some other routine activity these spaces are compartmentalised in a way that they are not for those who are unemployed or otherwise marginalised from the labour market. Young adults who are not working, studying or looking after the home are relatively untouched by some of the main constraints that make

⁸ The multivariate models generally showed that the effect of being a student, looking after the home or working part-time was not significantly different from that of working full-time. There was some suggestion from the YLS that being a student reduced the probability of cocaine use but this effect ceased to be significant once lifestyle factors had been taken into account (see technical appendix for details).

up the social bond, which leaves them freer to engage in drug use and other forms of subterranean play. Rather like the hippies of the 1960s, however, their ability to participate in subterranean pastimes is likely to be limited by economic constraints.

Table 39
Prevalence of drug use by work status (percentages, young adults)

	Cannabis			Hallucinants			Cocaine		
	Never	Past	Recent	Never	Past	Recent	Never	Past	Recent
<i>BCS</i>		**			**			*	
Work full-time	54	24	21	71	19	10	93	3	3
Work part-time	62	17	21	77	14	10	97	1	2
Student	60	12	28	79	11	10	93	3	4
Look after home	68	22	10	82	15	4	97	3	*
Unemployed	42	19	39	55	27	18	92	3	5
Other	45	22	33	60	23	17	92	6	2
<i>YLS</i>		**			**			*	
Work full-time	48	23	30	61	24	15	89	4	7
Work part-time	61	21	19	69	20	12	91	3	6
Student	56	10	34	76	11	13	92	4	4
Look after home	61	21	18	70	21	9	94	5	2
Unemployed <1 yr	41	16	43	49	32	19	77	16	7
Unemployed >1yr	42	15	42	54	18	28	85	7	8
Other	35	24	42	54	28	18	89	6	5

Source: BCS (1998) and YLS (1998/9) * < 0.5 per cent ** p < 0.01 * p < 0.05 ns p > 0.05

Notes

1. BCS: Cramer's V=0.13 (cannabis); 0.11 (hallucinants); and 0.07 (cocaine).
2. YLS: Cramer's V=0.13 (cannabis); 0.12 (hallucinants); and 0.09 (cocaine).

The influence of the social bond can also be seen in relation to the domestic sphere. According to both the BCS and YLS drug use was particularly widespread among young adults whose living arrangements conferred considerable independence, but entailed little responsibility (see Table 40). The highest rates of recent use tended to be reported by those who were single or cohabiting, who did not have children and were living in rented accommodation. Cohabitation tends to be less stable than marriage and the assumption in much of the literature is that this arrangement is tipped towards independence, while marriage is tipped towards relatedness (Lewis, 2001). Such assumptions are reflected in the claim that marriage has a more important role than cohabitation in relation to crime

Table 40
Prevalence of drug use by domestic circumstances (percentages, young adults)

	Cannabis			Hallucinants			Cocaine		
	Never	Past	Recent	Never	Past	Recent	Never	Past	Recent
<i>BCS</i>	..			..			..
Single									
- no children, live with parents	59	17	24	75	15	10	95	2	2
- no children, renting	43	15	42	63	21	16	88	5	8
- no children, buying	50	26	23	72	18	11	95	1	4
- with children	54	23	23	65	23	12	95	4	1
Cohabiting									
- no children, renting	33	29	37	52	27	21	91	6	3
- no children, buying	51	31	18	72	20	8	93	4	4
- with children	55	32	13	71	22	7	96	4	0
Divorced, separated or widowed	64	20	16	81	9	10	96	3	1
Married									
- no children	70	21	9	88	10	2	99	1	*
- with children	71	23	6	81	17	2	97	2	*
<i>YLS</i>	..			..			..
Single									
- no children, live with parents	53	13	34	69	14	17	91	3	6
- no children, renting	35	19	46	53	23	24	80	7	13
- no children, buying	42	31	28	61	30	9	86	8	7
- with children	44	19	37	52	29	19	85	11	4
Cohabiting									
- no children, renting	32	17	52	44	33	23	79	10	10
- no children, buying	42	27	31	59	24	17	88	3	9
- with children	49	31	20	63	29	8	92	6	2
Divorced, separated or widowed	60	25	16	64	28	8	93	5	2
Married									
- no children	65	28	8	78	20	3	95	3	3
- with children	69	22	9	73	24	3	97	3	1
Source: BCS (1998) and YLS (1998/9)									
			* < 0.5 per cent	.. p < 0.01			* p < 0.05	ns p > 0.05	

Notes:

1. BCS: Cramer's V = 0.21 (cannabis); 0.15 (hallucinants); 0.11 (cocaine).
2. YLS: Cramer's V = 0.22 (cannabis); 0.18 (hallucinants); 0.14 (cocaine).
3. Most of the young adults who were separated, divorced or widowed had children (74 per cent according to the BCS and 76 per cent according to the YLS) and the number who did not was small (n=40 and n=22 respectively). The multivariate analysis also indicated that effects associated with this position were similar regardless of whether or not children were involved and thus separated, widowed or divorced was treated as a single category. The categories 'single, no children, private renting' and 'single, no children, social renting' were also combined into a single category because they were associated with a similar set of effects.

prevention (Laub and Sampson, 2003). Given all this, it is perhaps unsurprising that there was relatively little evidence of recent drug use among young adults who were married, regardless of whether or not they had children, and much greater evidence of past use. Nonetheless, the distinction between marriage and cohabitation appears to be rather less clear cut than is often implied. Where cohabitation was reinforced by other commitments, such as having children or, more equivocally, buying a home, then the ratio of past-to-recent users was relatively high, suggesting a particular propensity towards desistance. In relation to drug use, therefore, the distinction between marriage and cohabitation appears to be less important than that between relationships which are reinforced by external commitments and those that are not.

Where marriages had broken down or ended with the death of a spouse, the propensity towards desistance was less marked. Young adults who had been, but were no longer, married tended to report higher rates of recent use and a lower ratio of past-to-recent users than those who were still married, suggesting something of a return to a single way of life. Single young adults who had never been married reported some of the highest rates of recent use, though notable variations were evident even here: those who were either living with parents or renting tended to report higher rates of recent use and / or a lower ratio of past-to-recent users than those who had children or were buying their own home.

The relationship between drug use and domestic circumstances was clearly linked to differences in age and lifestyle, but could not be fully explained in this way. Even allowing for the influence of these, and other, variables, being married continued to be associated with a relatively low probability of recent use across all three drug-types (see Table 41). Compared to being married, being single substantially increased the probability of recent use regardless of whether or not children were involved and regardless of housing status. Although single parents and single home owners tended to report lower rates of recent use than single people living independently in rented accommodation, the multivariate models revealed that these categories tended to have similar effects on recent use. All things being equal, the probability of recent use did not vary greatly among single young people who were living independently. As such, the different rates of recent use that were evident

Table 41
Probability of drug use by domestic circumstances (multivariate analysis, young adults)

	Cannabis			Hallucinants			Cocaine		
	Never	Past	Recent	Never	Past	Recent	Never	Past	Recent
<i>BCS</i>									
Single									
- no children, live with parents	0.65	0.13	0.23	0.79	0.13	0.08	0.91	0.02	0.06
- no children, renting	0.57	0.16	0.27	0.67	0.18	0.15	0.86	0.04	0.11
- no children, buying	0.53	0.23	0.24	0.69	0.18	0.13	0.86	0.04	0.11
- with children	0.32	0.30	0.37	0.56	0.31	0.14	0.90	0.05	0.05
Cohabiting									
- no children, renting	0.40	0.25	0.35	0.58	0.24	0.18	0.91	0.05	0.04
- no children, buying	0.50	0.28	0.22	0.66	0.25	0.09	0.91	0.05	0.04
- with children	0.47	0.33	0.20	0.66	0.25	0.09	0.96	0.03	0.01
Divorced, separated or widowed									
- children or no children	0.48	0.24	0.27	0.73	0.11	0.15	0.96	0.03	0.01
Married									
- no children	0.65	0.24	0.11	0.80	0.12	0.07	0.96	0.03	0.01
- with children	0.65	0.24	0.11	0.73	0.22	0.05	0.96	0.03	0.01
<i>YLS</i>									
Single									
- no children, live with parents	0.53	0.15	0.32	0.70	0.16	0.15	0.89	0.04	0.07
- no children, renting	0.44	0.18	0.39	0.62	0.19	0.19	0.87	0.04	0.09
- no children, buying	0.47	0.23	0.30	0.62	0.21	0.17	0.86	0.06	0.08
- with children	0.47	0.21	0.33	0.54	0.23	0.24	0.88	0.07	0.05
Cohabiting									
- no children, renting	0.36	0.15	0.49	0.47	0.29	0.25	0.87	0.05	0.08
- no children, buying	0.40	0.25	0.35	0.61	0.22	0.17	0.89	0.03	0.09
- with children	0.60	0.24	0.16	0.68	0.25	0.07	0.95	0.03	0.02
Divorced, separated or widowed									
- children or no children	0.60	0.24	0.16	0.68	0.25	0.07	0.95	0.03	0.02
Married									
- no children	0.60	0.24	0.16	0.68	0.25	0.07	0.95	0.03	0.02
- with children	0.60	0.24	0.16	0.68	0.25	0.07	0.95	0.03	0.02

Source: BCS (1998) and YLS (1998/9)

Model: Lifestyle model

Notes:

1. Statistically significant effects are highlighted in bold (including interaction effects).
2. Divorced, separated or widowed, with children and divorced, separated or widowed, no children were combined into a single category because they had similarly marked effects that were not necessarily statistically significant. Single, no children, private renting and single, no children, social renting were also combined into a single category because they represent comparable situations and had very similar effects. Other categories were combined as necessary (see technical appendix for details).

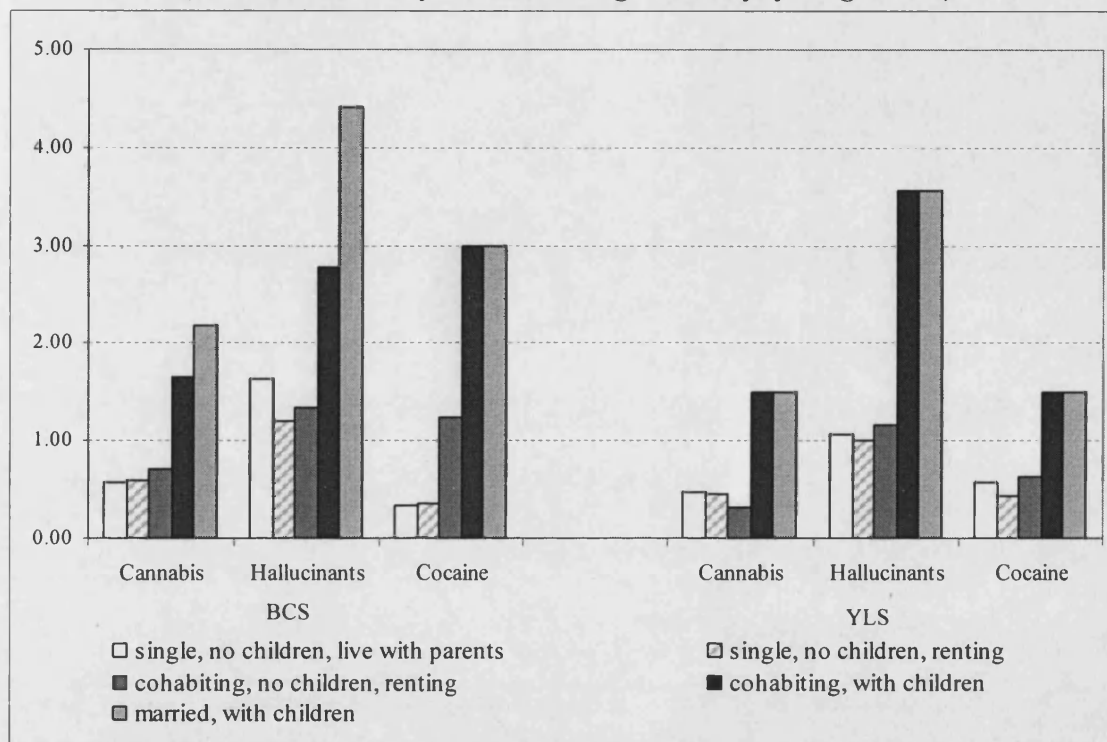
among these young adults can not be attributed directly to their differing domestic circumstances⁹.

Cohabitation was rather more varied in its effects. In the absence of children, both surveys indicated that, compared to being married, this arrangement increased the probability of recent use across all three drug-types and that these effects tended to be most marked in the context of living in rented accommodation. Where children were involved, the BCS also indicated that cohabiting increased the probability of recent cannabis use and hallucinant use. The YLS revealed no such pattern, however, indicating instead that this arrangement was similar in its effect to being married. These discrepancies between the surveys can be largely explained by the role of lifestyle indicators. Until such indicators were included in the models, both surveys pointed to a similar set of effects whereby cohabiting with children increased the probability of recent cannabis use and hallucinant use, but not cocaine use (see technical appendix for details). Differences emerged subsequently because the YLS models included more detailed information about broader lifestyle choices, which explained the effects of cohabiting with children in a way that the more limited information contained in the BCS models did not. On balance, therefore, it seems that the effects of cohabiting with children compared to being married are mediated by other lifestyle factors. A similar pattern was evident in relation to separation, divorce and widowhood, indicating that the effects associated with marriage break-up are also a function of broader lifestyle differences.

The idea that some domestic situations are more conducive to drug use than others was reinforced by further analyses which identified significant differences in relation to desistance. Most notably, this analysis indicated that being married or cohabiting with children was associated with a particularly marked propensity towards desistance (see Figure 8).

⁹ In most of the life-course and lifestyle models being single with children did not have a significantly different effect on recent use from being a single home owner or being single and living independently in rented accommodation. The only models where this was not the case were the BCS cannabis models. In all models, being a single home owner did not have significantly different effect from being single and living independently in rented accommodation.

Figure 8
Odds of desistance by domestic circumstances
(multivariate analysis, select categories only, young adults)



Source: BCS (1998) and YLS (1998/9)

Model: Lifestyle model

Notes:

- Odds of desistance were calculated by dividing the estimated probability of past use by the estimated probability of recent use (see Table 41). A value of one indicates parity; a value of less than one indicates a tendency towards recent use; and a value of more than one indicates a tendency towards past use. The higher the value the greater the odds of desistance.
- The final models were respecified with recent use set to the reference category. This meant that the effects of domestic and housing status could be assessed specifically in relation to desistance (i.e. past use versus recent use). Compared to being married with children the following categories had a significant effect on the odds of desistance:
 - BCS - cannabis: single, no children, living with parents; single, no children, renting; single, no children, buying own home; single with children; cohabiting, no children, renting.
 - hallucinants: single, no children, living with parents; single, no children, renting; single, no children, buying own home; cohabiting, no children, renting; cohabiting, no children, buying own home; cohabiting, with children; divorced, separated or widowed.
 - cocaine: single, no children, living with parents; single, no children, renting; single, no children, buying own home.
 - YLS - cannabis: single, no children, living with parents; single, no children, renting; single, no children, buying own home; single with children; cohabiting, no children, renting; cohabiting, no children, buying own home.
 - hallucinants: single, no children, living with parents; single, no children, renting; single, no children, buying own home; single with children; cohabiting, no children, renting; cohabiting, no children, buying own home.
 - cocaine: single, no children, living with parents; single, no children, renting; cohabiting, no children, buying own home was very close to the cut-off denoting significance ($p=0.06$).

Quite what it is about some domestic situations that facilitates or inhibits drug use is not entirely clear from the type of analysis presented here. As has been noted elsewhere, the meaning of these all important social relations can not simply be 'read off' from evidence of their presence and thus the underlying processes remain obscure (Gadd and Farrall, 2004, 126). Previous criminological work offers important clues, however, having shown how changing domestic circumstances can provide structural turning points and stimulate cognitive transformations which help to explain fluctuations in offending (Laub and Sampson, 2003; Maruna, 2001). Whatever the precise nature of the underlying processes, the influence of domestic arrangements can be usefully linked to the notion of subterranean play. Arrangements which confer considerable independence but entail little responsibility facilitate drug use by providing plenty of opportunities for the expression of subterranean values. 'Settling down', by contrast, implies a practical and symbolic reorganisation which includes a shift towards the formal values that Young (1971) considered to be characteristic of the work sphere.

Traditional ties of obligation and permanence may have been loosened by individualisation and democratisation (Beck, 1997; Giddens, 1998), but connectedness, commitment, caring and the subordination of self-interest continue to play a key role in contemporary family life (Crow, 2002; Williams, 2004). While domestic partnerships tend to constrain personal freedom, the extent to which this is the case varies according to the nature of the relationship, with investments in the possibility of permanence through marriage and / or parenthood generally involving the acceptance of a greater loss of potential freedom (Burgoyne, 1991; see also Lewis, 2001). The demands of family life may also generate 'time stress' and, particularly for women, entail much greater involvement in routine activities such as housework and care giving (Cheal, 2002). With the acquisition of domestic responsibilities, life away from work tends to be tipped away from spontaneity, ego-expressivity and short-term hedonism and towards deferred gratification, planning, routine and predictability. All of which militates against the expression of subterranean values and helps to explain the sharp increase in desistance. Given this, recreational drug use appears to provide young people with a means of celebrating their independence and freedom from domestic responsibilities.

Age and life-course effects

The previous analysis has shown that age and domestic circumstances affect drug use independently of one another, but to fully appreciate the value of a transitions perspective it is necessary to consider the cumulative nature of these effects. Getting older and 'settling down' both tend to reduce the probability of recent drug use and increase the probability of desistance. When taken together, these effects reinforce the conclusion that the types of drug use considered here provide the basis for what is an essentially youthful form of behaviour. All things being equal, a single 18 to 22 year old who did not have children and was living in rented accommodation was more than three times as likely as a married 27 to 30 year old who had children to have recently used cannabis; was more than four times as likely to have recently used a hallucinant; and was at least six times as likely to have recently used cocaine (see Table 42).

Similar effects were evident in relation to desistance (see Figure 9). Simply by virtue of their age and domestic circumstances, for example, a married 27 to 30 year old who had children was at least five times more likely to have stopped using cannabis, the hallucinants and cocaine than a single 18 to 22 year old who did not have children and was living independently in rented accommodation.

The gendered nature of early adult transitions

Men and women tend to experience early adult transitions in quite different ways and these differences have important implications for their use of illicit drugs. Females are generally considered to mature earlier than males and are quicker to adopt explicitly adult roles, particularly within the domestic sphere (Coleman and Hendry, 1999; Rutter et al., 1998). The BCS and YLS confirmed that women tend to leave the parental home and form families of their own at a younger age than men¹⁰. One in ten women in the 18 to 22 year

¹⁰ Both surveys indicated that there were significant differences in the domestic circumstances of men and women aged 18 to 22 year olds, 23 to 26 year olds and 27 to 30 year olds ($p < .01$ for each age group). No such differences were evident among 16 or 17 year olds, however, as the vast majority of those in this age group were living with their parents ($p > .05$).

Table 42

Probability of drug use by age and domestic circumstances (multivariate analysis)

	Cannabis			Hallucinants			Cocaine		
	Never	Past	Recent	Never	Past	Recent	Never	Past	Recent
<i>BCS</i>									
16-17 years, single, no children, live with parents	0.48	0.11	0.41	0.74	0.10	0.16	0.94	0.02	0.04
18-22 years, single, no children, renting	0.48	0.17	0.35	0.62	0.20	0.18	0.90	0.04	0.07
23-26 years, cohabiting, no children, renting	0.41	0.24	0.35	0.56	0.26	0.18	0.88	0.05	0.07
23-26 years, cohabiting, with children	0.48	0.32	0.21	0.65	0.26	0.09	0.96	0.03	0.01
27-30 years old, married, with children	0.70	0.22	0.08	0.77	0.20	0.03	0.97	0.03	0.01
<i>YLS</i>									
16-17 years, single, no children, live with parents	0.63	0.10	0.28	0.82	0.07	0.11	0.97	0.01	0.03
18-22 years, single, no children, renting	0.39	0.16	0.45	0.55	0.19	0.26	0.85	0.03	0.12
23-26 years, cohabiting, no children, renting	0.31	0.17	0.52	0.39	0.36	0.25	0.83	0.09	0.08
23-26 years, cohabiting, with children	0.55	0.28	0.18	0.60	0.33	0.07	0.92	0.06	0.02
27-30 years, married, with children	0.60	0.27	0.13	0.69	0.26	0.06	0.92	0.06	0.02

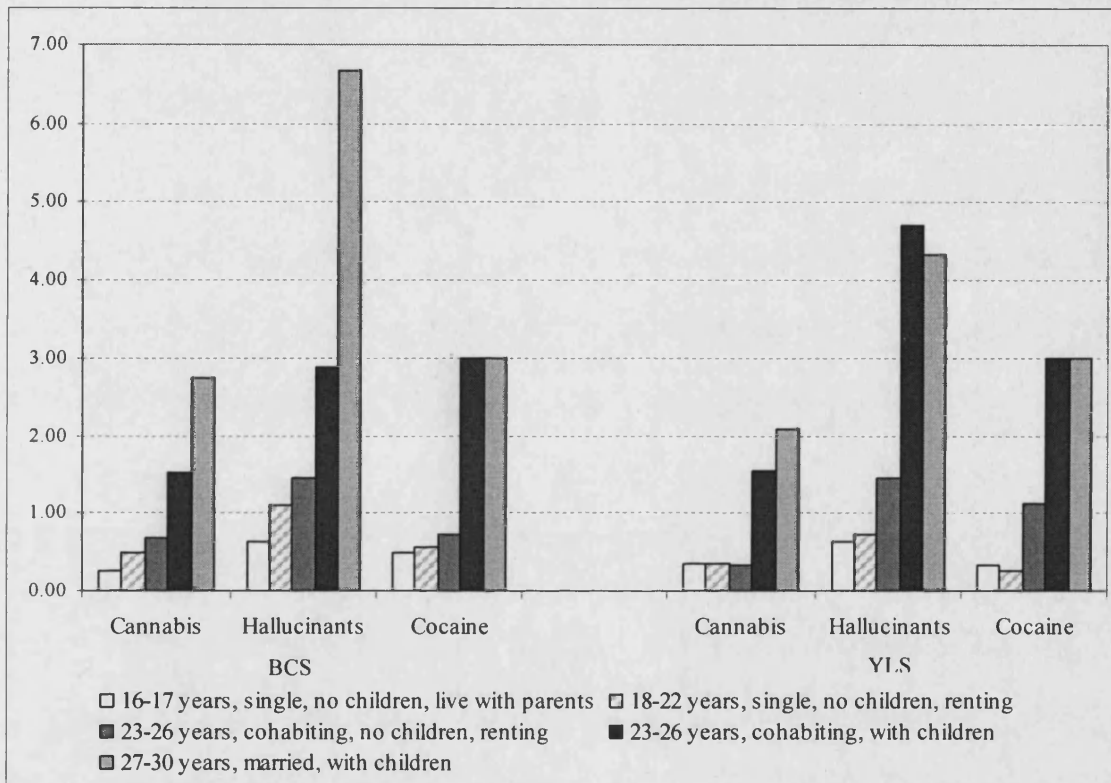
Source: BCS (1998) and YLS (1998/9)

Model: Lifestyle model

age group were either married or were cohabiting and had children compared with one in thirty or one in fifty men, depending on the survey. Many men do appear to 'settle down' during the course of their mid-to-late 20s, however, with the result that differences between the sexes become much less marked. Both surveys found that almost half the men in the 27 to 30 year age group were either married or were cohabiting and had children, which was only marginally less than the proportion of women. A further one in four men in this age group were cohabiting without children and/or buying their own home. Crucially,

therefore, most men do make significant moves towards adulthood during the course of their 20s, but tend to take longer to complete them than women.

Figure 9
Odds of desistance by age and domestic circumstances
(multivariate analysis, select categories only, young adults)



Source: BCS (1998) and YLS (1998/9)

Model: Lifestyle model

Note: odds of desistance were calculated by dividing the estimated probability of past use by the estimated probability of recent use (see Table 42). A value of one indicates parity; a value of less than one indicates a tendency towards recent use; and a value of more than one indicates a tendency towards past use. The higher the value the greater the odds of desistance.

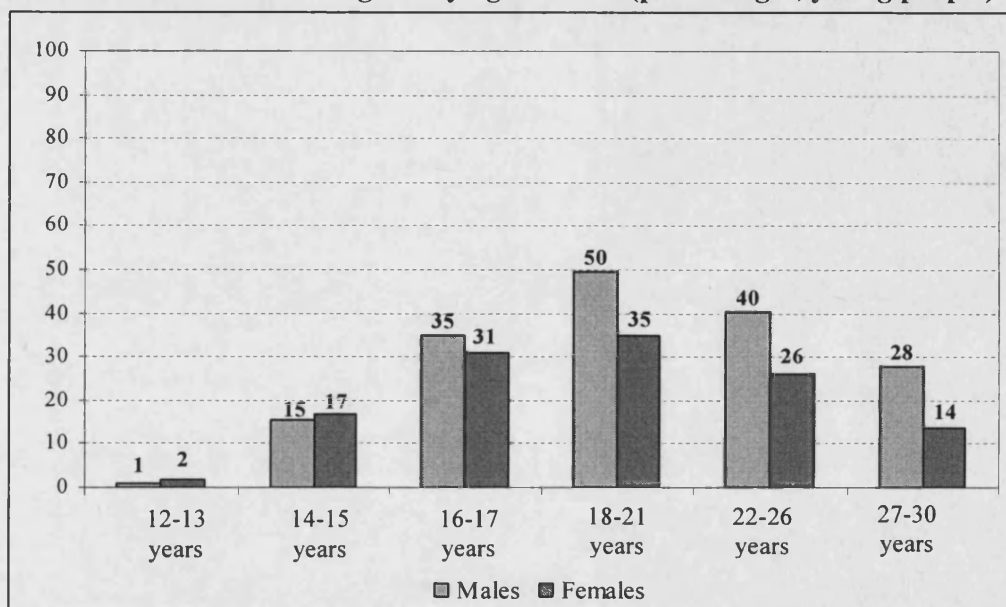
Given these differences, it is perhaps unsurprising that men appear to 'grow out' of crime more slowly than women. The peak age of offending for males is generally higher than for females (Newburn, 2002b) and this difference has been linked to the influence of early adult transitions. Based on the 1992 YLS, John Graham and Ben Bowling (1995) showed that the proportion of females who were actively involved in offending began to decline from the late teens onwards and that, for women, desistance was closely related to leaving home and school, forming partnerships and new families and becoming economically

independent. The situation among males was rather less clear-cut. On the one hand, men in their early 20s committed fewer and less serious offences than their teenage counterparts, but relatively few of them had stopped offending altogether. The proportion of males who were actively involved in offending remained fairly stable across the 14 to 25 year age range and appeared to be unaffected by the vicissitudes of early adulthood: 'Thus, it appears to be the case that not only do many young men fail to successfully make the transition to adulthood by their mid 20s', but 'those who do appear to be no more likely to desist than those who do not' (Graham and Bowling, 1995, 64-5). Similar analyses were conducted on the basis of the 1998/9 YLS, which had the advantage of a larger sample covering a wider age range (Flood-Page et al., 2000). The results of these analyses reinforced the conclusion that women 'grow out' of crime at an earlier age than men, though they also indicated that the proportion of men who are actively involved in offending begins to decline from the age of 22 years onwards.

Although drug use was excluded from the general analyses described above, certain similarities were noted between this and other forms of offending. The 1992 YLS indicated that the proportion of females who used illicit drugs peaked among 17 year olds, but then fell away quite sharply, while the proportion of males who engaged in such behaviour continued to increase up to the age of 20, before falling away at a more modest rate (Graham and Bowling, 1995). As a result, male users were found to outnumber female users from the age of 18 onwards, though not before. A similar pattern was noted on the basis of the 1992 BCS, which extended the usual adult sample to include 12 to 15 year olds (Mott and Mirrlees-Black, 1995), and the 1998/9 YLS, prompting the conclusion that females 'grow out' of drug use, as well as other forms of 'anti-social behaviour', at an earlier age than males (Flood-Page et al., 2000; and see Figure 10). These findings have important implications for recent debates about the changing nature of drug use because they reinforce the claim that the gender gap constitutes a persistent feature of early adulthood¹¹.

¹¹ For all the claims that have been made about the normalisation of drug use and the closing of the gender gap, the *North West Cohort Study* actually found that differences between the sexes began to emerge as members of the cohort entered early adulthood (Parker et al., 1998; Williams and Parker, 2001). At 14 and 15 years of age the proportion of males and females who had used illicit drugs in the last month was very similar,

Figure 10
Prevalence of recent drug use by age and sex (percentages, young people)



Source: YLS (1998/9)

Notes:

1. The prevalence rates shown here are based on the use of cannabis, the hallucinants and/or cocaine.
2. No statistically significant differences were evident between the sexes among 12 to 17 year olds ($p > .05$ for each group), but significantly more men than women in the 18 to 30 year age range had recently used these drugs. Cramer's $V = 0.15$ (18 to 22 year olds), 0.15 (23 to 26 year olds) and 0.18 (27 to 30 year olds). $P < .01$ for each group.
3. Similar differences were evident from the 1998 BCS. Male users outnumbered female users by three-to-two among 18 to 22 year olds (Cramer's $V = 0.13$, $p < .01$), two-to-one among 23 to 26 year olds (Cramer's $V = 0.19$, $p < .01$) and almost three-to-one among 27 to 30 year olds (Cramer's $V = 0.20$, $p < .01$). Once again, no significant differences were evident among 16 and 17 year olds (Cramer's $V = 0.06$, $p > .05$).

The emergence of a gender gap during the late teens and early 20s can be readily understood in the context of early adult transitions. Most men do not get married or have children until after their mid 20s and this provides the basis for an extended adolescence, which leaves considerable room for illicit drug use. Women's lifestyle choices appear to be rather more limited because they tend to 'settle down' more quickly, thereby establishing a domestic context which is less conducive to such behaviour. It may be that females also experience the constraining influences of adulthood more sharply than males. After all,

but notable differences began to emerge thereafter. At 18 years of age, 45 per cent of males and 28 per cent of females had used drugs in the last month and at 22 years of age 39 per cent and 25 per cent had done so respectively.

women consistently spend more time than men doing housework, particularly if they are married or have children, and generally assume greater responsibility for domestic tasks as an extension of their ascribed roles as mothers and primary caregivers (Fox, 1997; Cheal, 2002). While men are said to remain essentially untouched by family events, women have to contend with a 'contradictory double life' of work and family, which creates 'conflictual crises and continuing incompatible demands' (Beck, 1992, 132).

The possibility that women experience the constraining influence of early adult transitions more sharply than men was formally assessed on the basis of the multivariate analysis. Interaction terms were included in each of the models to test whether the effects of age and domestic circumstances vary by sex. What was most striking about the results of this analysis was how little these effects varied (see technical appendix for details). Some notable variations were evident, though there were discrepancies between the surveys. According to the BCS models, it was the effects of domestic circumstances, rather than age, that varied most between the sexes, while the YLS models suggested the opposite. Despite this, the interaction effects highlighted by both sets of models conformed to the general pattern noted above, whereby the gender gap was relatively narrow during the early stages of the transition into adulthood, but then opened up more widely. Crucially, the effects associated with marriage, cohabiting and having children were generally very similar for men and women, as were the effects of being aged between 18 and 30 years of age.

Early adult transitions and patterns of consumption

Fluctuations in illicit drug use during early adulthood are symptomatic of broader lifestyle differences. General patterns of consumption are closely related to early adult transitions and are subject to marked variations depending on housing status and domestic circumstances (Jones and Martin, 1997; see also Gershuny, 2000). Young people who live with parents or in transitional households spend a relatively large amount of their income on leisure products, including alcohol, that are consumed away from home. Among those who live with their parents, this distinct pattern of consumption is said to provide the basis for gaining greater independence, whereas among those in transitional households it has

been attributed to a combination of push and pull factors. Such households are often lacking in 'home comforts' which may encourage those living in them to spend much of their time elsewhere. It has also been noted that members of transitional households tend to be at a stage in their lives when spending on leisure is important for meeting potential partners. Whatever the reason, the formation of more permanent households is generally accompanied by a greater emphasis on home-centred consumption.

The BCS and YLS highlighted a range of lifestyle variations that are consistent with the claim that consumption becomes increasingly home-centred with the transition into adulthood¹². Eighteen to twenty two year olds revealed a distinct orientation which involved a particular commitment to the night-time economy and associated forms of consumption. As well as being the most active users of illicit drugs, young adults in this age group made most use of pubs and clubs, drank most heavily and got 'very drunk' most often (see Table 43). Sixteen and seventeen year olds revealed a similar orientation, albeit one that reflected their particularly ambiguous social position and partial exclusion from the night-time economy. The vast majority were living with their parents and, in a possible bid to gain greater autonomy, many spent a considerable amount of leisure time away from home: slightly more than half usually went out three evenings a week or more and a fifth went out every evening. A sizeable proportion were also getting 'very drunk' on a regular basis, though they drank less often than their slightly older counterparts and consumed less alcohol on the days they drank. What distinguished 16 and 17 year olds from 18 to 22 year olds most clearly, however, was their relationship with the night-time economy and the time they spent in outdoor locations. A relatively small proportion of this younger group had visited pubs or clubs on a weekly basis during the previous month and a fairly large proportion had spent time 'hanging around' on the street¹³.

¹² The relationship with domestic circumstances was assessed for all the lifestyle indicators included in the analysis except that relating to religiosity. Rather than provide an exhaustive account of these relationships, the discussion presented here focuses on those indicators that were best suited to the analysis. Where both surveys provided similar indicators, such as those regarding the use of pubs and clubs, the discussion focuses on that which provided the most detailed information. It should be noted that the relationships between domestic circumstances and lifestyle indicators were broadly consistent between the two surveys.

¹³ According to the YLS, 42 per cent of 16 to 17 year olds had spent time 'hanging around' on the street in the previous month, which was more than three times the proportion of 18 to 22 year olds, eight times the proportion of 23 to 26 year olds and fourteen times the proportion of 27 to 30 year olds.

Table 43

Drinking habits and participation in the night-time economy by age (young adults)

	Usually drink alcohol once a week or more (%)	Usual alcohol intake as a multiple of sensible daily limits (median)	Been 'very drunk' once a month or more in last 12-months (%)	Been to the pub once a week or more in last month (%)	Been to a club once a week or more in last month (%)
<i>Age</i>	**	**	**	**	**
16-17 years	44	1.0	34	26	13
18-22 years	68	2.0	43	57	26
23-26 years	63	1.5	30	44	9
27-30 years	62	1.3	17	34	4
Source: BCS (1998) and YLS (1998/9)					
			** p < 0.01	* p < 0.0	ns p > 0.05

Notes:

1. BCS: Cramer's V = 0.13 (frequency that usually drink alcohol); 0.15 (frequency of visits to the pub); and 0.23 (frequency of visits to clubs). Eta = 0.09 (usual alcohol intake).
2. YLS: Cramer's V=0.15 (frequency of drunkenness in last 12-months).

The leisure patterns that were evident among 23 to 30 year olds, by contrast, pointed to a partial withdrawal from the night-time economy and to the adoption of a more home-centred style. Young adults in this age range spent relatively few evenings away from home, tending to go out no more than once a week, and went to pubs and clubs less often than their slightly younger counterparts. Approximately three-quarters had been to a pub in the previous month and close to a third had been to a club, but relatively few had visited these venues on a weekly basis. Despite their apparent partial withdrawal from the night-time economy, most 23 to 30 year olds continued to drink on a regular basis and this reflected a greater emphasis on home-centred consumption. Responding to the YLS, almost two-thirds of the 27 to 30 year olds and half the 23 to 26 year olds who had drunk alcohol in the last year indicated that they usually did so at home, which compared with a third or so of 18 to 22 year olds and 16 to 17 year olds. This apparent shift towards home-based consumption was accompanied by greater evidence of moderation. Young adults in their mid-to-late 20s tended to stick more closely to recommended sensible drinking levels than their younger counterparts and fewer of them got 'very drunk' on a regular basis¹⁴.

¹⁴ Smoking habits also varied with age (Cramer's V = 0.10, p < .01). The proportion of young adults who smoked regularly fell from 45 per cent among 18 to 22 year olds, to 39 per cent among 23 to 26 year olds and to 35 per cent among 27 to 30 year olds, while the proportion of ex-smokers increased from 7 per cent to 11 per cent and 16 per cent respectively.

Further lifestyle differences were evident according to young adults' domestic circumstances¹⁵. These differences were most marked in relation to pubs, clubs and home-based drinking, reinforcing the suggestion that transitions into adulthood often involve a partial withdrawal from the night-time economy. Single young adults who did not have children tended to go to pubs and clubs most often, while those who were married or cohabiting and who had children tended to make the least use of these venues (see Figure 11). This pattern was particularly marked in relation to clubs. Most single young adults who did not have children had visited a club during the previous month and a sizeable minority, particularly of those living independently in rented accommodation, had done so on a weekly basis or more. Among those who were married or were cohabiting with children, by contrast, less than a quarter had been to a club during the previous month and almost none had been once a week or more. The remaining domestic categories represented something of a middle ground, with a fairly substantial proportion in each having visited a club in the last month, but relatively few having done so on a weekly basis or more. Young adults in these intermediate groups also tended go to pubs more often than those who were married or cohabiting and who had children, but less often than those who were single and did not have children.

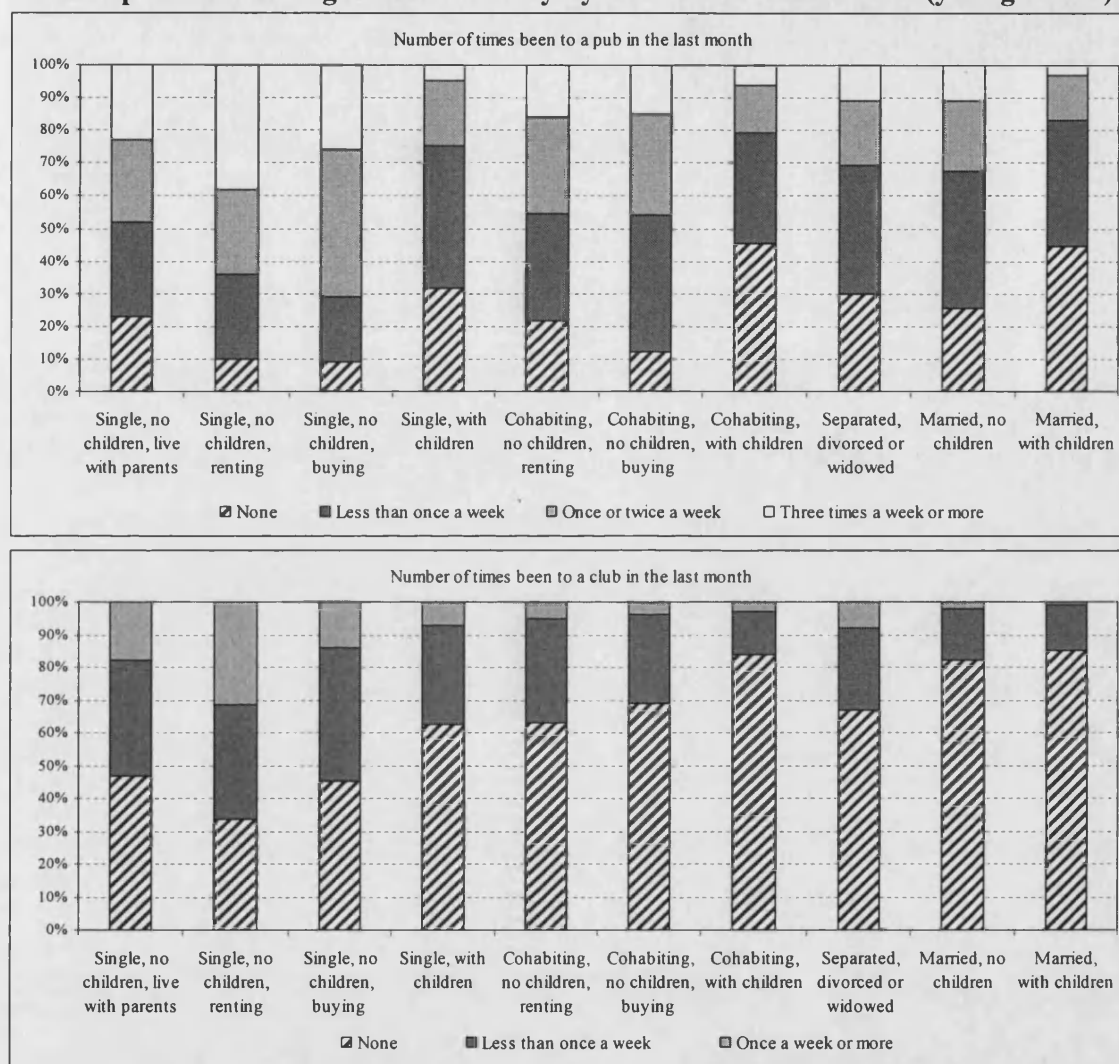
As noted earlier in relation to age, this apparent withdrawal from the night-time economy was accompanied by greater emphasis on home-centred consumption and moderation. Among those groups that made most use of pubs and clubs, drinking at home appeared to be relatively unimportant. Less than a third of single young adults who did not have children usually drank at home if they were living with their parents and less than half did so if they were living independently in rented accommodation¹⁶. Among groups that made less use of pubs and clubs, home-based drinking appeared to assume greater importance. Two-thirds of those who had children and were either married or cohabiting usually drank at

¹⁵ These differences persisted even when the influence of age was taken into account. Almost all the lifestyle indicators included in the analysis were significantly linked to domestic circumstances among 18-22 year olds, 23 to 26 year olds and 27 to 30 year olds. Although such links were less evident among 16 to 17 year olds, this is unsurprising given that the vast majority were single, childless and living with their parents.

¹⁶ These figures are given as a proportion of all those who had drunk alcohol in the last year.

home, as did three-quarters or so of those who did not have children but were either married or were cohabiting and buying their own home.

Figure 11
Participation in the night-time economy by domestic circumstances (young adults)



Source: BCS (1998)

Note: Cramer's V = 0.21 (pub) and 0.29 (club). $P < .01$ in both cases

Those groups that were most actively involved in the night-time economy also tended to drink most often and most heavily. On average, single young adults who did not have children and were living independently in rented accommodation usually drank on three or

four days a week, consuming twice the recommended sensible limit on the days they drank. At the other end of the scale, young adults who were married or were cohabiting with children tended to drink no more than once a week and stuck closely to recommended limits: on average, those who were married drank no more than the recommended limit, while those who were cohabiting with children drank slightly more. With these relatively modest drinking habits, drunkenness was much less common. Approximately one-in-ten young adults who were married or were cohabiting with children had been 'very drunk' on a monthly basis or more during the last year, which compared with two-in-five of those who were single, childless and either living with their parents or renting their own accommodation.

Finally, it is important to note the distinct position of lone parents and young adults who were separated, widowed or divorced (most of whom had children). The drinking habits displayed by these groups reveal something of a duality, which reflects their equivocal status in relation to early adult transitions and is consistent with their intermediate position regarding rates of recent drug use (see earlier). On the one hand, these young adults tended to drink fairly infrequently, doing so, on average, two or three times a month, which was similar to those who were married or cohabiting with children. But in other respects their drinking habits differed quite markedly from those reported by young adults who were living as part of a couple and who had children. Lone parents and those who were separated, widowed or divorced were much less home-centred in their drinking, with less than half of those who had drunk alcohol in the last year usually doing so at home. They were also more actively involved in the night-time economy, particularly clubs (see Figure 11) and tended to get 'very drunk' more often, with approximately one in five of each group having done so on a monthly basis or more during the last year. For those who had previously been married, such habits reinforce the earlier analysis and suggest a partial return to a single way of life.

Conclusion

The detailed analysis contained in this chapter furthers my broader arguments regarding the extent of continuity and the value of established perspectives. Although the process of

growing up has changed significantly over the last 40 years or so, the basic point remains that drug use, like other forms of offending, can not be fully understood outside of a transitions perspective. Despite this, recent developments in the sociology of drug use have done little to clarify how such behaviour fits with the life-course and we must look elsewhere for explanation. Although Laub and Sampson's age graded theory of social control was not specifically formulated with drug use in mind, it has much to offer in this regard. The idea that drug use constitutes a form of 'situated choice' takes account of personal motivations, while simultaneously drawing attention to the contingent nature of such behaviour. Put simply, decisions about drug use can not be separated from the broader social context in which they are made and some social contexts are more conducive to the decision to use drugs than others. While partly a function of age, the concentration of drug use among young people also reflects the changing roles and responsibilities associated with early adulthood. Domestic circumstances appear to be particularly important in this regard, exercising rather more influence than labour market status. Where work routines leave regular opportunities for hedonistic consumption, domestic responsibilities appear to encapsulate more fully the constraining influence of the social bond.

Whatever the precise reasons, the formation of stable partnerships, reinforced by marriage and / or shared parental responsibilities, appears to encourage a shift away from subterranean values and towards formal values. The analysis presented above indicates that illicit drug use is relatively rare among young adults in their mid-to-late 20s who have 'settled down' due to a growing emphasis on desistance, moderation and home-centred consumption, as well as a partial withdrawal from the night-time economy. For young adults in their late teens or early 20s who have little by way of domestic responsibilities, by contrast, illicit drug use, alongside active participation in the night-time economy, regular binge-drinking and frequent drunkenness, offers a means of making sense of their position in the social structure: that is to say, public displays of hedonistic leisure consumption help to define what it is to be young and offer a way of celebrating freedom from adult roles and domestic responsibility.

A transitions perspective also helps to explain some notable differences between the sexes. Recent claims about the closure of the gender gap have been made on the basis of young people in their early-to-mid teens and fail to take account of the considerable differences that continue to be evident among young adults. National surveys have repeatedly shown that the proportion of males and females who use illicit drugs remains very similar up to the age of 18 years or so, at which point male users begin to outnumber female users. This pattern clearly indicates that young women 'grow out' of drug use, as well as other forms of offending, at an earlier age than young men and reflects notable differences in the timing of some key transitions. Most men do not get married or have children until after their mid 20s and this provides the basis for an extended adolescence which leaves considerable room for illicit drug use. Young women's lifestyle choices appear to be rather more limited in comparison as they tend to 'settle down' more quickly, thereby establishing a domestic context which is less conducive to such behaviour.

As well as offering important insights into contemporary patterns of drug use, a transitions perspective helps to account for the long-term trend towards increased use. The sharp rise in illicit drug use dating back to the mid 1960s has been facilitated by far-reaching changes in young people's lives. In particular, the emergence of increasingly fragmented and protracted early adult transitions has given rise to an extended adolescence which has brought greater opportunities for the pursuit of hedonistic leisure.

Drug use and social change

Drugs have lost their history. A few antique episodes remain in popular consciousness: opiate use among Romantic poets, Freud's unwise dalliance with cocaine, Britain's Opium Wars against China, the drug fever of pre-Hays Code Hollywood. But there is little sense of how certain drugs came to assume their special role, corrosive and Dionysiac, in twentieth century culture (Kohn, 1992, 1).

Illicit drug use is subject to the same kind of historical amnesia that has shaped responses to crime and disorder since Victorian times (Pearson, 1983). All too often, the realities of the past lie forgotten, buried beneath a romanticised nostalgia for the way things used to be. As a result, crime and disorder have acquired an aura of perpetual novelty, feeding 'respectable fears' about moral decline and the loss of traditional values. Claims about the unprecedented nature of contemporary drug use run the risk of fuelling such fears by creating a misleading impression of both the past and the present. In reality, drug use has a much longer history than these claims imply and has involved a much greater degree of continuity. When Marek Kohn (1992) documented the rise of the drug underground in early twentieth century London he was struck by the familiarity of the story he had uncovered. This was, after all, a story of young people, drug-fuelled hedonism and moral panics. At times, he concluded, it seemed 'almost as though everything to do with drugs was present in miniature, eighty odd years ago' (1992, 182).

Some things clearly have changed, however, and Kohn, like many other commentators, identifies the 1960s as a watershed which marks the beginning of the modern era in Britain's relationship with illicit drugs. The challenge, therefore, is to explain contemporary patterns of drug use in a way that recognises similarities with the past. In an attempt to provide such an explanation this final chapter considers the broader implications of the analysis presented so far. The main arguments developed in previous chapters can be summarised as follows: drug use is subject to much greater continuity than we are often led to believe; established perspectives have considerably more to offer than is often implied; and recent theoretical developments represent less of a radical departure than their proponents suggest. In assessing the broader implications of these arguments, particular attention will be paid to the following

questions: to what extent can Britain's changing relationship with illicit drugs be considered symptomatic of the broader social and cultural shifts associated with the development of modernity? Are contemporary patterns of drug use so different from what came before that they require wholly new perspectives? And, what does criminology and the new deviancy theories in particular have to tell us about the possible future of drugs control?

Drug use and the development of modernity

Illicit drug use has not been transformed in the way that is often supposed. Consequently, the emphasis on post-modernity remains one of the least satisfactory aspects of recent theories on this subject. Although the evidence is limited, the review in chapter two clearly shows that widespread drug use did not appear suddenly in the late 1980s or early 1990s, but is the result of a much longer trend dating back quarter of a century or so earlier. Set in this context, some of the more detailed claims that have been made about the nature of contemporary drug use are problematic because they perpetuate, and depend upon, the notion of a radical transformation. As shown in chapter four, illicit drug use is far from being a universal feature of young adults' lives and is typically hesitant, tentative and short-lived. Contrary to recent claims, moreover, even the most common forms of illicit drug use have not become so widespread that traditional distinctions between users and non-users have disintegrated.

The analysis presented in chapter six makes it clear that illicit drug use typically forms part of a distinct leisure style which involves a particular commitment to consumption and intoxication. In addition, the analysis presented in chapter seven indicates that this style is most commonly found in the early stages of the transition into adulthood and that young adults continue to 'grow out' of drug use, especially as they form stable partnerships and have children. Contrary to recent claims, moreover, young women tend to desist from drug use, as well as other forms of offending, at an earlier age than young men and there is little evidence that the gender gap is closing. Significant demographic differences have also been noted in relation to ethnicity, with young adults from black and minority groups tending to use drugs in smaller numbers than their white counterparts. Such differences, it has been suggested, reflect culturally distinct orientations to consumption and intoxication more generally, which are based partly on

the influence of religion (see chapter five). The one area where traditional distinctions between users and non-users do appear to have blurred is social class, but even here the process does not seem to have taken the form that recent theories imply. Rather than spreading from delinquent working class subcultures to the middle classes, all the indications are that drug use has gone from being a largely middle class phenomenon to one that cuts across class boundaries.

The broader social meaning of drug use also conveys a strong sense of continuity. 'Rave' provides a good illustration of this point despite having been heavily implicated in the normalisation of drug use and the transformation of British youth culture more generally. Some critics maintain there was nothing new about 'rave', arguing that it simply replayed and reworked the subcultural experiences of previous generations (Smith, 1992). Without necessarily endorsing such claims, other commentators have highlighted several important areas of continuity (Osgerby, 1998; Thompson, 1998). Most obviously, perhaps, social reactions to 'rave' have been interpreted in highly familiar terms, being routinely described as a 'moral panic'. What it meant to participate in 'rave' has also been interpreted in ways which are reminiscent of earlier youth styles, having been seen as a gesture of avoidance signifying a shirking of adult responsibility in favour of a universe of pleasure and play. Such an orientation was evident in the emphasis on 'living for the weekend', which perfectly encapsulated the limited expression of subterranean values that has characterised British youth culture since the early 1960s, if not before (see chapter six). This lineage was further evident from the psychedelic aesthetic, the emphasis on drug fuelled hedonism and talk of the second 'Summer of Love', all of which contained clear echoes of the sixties counter culture. Add to this the element of entrepreneurialism and the symbiotic relationship with mainstream commercial leisure markets and it is difficult to avoid the conclusion that those who participated in 'rave' were improvising around a well established script.

Such continuity challenges the idea of a radical transformation and highlights the need for explanations which view social change as an evolutionary process. Recent analyses of broader trends in crime and crime control provide a useful template here because they have taken a historical perspective which links trends in these areas to the development of modernity (Young, 1999; Reiner, 2000; Garland, 2001). Accordingly, increases in crime have been attributed to a combination of cultural and structural changes dating

back to the middle of the last century, among the most important of which are said to have been the improving living standards and expanding consumer markets that made up the 'golden age' of the post-war era; the cultural revolution that defined the long sixties; and the triumph of neo-liberalism and free market economics following the international oil crisis of 1973. Set in this context, rapidly increasing crime rates have been described as the unintentional, but largely predictable, consequence of the development of modernity (Garland, 2001) and the same may be said in relation to illicit drug use.

Any attempt to link crime or drug use to broader social trends runs the risk of presenting an overly schematic and deterministic account which filters out competing influences and ignores contrary evidence. It is worth reinforcing the point, therefore, that the last 50 years or so has not simply been about the irresistible rise of hedonistic consumption. Important developments have also occurred which seem to be working in the opposite direction, including the emergence of 'healthy living', the progressive marginalisation of smoking and substantial long-term reductions in tobacco consumption. Nonetheless, even allowing for these developments, the central point remains: the emergence of widespread illicit drug use has been underpinned by the cultural and structural changes associated with the development of modernity. More specifically, such changes have served to accentuate the motives for illicit drug use, have provided the means for realising them and have relaxed the controls that might otherwise have held them in check (see Reiner, 2000 and 2007):

- *Motive¹*: late modern sensibilities have been profoundly influenced by the 'new individualism' which grew out of the post-war consumer society and the sixties cultural revolution (Young, 1999). Alongside the restructuring of the labour market, the rise of individualism has meant that the balance between work and play that was so characteristic of the earlier Fordist period has been tipped towards the subterranean world of leisure and this has accentuated the motives

¹ Economic motives have been heavily implicated in rising crime rates and considerable emphasis has been placed on the way in which widening social divisions and new forms of social exclusion have fuelled recent trends (Young, 1999; Reiner, 2000; Garland, 2001). Although economic motives are most obviously applicable to acquisitive offences, deprivation and social exclusion have been linked to the dramatic increase in problematic drug use since the early 1980s (ACMD, 1998; Seddon, 2006). These factors have a much weaker relationship with recreational drug use, however, and have a much more limited role in explaining recent trends in such use.

behind much illicit drug use. Since the middle of the last century the general trend has been towards less work and more free-time, with young people, in particular, emerging as something of a leisure class. At the same time, deindustrialisation and the economic imperatives of market capitalism have meant that leisure has acquired growing importance as a means of consumption and a source of employment (Gershuny, 2000). In this way, the targeting of young people by the drinks industry and the emergence of a thriving night-time economy can be directly linked to the structural conditions of late modernity (Hobbs et al., 2003). These developments have, in turn, helped to create a platform for widespread illicit drug use by encouraging the rise of a distinctly hedonistic leisure style which appeals to the heightened subterranean sensibility of the time.

- *Means and opportunity*: the trend towards increasingly hedonistic leisure has helped to create the conditions for widespread illicit drug use though it has not made such use inevitable. A motivated potential offender must have the capacity to commit the crime, which, in the current context, means they must have access to illicit drugs. The development of modernity has played a key role in this regard, particularly in the form of globalisation. During the last 50 years or so, British drugs markets have been heavily influenced by the increased movement of people and associated cultural practices across national borders: witness, for example, the proliferation of the 'ganja complex' (Hamid, 2002) and the international dimensions of ecstasy culture (Collin with Godfrey, 1997). Added to this, globalisation has created considerable opportunities for transnational organised crime by providing access to new markets (Bean, 2002; Seddon, 2006). While supply-side developments have resulted in falling prices, increases in disposable income have meant that illicit drugs have become a relatively affordable commodity.
- *Control*: as well providing greater opportunities for drug use, recent social trends have served to loosen some of the informal controls that might otherwise have inhibited the spread of such behaviour. The cultural revolution encouraged a growing scepticism about claims of authority and traditions of deference (Young, 1999, 194); the influence of the Church has declined sharply (Newburn,

1992); and social norms governing such matters as sexuality and drug use have been relaxed (Garland, 2001). More or less simultaneously, the expansion of higher education, the restructuring of the labour market and the extension of domestic transitions has meant that young people spend more time outside the disciplines of family life and full time-work. As well as experiencing an extended adolescence, during which they are relatively free to indulge in hedonistic pursuits, increasing rates of marital breakdown have meant that many young adults return to something like a 'single way of life' after they have seemingly 'settled down'.

The need for new perspectives?

At several points in previous chapters recent developments in the sociology of drug use have been criticised on the grounds that they rest on a distorted image of the past. As well as misrepresenting the way things were, these developments have presented an incomplete and misleading version of the way they were understood to be. Reflecting a form of chronocentrism, the insights provided by established theories have been dismissed too readily and this has resulted in a process of reinvention. For all the emphasis on the need for new perspectives, much that has recently been written about drug use can be found in earlier work. New deviancy theories are particularly important in this regard, in part at least, because they anticipated the majority of post-modern themes by some 20 years or so, though many recent converts to the post-modern cause 'do not seem to have realized that a rich and developed tradition predates them' (Young, 1999, 33; see also Cohen, 1997). More specifically, the inadequacies of explanations based on individual pathology or social dysfunction; the ubiquity and diffuseness of rule-breaking; the contested and blurred nature of distinctions between 'normal' and 'deviant'; the meaningful and purposive nature of apparently 'deviant' behaviour; and the role of consumption and pleasure-seeking were all central to the new deviancy theories and to related developments in the early sociology of drug use. The ancestry of these themes has been obscured, however, because the earlier work on which they were based has received little attention. Most notably, neither the new deviancy theories nor the early sociology of drug use have been directly implicated in recent calls for new perspectives. Where such calls have been made in the context of Cultural Studies they have focused on the subcultural tradition developed by Dick Hebdidge and the

Birmingham School (Redhead, 1993 and 1997; Merchant and MacDonald, 1994) and where they have been made in the context of criminology they have focused on subcultural strain theory and 'positivist' psychology (Ruggiero and South, 1995; Parker et al., 1998).

The marginalisation of new deviancy theories is particularly significant because they continue to offer valuable insights into the social processes surrounding illicit drug use. Recreational drug use can be usefully understood as a form of primary deviance (chapter four) and an expression of subterranean values (chapter six). Added to this, drug users still have to contend with powerful forces of social control that seek to limit their access to illegal drugs and define their use as immoral. Though largely forgotten, the value of new deviancy theories can be seen from a handful of recent studies. Sarah Thornton's (1995) analysis of British club culture was shaped by insights provided by Howard Becker, Stanley Cohen and Jock Young; my own earlier work has drawn heavily on the ideas of David Matza and Gresham Sykes to show how young people develop neutralisation techniques to negate ideological dimensions of drug control (Shiner and Newburn, 1997; Shiner, 2000); Michelle Gourley (2004) has demonstrated the value of Becker's subcultural theory of deviance in relation to contemporary ecstasy use in Australia; and Bruce Johnson and colleagues (2006, 46) have described how marijuana users in New York City employ a distinct argot which serves to maintain the 'subculture of secrecy' and provides a comprehensive system of communication that conveys the 'dynamic expressiveness' involved in shared consumption. All of which suggests that normalisation remains the negotiated accomplishment of distinct social groups operating in bounded situations.

For all of the undoubted insights they offer, new deviancy theories are limited in several important respects. Despite being presented as a radical alternative, these theories replicated some of the blind-spots of mainstream criminology, with feminist critics, in particular, pointing to the continued invisibility of women (Millman, 1982; Heidensohn, 1989). As a corrective to the gender-blindness of earlier work, recent feminist perspectives have much to offer, but they represent less of a departure than is often implied. Rather like the normalisation thesis, these perspectives have looked to Cultural Studies for inspiration, yet contain clear echoes of the early sociology of drug use and

could plausibly have been formulated within the framework provided by this earlier work (Shiner, 2006).

Where new deviancy theories really struggle is in accounting for differences in individual behaviour. These theories were not designed to provide causal explanations and where such explanations have been offered they generally operate at the level of meaning and motivation, with little consideration of underlying structural influences (Heidensohn, 1989; Downes and Rock, 2003). Rather than compensating for this shortcoming, recent developments in the sociology of drug use have compounded the problem. By emphasising 'the withering of traditional sociological predictor variables' (Parker et al., 1998, 154), the normalisation thesis is left with no way of explaining why drug use varies in the way that it does. Indeed, given the added emphasis on the role of consumption, this thesis is unable to explain why some young people use drugs and others do not, except to say that such decisions are the result of individual choice. The notion of differentiated normalisation may seem to offer a way out of this conceptual cul-de-sac, but, in theoretical terms, represents a significant departure from the original thesis and leads back to something like the subcultural formulations developed by new deviancy theorists.

To explain why some young adults use illicit drugs, while others do not, it has been necessary to look beyond the sociology of drug use to more general criminological theory. In particular, the analysis of life-course influences presented in chapter seven is based on Laub and Sampson's age-graded theory of informal social control. This perspective incorporates the insights of new deviancy theories, but locates them within the framework of control theory. While individual motivations are considered to be important, so are the structural conditions under which decisions are made and this is reflected in the notion of 'situated choice'. Because situations vary in the extent to which they constrain behavioural choices, some situations are more conducive to drug use than others. Work, marriage and parenthood, all impose certain obligations and constraints, which helps to explain why drug use is concentrated among young adults, particularly those who have little by way of domestic responsibilities and those who are unemployed or otherwise marginalised from the labour market. Because young women tend to 'settle down' at a relatively young age, the constraining influence of domestic

transitions also helps to explain why they 'grow out' of drug use more quickly than young men.

As well as making sense of life-course influences, control theory helps to explain some of the other socio-demographic variations noted in chapter five. In particular, the influence of religiosity and ethnic minority membership point to a distinct set of cultural norms based around abstinence, sobriety, restraint and moderation. Conversely, the link between social exclusion and problematic drug use may be understood in terms of a relative absence of controls and a weakened social bond. Finally, as well as helping to explain the general increase in drug use (see above), the relaxation of social controls may help to explain the apparent convergence between social classes. The collapse of the youth labour market has had a particularly marked effect on young people from working class backgrounds and has meant that delayed transitions have become a common experience across all classes (Furlong and Cartmel, 1997). As a result, leisure patterns have become less strictly demarcated by class (Roberts and Parsell, 1994) and young people from all social classes have greater opportunity to engage in drug use.

Drug policy and the new deviancy critique

The early sociology of drug use had a clear normative orientation which reflected new deviancy theorists' broader concerns about the extension of state control into morally ambiguous areas (Cohen, 1971). Applied to drug use, these concerns meant highlighting the inefficient and counter-productive nature of legal prohibition and campaigning for less punitive forms of regulation. Given the passage of time, it might be thought that the new deviancy critique has little to tell us about current or future drug control, but this, I will argue, would be a mistake. As well as offering important insights into the social meaning of drug use, the work of Becker, Schur, Young and others continues to offer a powerful critique of contemporary drugs policy. Indeed, far from demanding a wholly new perspective, recent trends in drug use and drug policy have served to highlight the prescience of the new deviancy critique. In illustrating this point I will briefly consider the direction that British drugs policy has followed since the late 1960s, before going on to assess the broader implications of the new deviancy theories.

The liberal critique associated with new deviancy theories came to the fore just as politicians and policy-makers in Britain were preparing to adopt a much more explicitly control-led strategy. While American reformers such as Alfred Lindesmith (1965) and Edwin Schur (1963) were campaigning for the adoption of something like the 'British system', British policy was being pushed towards an American approach. Even without the benefit of hindsight, this development was noted with a sense of foreboding by liberal critics. Young (1971) felt such a move could only exacerbate the problem, while Schur (1969, 217) maintained that: 'It is reasonable to predict that if the British do move significantly in the direction of American policy, the consequences of doing so will be unhappy ones'. Following the lead of President Nixon, who famously declared 'war on drugs' in 1971, the character of British drugs policy began to change so profoundly that it too could be characterised in such terms by the middle of the next decade (Stimson, 1987). This reorientation was not limited to drugs, moreover, but was part of a broader shift towards a much more punitive approach to criminal justice as a whole on both sides of the Atlantic (Garland, 2001; see also Stimson, 1987). What had previously been considered 'victimless crimes' or tolerable nuisances, including public drinking and 'soft' drug use, came to be seen as threats to 'the community' and its 'quality of life', as 'the disorderly stuff upon which serious crime feeds' (Garland, 2001, 181). In response, the day-to-day practices of criminal justice were geared much more explicitly towards punishment and supervision. As such, 'rehabilitation' came to focus less on the well-being of the offender and more on managing the risks that s/he posed to the public.

The increasingly punitive orientation of British drugs policy can be seen from the very marked growth in the number of people sent to prison for drugs offences and a similar expansion in the use of community sentences. Overall, the number of people given immediate custodial sentences for drug offences more than doubled between 1978 and 1990, from 1,579 to 3,402 per year, and then almost quadrupled again before the end of the century (Corkery, 2002; Ahmed and Mwenda, 2004)². This punitive turn is also reflected in the recent introduction of mandatory minimum custodial sentences for some dealing offences and the increasing amounts of jail time that drug offences have started

² While the figures given here cover all drug offences, including those relating to supply, the same basic trends are evident in relation to possession. It is also worth noting that a sizeable proportion of custodial and community sentences are for cannabis offences. In 2001/2, the precise figures were 25 per cent 43 per cent respectively (Ahmed and Mwenda, 2004).

to attract³. With the introduction of a more explicit criminal justice agenda, moreover, drug treatment has been repositioned so as to serve the purposes of crime control more explicitly. Treatment interventions continue to be configured almost entirely around those substances - namely heroin and, to a lesser extent, crack cocaine - that are thought to be the main sources of drug-related crime and access to treatment is increasingly channelled through the criminal justice system (Harman and Paylor, 2002; Sampson, 2002; Stevens, 2006). The distinction between health and criminal justice responses has, in addition, been blurred by the introduction of Drug Treatment and Testing Orders (see Bean, 2002). In 2002 and 2003 4,676 and 6,192 offenders were placed on such orders respectively, of whom almost half were breached and almost a quarter were sentenced to an immediate custodial sentence as a result (Home Office, 2003). Given the nature of these developments, it follows that what was radical and reformist at the time that the new deviancy theorists were writing is still radical and reformist today.

Recent trends in drug use and drug policy lend considerable weight to the critique that emerged out of the new deviancy theories. If the goal of prohibition seemed a distant and forlorn hope when the *Drugtakers* was first published then how much more must this be so today? Illicit drug use has not only become considerably more widespread, but is rooted in deeply engrained subterranean values which have become increasingly prominent due to the specific structural conditions of late modernity. As such, there is little reason to suppose that the long-term increase in drug use will be reversed on any significant scale in the foreseeable future. Most notably, perhaps, the fact that drug use has proliferated against a background of progressively more punitive responses by the state reinforces the conclusion that such behaviour can not be legislated out of existence. Viewed globally, the scale of the failure associated with prohibition can be gauged from estimates that illegal drugs account for approximately eight per cent of world trade, which is more than that in iron and steel and about the same as that in textiles (Elvins, 2003). Under these circumstances, to maintain, as the United Nations (1998) has, that 'A Drug Free World' is a viable proposition is not only naïve, but is also morally dubious. Such a stance perpetuates a situation whereby drug markets operate

³ A minimum mandatory seven year prison sentence was introduced for a third conviction of a class A drug trafficking offence in 1997 and the average custodial sentence for drug offences increased from around 28 months for the period 1993-1999 to 35.2 by 2003 (Home Office, 2003).

outside the orbit of the state, free from external regulation and is, therefore, complicit in the creation of harm.

The reaction of the UN notwithstanding, the inability of nation states to enforce prohibition has demanded certain adaptive responses (Garland, 2001). Most notably, the limitations of the criminal justice system have led some public officials, including senior police officers, to adopt a containment focus, whereby the 'manageability' of crime and drug problems replaces 'the more heroic but politically risky "war" stance' (Dorn and Lee, 1999, 97). There are, moreover, signs that the political consensus underpinning prohibition is fragmenting, with several influential public bodies having recently called for substantial reform. Finally, rising rates of illicit drug use have been accompanied by fairly widespread public support for the legalisation or decriminalisation of some controlled substances (Gould and Stratford, 2002). All of which has helped to create a climate in which limited reform has become a possibility and in which the government has been prepared to take a calculated risk in downgrading the legal classification of cannabis.

Despite these adaptive responses, the potential for reform continues to be tightly constrained by the prevailing political climate. Although the New Labour government eventually agreed to the reclassification of cannabis, it was reportedly worried that such a move would be interpreted as being 'soft' on drugs and the Prime Minister was said to be particularly concerned about the reaction of the parents of 'Middle England' (*The Observer*, July 7th 2002). Given these on-going political sensitivities, recent debates about drugs policy have generally been conducted within very limited horizons, which fall well short of decriminalisation or legalisation. As such, proposals for a 'market solution' can still be criticised on the basis that they are politically naïve and waste opportunities to intervene positively in public policy (Dorn and South, 1990). Even if this were not the case, such arrangements might be challenged on the basis that they are insufficient to manage the related risks. Prohibition may be heavily implicated in many of the harms associated with illegal drug use, but it does not necessarily follow that legalisation would eradicate all of these harms. One need only look to the examples of alcohol and tobacco to see that a 'market solution' can generate harm where business imperatives are allowed to override public health interests (MacCoun and Reuter, 2001; Newburn and Shiner, 2001).

The implications for what Jock Young (1971) called a 'sane' and 'just' policy seem clear. Such a policy must take seriously both the limitations of the criminal law and the harmfulness of illicit drugs. In practical terms this means accepting that the complete elimination of drug use is an impossible task and focusing instead on establishing a system of regulation which concentrates on reducing harm. Such a system may well involve something like the programme of reform envisaged by the Independent Inquiry, whereby enforcement-led approaches give way to a greater emphasis on education and treatment, but this raises important questions about the nature and purpose of education and treatment. As things currently stand such interventions are geared towards 'demand reduction', prompting claims that abstinence provides the universal underlying aim of the national strategy (Evans, 2002). While education is primarily aimed at preventing school-age young people from ever using drugs, treatment is geared towards helping 'addicts' and 'problem drug misusers' 'live healthy and crime free lives' (Central Drugs Coordination Unit, 1998). The polarised nature of this provision means that little is done to meet the needs of the large number of young people who use drugs recreationally. In order to fill this gap, treatment would have to be reconfigured so as to cover a greater range of substances, including those that are most widely used, and drug education would have to be reformulated so as to include a much greater focus on harm reduction (Cripps, 1997; Bottomley, 1999; Newcombe, 2005).

Although drug education can no more deliver the promise of 'A Drug Free World' than enforcement-led approaches, there are good reasons for thinking it can contribute positively to a broader system of regulation. There is little, if any, evidence that education can stop young people from experimenting with illicit drugs (Coggans et al., 1991; Dorn and Murji, 1992; DfEE, 1998), but such interventions do appear to have more to offer in terms of reinforcing decisions not to use or what not to use, encouraging moderation, limiting escalation and promoting harm reduction (Coggans et al., 1991; Dorn and Murji, 1992; Shiner and Newburn, 1997; Shiner, 2000; Cohen, 2002)⁴. The apparent futility of traditional abstinence-based approaches has prompted

⁴ The Department of Health's campaign against volatile substance abuse (VSA) in the early 1990s provides one example of a drug education campaign which seems to have had a tangible effect in terms of harm reduction. The number of deaths associated with VSA in the United Kingdom increased from 82 in 1983 to 152 in 1990, but then fell in each of the subsequent four years to 67 in 1994. Despite a slight rise, thereafter, the number of such deaths fell to its lowest figure of 47 in 2004 (Field-Smith et al., 2006). According to *The Advisory Council on the Misuse of Drugs* (2000, 19) the initial decrease in VSA related deaths was 'probably at least in part' due to the Department of Health campaign.

the development of more progressive interventions which are consistent with the new deviancy critique. Rejection of 'just say no' messages, the emphasis on relaying accurate, balanced information in a way that is credible to the audience, the development of peer approaches and the inclusion of harm-reduction messages all sit comfortably with Young's (1971) emphasis on positive propaganda and maintaining cultures. What this emphasis might mean in relation to recreational drug use is, perhaps, best illustrated by the work of Lifeline, the Manchester-based drugs agency (www.lifeline.org.uk). Promising to 'tell the truth about drugs', Lifeline responded to the emerging 'rave' scene by developing tailor-made comic-book harm-reduction materials which were targeted through the night-time economy and became an integral part of the city's club culture (Collin with Godfrey, 1997, 284).

Traces of the new deviancy critique can also be seen in some of the more progressive developments that are occurring in relation to the regulation of supply. In making the case for legally regulated markets, Transform, the drug policy foundation, has repeated many of the arguments developed by Edwin Schur (1963, 1965 and 1969), Troy Duster (1970), Jock Young (1971) and others. According to Transform, prohibition has not only been an expensive failure, but has, in some respects, been counter-productive, causing a range of harms including the creation of organised criminal gangs, pushing problem-users into acquisitive crime and maximising the risks associated with use (Rolles and Kushlick, 2004). In addition, recent policy initiatives have involved some movement towards legally regulated supply, though such movement has been piecemeal and selective. Under the terms of the national drugs strategy, the government is committed to increasing the availability of heroin on prescription 'to all those who have a clinical need' (Drugs Strategy Directorate, 2002, 50), prompting one national newspaper to claim that addiction was being moved 'from a criminal offence to a medical need, an old and sensible approach' (*The Guardian*, July 11 2002). The distribution of injecting paraphernalia has also been legalised and the government is under growing pressure to introduce Drug Consumption Rooms where dependent users can take drugs in supervised hygienic conditions (Independent Working Group on Drug Consumption Rooms, 2006).

This apparent pragmatism has clear limits, however, and does not currently extend to recreational drug use. Although the Home Affairs Select Committee (2002, 62)

supported the piloting of heroin prescribing and safe injecting houses, it refused to endorse the principle of legally-regulated supply more generally on the grounds that to do so would be a 'gamble' and a 'step into the unknown'. Whilst recognising the need for realistic drug education, moreover, the Committee singled out Lifeline for particular criticism, arguing that it had crossed the line between providing accurate information and encouraging young people to experiment with illegal drugs. Similar concerns are evident in the *Safer Clubbing* guidance that the Drugs Prevention Advisory Service and the London Drug Policy Forum produced for licensing authorities, club managers and promoters (Webster et al., 2002). This guidance addresses such issues as overcrowding, air conditioning, ventilation and the availability of drinking water, but, despite concerns about purity and adulterants, refuses to recommend the use of ecstasy testing kits because, among other things: 'It is hard to maintain a policy that discourages drug use at the same time as offering a pill testing service' (2002, 47). Such a stance seems strangely at odds with the legalised distribution of injecting paraphernalia and the commitment to increasing the legal availability of heroin.

More than at any other time in the last century, Britain stands at a cross-roads in its relationship with illicit drugs, caught between the apparent certainty of prohibition and a growing awareness that existing arrangements do not, and cannot, deliver on their promises. Finding a way out of this predicament may well require 'new' perspectives, but we must also take care to maintain good relations with what Ulrich Beck (1992, 12) has called 'treasures of tradition', without 'a misconceived and sorrowful turn to the new, which always remains old anyway'. For the sociology of drug use this means reconnecting with its own past and with criminology more generally, both of which have much to tell us about our present and likely future. If, as Karl Marx (1864) claimed, history repeats itself, first as tragedy, second as farce, then perhaps the tragedy is that our current predicament was all too predictable. By implication, it is only by learning from past failures that we can hope to avoid straying into the realms of farce.

Technical Appendix

This appendix augments the methodology chapter by providing further details about the analysis. Part one concentrates on the multivariate procedures and begins by explaining how these procedures were used and how the results should be interpreted. For each survey, the variables are described and the results are presented in summary form. Part two provides additional information about some of the bivariate analysis presented in Chapter 4.

Part One: Multivariate Analysis

Building the models

The multivariate analysis was based on probability modelling, which is an extension of classic linear regression and is appropriate when the dependent variable has a categorical structure (Futing Liao, 1994). Like other forms of regression, probability models estimate the effects of various independent variables on a single dependent variable. During the course of this study a series of models were developed to examine various forms of illicit drug use. The dependent variable for each model was based on a specific drug or a group of drugs, with separate models being developed for cannabis, the hallucinants and cocaine. For each model distinctions were drawn between abstinence (never used), past use (used but not in the last 12 months) and recent use (used in the last 12 months). Although these categories had a meaningful order, ordinal probability models were not considered to be appropriate. One of the key assumptions of such models is that the effects of an independent variable are constant: that is, they do not vary across the categories of the dependent variable. Such an assumption was considered to be inappropriate for this study and an alternative approach was used. Multinomial logit model make fewer assumptions than ordinal models and allow for the possibility that the effects of an independent variable might vary across the categories of the dependent variable.

Multinomial logit model are based on a transformation of the dependent variable known as the log odds. Odds express the probability of two possible outcomes in relation to one

another - such as the probability of never having used drugs versus the probability of having used them in the last 12 months - and log odds are produced by taking natural logarithms of the odds. This transformation is required because it ensures that the model does not generate estimated probabilities outside the range zero to one (Altman, 1991). Multinomial logit models require that one of the categories of the dependent variable is selected as a reference, against which the likelihood of being in the remaining categories can be compared. In all cases, never used was chosen as the reference category and the effects associated with the independent variables were estimated in relation to the two remaining categories. The first set of effects was based on the odds of past use versus never used and the second set of effects was based on the odds of recent use versus never used.

Most of the independent variables included in the analysis had a categorical structure and were entered into the model as a series of dummy variables, where one indicated the presence of a given characteristic and zero indicated its absence. For such variables a reference category is required, against which the effects associated with the other categories can be compared.

The multivariate models were developed in a series of stages. A preliminary stage was established during which variables were entered into the model if they were involved in the weighting of the data (e.g. whether or not the household was based in an inner city area) or indicated something about the process of the survey interview (e.g. who else, if anybody, was present during the interview). This was followed by the main body of the analysis, which was divided into four main stages. Demographic variables were entered into the model during the first stage, followed by variables relating to deprivation and area of residence, the life-course and lifestyle. The lifestyle stage was further subdivided so that variables not directly related to the consumption of alcohol and tobacco were entered first, followed by those that were directly related to these forms of consumption.

At each stage, the most parsimonious model was developed. All the variables that were relevant to a given stage were initially included in the model, alongside any that had been

retained from previous stages, and non-significant variables were then excluded one by one. Decisions to include or exclude variables were based on probability values, which were multiplied by the appropriate design factor to take account of the error associated with the survey design (see Table 44). Variables were excluded if they did not meet the criteria for significance on both sets of effects. Initially, at each step, the variable with the largest single probability value was excluded, providing that the value on both sets of effects was greater than 0.1. Once this process had been exhausted, variables with probability values of between 0.05 and 0.1 on both sets of effects were then excluded, starting with that which had the largest single probability value.

Although non-significant variables were generally excluded from the models, this was not always the case. Where one category of a given variable did not meet the criteria for inclusion it was combined with another category of the same variable if:

1. The non-significant category was associated with a sizeable effect (the absolute value of the regression co-efficient was greater than 0.4).
2. The non-significant category was closer in its effect to the other (significant) category than it was to the reference.
3. The 95 per cent confidence interval for the non-significant category included the effect associated with the other (significant) category or vice versa.
4. And, it was conceptually meaningful to combine the categories.

Once the most parsimonious model had been developed at each stage, each of the variables that had been excluded in previous stages were re-entered individually to assess whether they now met the criteria for inclusion. Analyses proceeded iteratively in this way until all significant variables were included in the model.

Interpreting the models

While probability values indicate whether the effects associated with a given variable are statistically significant they provide little information about the nature of the effect. In

multinomial logit models, as in other forms of generalized linear model, the size and direction of an effect are summarised by the regression coefficient. The direction of an effect is evident from the sign in front of the coefficient: a negative coefficient indicates an inverse relationship, whereby an increase in the independent variable is associated with a decrease in the dependent variable, whereas a positive coefficient (where no sign is given) indicates that an increase in the independent variable is associated with an increase in the dependent variable. Regression coefficients provide very specific information about the size of the effect, indicating the change in the dependent variable associated with a one unit increase in the independent variable. Where the independent variable is a categorical variable a one unit increase means moving from the reference category to the category of interest. Though conventionally described as an ‘effect’, the change in the dependent variable associated with a one unit increase in the independent variable does not necessarily signify a causal relationship.

Table 44
Design factors for 1998 BCS and 1998/9 YLS

	BCS	YLS
Cannabis	1.44	1.40
Hallucinants	1.30	1.37
Cocaine	1.29	1.60

Source: Hales and Stratford, 1999; Stratford and Roth, 1999

Interpreting regression coefficients in a multinomial logit model is complicated by the fact that the dependent variable is defined in terms of log odds, which are not immediately meaningful. To provide greater clarity, both sides of a model can be exponentiated (that is, the antilogarithm can be taken to the base e) so that the regression coefficient indicates the effect of a given variable on the odds. More complex calculations can be carried out which allow the effects of each variable to be expressed in terms of probabilities, which has the advantage of being easily understood (see Futing Liao, 1994).

In logit models probabilities are estimated from regression scores, which are, in turn, generated from regression coefficients. A particular profile is selected, based on the independent variables included in the model, and regression coefficients are multiplied by the set of values which reflect this profile. By varying the multipliers, the effect of any given variable may be isolated, providing that the effects of all other independent variables are held constant (this is achieved by using the mean score for each variable as the multiplier). Suppose, for example, we are interested in the effect of sex, where male is denoted by the value of zero and female by the value of one. The effects of all other variables are held constant and two sets of scores are calculated: one for males, where the effect of sex is multiplied by zero, and one for females, where the effect of sex is multiplied by one. Scores are generated for each set of effects (i.e. past use versus abstinence and recent use versus abstinence) and these scores are then exponentiated and converted into probabilities using the established formula (see Futing Liao, 1994; STATA, 1999).

For the models to be meaningful, they must first fit the data. That is, the independent variables included in the model must predict the response variable more accurately than the model that includes only the intercept. The difference between these models may be assessed on the basis of the likelihood ratio statistic, which has an approximately chi-square distribution. Judged on these criteria, all the models that were developed for this study fitted the data significantly better than the model with just the intercept ($p < 0.01$ at each stage of each model). Another statistic, known as Psuedo R^2 , summarises the goodness of fit of the model and, though not entirely satisfactory, this statistic has been cited in the summaries given below. The adequacy of the models may also be assessed by estimating the probability of the various outcomes based on a statistically average set of characteristics and comparing the resulting estimates with the observed probabilities. Such comparisons indicated that the models tended to under-predict the probability of recent drug use. In illustrating the results of the multivariate analysis adjustments have been made to take account of this apparent bias.

BCS models

Variables were included in the multivariate models in the following format.

Preliminary stage

Inner city

- Lives in inner city area (reference)
- Does not live in inner city area

Number of adults in household (continuous variables)

Completed

- Respondent completed questionnaire on own (reference)
- Respondent discussed questionnaire with someone else
- Interviewer completed questionnaire

Others present during the self-completion exercise

- Nobody else present (reference)
- Spouse or partner present
- Other adult household member present
- Child household member present
- Non-household member present

Stage one: Demographics

Age

- 16-17 years
- 18-22 years
- 23-26 years
- 27-30 years (reference)

Sex

- Male (reference)
- Female

Age * Sex (interaction terms between age and sex)

Ethnicity

- White (reference)
- Black Caribbean
- Black African
- Indian
- Pakistani and Bangladeshi
- Other

Note: Pakistani and Bangaldeshi were combined because they contained a small number of cases and because they share a similar religious and socio-economic profile (Modood *et al*, 1997).

Social class

- Professional,
- Managerial/ technical
- Skilled non-manual
- Skilled manual
- Partly skilled
- Unskilled (reference)
- Unclassified

Note: respondents were classified according to their current or most recent job.

Parents' social class

- Professional or managerial/technical (reference)
- Skilled non-manual
- Skilled manual
- Partly skilled or unskilled
- Unclassified

Note: respondents were classified according to the current or last job of the head of the household. The BCS did not include direct questions about parental occupation and this information could only be retrieved for respondents who were living in a household headed by one of their parents. Respondents who were living independently were included in the unclassified category. Some categories had to be combined because the number of cases was insufficient to support meaningful analysis: the BCS contained only 24 cases where the head of the household was professional and 36 cases where he/she was unskilled.

Household income

- Less than £10,000 (reference)
- £10,000 to £14,999
- £15,000 to £19,999
- £20,000 to £29,999
- £30,000 or more
- Unknown

Note: these variables were entered into the model in a way that distinguished between those who lived with their parents and those who did not.

Health status (self-assessed)

- Very good (reference)
- Good
- Fair to very bad

Note: the categories fair to very bad were combined because very few respondents felt their health was bad or very bad.

Disability status

- Not disabled (reference)
- Disabled but not limiting
- Disabled, limiting

Stage two: Deprivation / area of residence

To make this stage more manageable variables were entered into the model in two groups. Those that measured individual or household characteristics were entered first, followed by those that measured neighbourhood or area characteristics.

Unemployment

- Unemployed
- Otherwise marginalised from the labour market
- Neither of the above (reference)

Note: respondents were considered to be unemployed if they had not done any paid work in the previous week but had been looking for work. Those who had not done any paid work and had not been looking for work were considered to be otherwise marginalised from the labour market providing that they were not studying full-time or looking after the home or family. This category included those who were permanently sick, waiting to take up a job, intending to work but were temporarily sick, on a government scheme, doing unpaid work or doing something else.

Qualifications

- Has formal qualifications (reference)
- Not have formal qualifications

Note: respondents who were 16 years of age may not have reached the official school leaving age and were included in the no qualifications category only if they had no qualifications and appeared to have left school.

Financial difficulty

- Not living in a low income household (reference)
- Living in low income household experiencing little financial difficulty
- Living in low income household experiencing moderate financial difficulty
- Living in low income household experiencing extreme financial difficulty

Note: Low income households were those with an annual income below £10,000 per year. This figure approximated to 50 per cent of the average household income (after housing costs) which is a commonly used measure of the poverty line. For low income households, financial difficulty was assessed on the basis of their ability to pay an unexpected bill of a specified amount: those that would find it impossible to pay a bill of £100 or would find it impossible or problematic to pay a bill of £20 were considered to be in considerable

financial difficulty; those that did not meet these criteria but would find it problematic to pay a bill of £100 were considered to be in some financial difficulty; and those that would not have a problem paying a bill of £100 were considered to be in little financial difficulty.

Region

- North (reference)
- Yorkshire/Humberside
- North West
- East Midlands
- West Midlands
- Wales
- East Anglia
- South East
- South West
- Greater London

Type of neighbourhood

- Thriving (reference)
- Expanding
- Rising
- Settling
- Aspiring
- Striving

Note: neighbourhoods were rated according to A Classification of Regional Neighbourhoods or ACORN for short. This system was developed by CACI Ltd as a marketing tool and provides a geographical and demographic classification of local areas (see: www.caci.co.uk). Each postcode is allocated to one of 54 neighbourhood types, which can then be grouped into 17 distinct categories or the six major categories shown above. The striving category is made up almost exclusively of deprived neighbourhoods (www.odpm.gov.uk).

Inner city (already entered in the preliminary stage).

Community cohesiveness

- People go their own way (reference)
- Mixed
- People help each other

Note: respondents were asked: In general what type of neighbourhood would you say you live in? Would you say it is a neighbourhood in which people do things together and try to help each other or one in which people mostly go their own way?

Incivility

- None (reference)
- Low

- Moderate
- High

Note: respondents were asked to rate their local area in relation to a range of possible problems: noisy neighbours or loud parties; teenagers hanging around on the streets; drunks or tramps on the streets; rubbish and litter lying about; vandalism, graffiti and deliberate damage to property; racially motivated attacks; and people using or dealing in drugs. The number of issues that were considered to be a very big problem or a fairly big problem were added together to create a single index of neighbourhood incivility and this index was then divided into the four categories shown above: none (no incivilities); low (one or two issues were considered problematic); moderate (three or four issues were considered problematic); and high (five or more issues were considered problematic).

Life-course

Work status (reference)

- Working full time
- Working part time
- Studying
- Looking after the home
- Unemployed
- Other

Domestic circumstances

- Married with children (reference)
- Married, no children
- Separated, divorced or widowed (with or without children)
- Cohabiting with children
- Cohabiting, no children, buying own home
- Cohabiting, no children, not buying own home
- Single with children
- Single, no children, buying own home
- Single, no children, renting
- Single, no children, living with parents

Note: the number of separated, divorced or widowed respondents who did not have children was fairly small (n=40) and the multivariate models indicated that this position was very similar in its effects to being separated, divorced or widowed with children. As a result, these categories were combined into a single category. The categories 'single, no children, private renting' and 'single, no children, social renting' were also combined into a single category because they were similar in their effects and because the distinction between them was not considered crucial.

Domestic * Sex (interaction terms between domestic circumstances and sex)

Note: no interaction term was included for single, with children because very few men were

in this situation (282 out of 289 cases were female).

Lifestyle

Evenings out in the previous week

- Six or seven
- Four or five
- Two or three - weekdays and weekends
- Two - weekend only
- Two - weekdays only
- One – weekend
- One - weekday
- None (reference)

Note: weekdays were defined as Monday to Thursday; weekends as Friday to Sunday

Frequency with which usually go out after dark

- Once a week (reference)
- At least once a fortnight
- At least once a month
- Less than once a month
- Never

Evenings visited pub in last month

- Almost every day
- About three times a week
- Once or twice a week
- Less than once a week
- None (reference)

Visits to a nightclub or disco in last month

- At least once a week
- Less than once a week
- None (reference)

Drinking style

- Habitual heavy drinker
- Habitual light drinker
- Frequent heavy binger
- Frequent binger
- Frequent moderate drinker
- Frequent light drinker
- Regular binger
- Regular moderate drinker
- Regular light drinker

- Occasional moderate drinker
- Occasional light drinker
- Non-drinker (reference)

Note: see main text for details

Table 45
Cannabis life-course model (BCS)

	Past use versus never used		Recent use versus never used	
	Coefficient	p	Coefficient	p
<i>Age (27-30)</i>				
16-17	0.23	ns	1.13	**
18-22	0.36	*	0.92	**
23-26	0.03	ns	0.49	**
<i>Sex (Male)</i>				
Female	-0.52	**	-1.42	**
<i>Ethnicity (White)</i>				
Black Caribbean	-1.42	*	-0.29	ns
Black African	-2.51	*	-1.94	**
Indian, Pakistani or Bangladeshi	-0.68	ns	-0.93	*
<i>Social class (Unskilled)</i>				
Managerial or technical	0.37	*	0.42	*
Skilled manual	0.36	*	0.15	ns
None given	-0.37	ns	-0.44	*
<i>Parents' social class (Prof, managerial or technical)</i>				
Skilled non-manual	0.71	*	-0.09	ns
None given	0.70	*	0.34	ns
<i>Household income (< £10,000)</i>				
£20,000-29,000	0.04	ns	-0.01	ns
£30,000 or more	0.12	ns	-0.06	ns
Not given	-0.93	*	-0.47	ns
£20,000-29,000 * living w. parents etc	0.89	*	0.21	ns
£30,000 or more * living w. parents etc	1.29	*	0.83	*
Not given * living w. parents etc	1.39	*	0.51	ns
<i>Health status (Very good)</i>				
Good	0.32	**	0.38	**
Fair to very bad	0.19	ns	0.54	**
<i>Region (North)</i>				
East Midlands	0.41	*	0.18	ns
South East	0.36	*	0.21	ns
London	0.19	ns	0.49	**
<i>Type of neighbourhood (Thriving)</i>				
Expanding	-0.26	ns	-0.63	**
Rising	0.14	ns	0.53	**
<i>Economic status (Working full-time)</i>				
Unemployed or other	0.31	ns	0.51	**

/cont...

	Past use versus never used		Recent use versus never used	
	Coefficient	p	Coefficient	p
<i>Domestic (Married with children)</i>				
Divorced, separated or widowed	0.30	ns	1.32	**
Cohabiting with children	0.69	**	0.98	**
Cohabiting, no children, buying own home	0.53	*	1.14	**
Cohabiting, no children, not buying home	0.62	*	1.71	**
Single with children	1.08	**	2.19	**
Single, no children, buying own home	-0.14	ns	0.92	**
Single, no children, renting	-0.23	ns	1.28	**
Single, no children, living with parents	-0.49	ns	0.56	ns
Single, no children, buying own home * sex	0.94	*	0.94	*
Single, no children, renting * sex	0.45	ns	0.67	*
Single, no children, living with parents * sex	0.06	ns	0.92	**
<i>Others present (No-one else present)</i>				
Child household member present	-0.36	ns	-0.65	*
<i>Completed (self without discussion)</i>				
Completed by interviewer or discussed with someone else	-0.26	ns	-0.87	**
Constant	-1.95	**	-2.47	**

n=2,753

** = p < 0.01

* = < 0.05

ns = p > 0.05

Pseudo R² = 0.11

Note: non-significant variables have been included in the model if they were part of a statistically significant interaction effect.

Table 46
Cannabis lifestyle model (BCS)

	Past use versus never used		Recent use versus never used	
	Coefficient	p	Coefficient	p
<i>Age (27-30)</i>				
16-17	0.41	ns	1.52	**
18-22	0.36	*	0.88	**
23-26	0.07	ns	0.46	**
<i>Sex (Male)</i>				
Female	-0.30	ns	-0.97	**
<i>Ethnicity (White)</i>				
Black Caribbean	-1.18	*	0.17	ns
Black African	-2.32	*	-1.40	*
<i>Social class (Unskilled)</i>				
Managerial or technical	0.38	*	0.40	*
Skilled manual	0.47	*	0.23	ns
<i>Parents' social class (Prof, managerial or technical)</i>				
Skilled non-manual	0.76	*	-0.07	ns
None given	0.62	*	0.26	ns
<i>Household income (< £10,000)</i>				
£20,000-29,000	-0.02	ns	-0.07	ns
£30,000 or more	-0.02	ns	-0.36	ns
Not given	-0.85	ns	-0.40	ns
£20,000-29,000 * living w. parents etc	0.85	*	0.07	ns
£30,000 or more * living w. parents etc	1.26	*	0.76	*
Not given * living w. parents etc	1.29	*	0.43	ns
<i>Health status (Very good)</i>				
Good	0.30	*	0.35	**
Fair to very bad	0.29	ns	0.68	**
<i>Region (North)</i>				
South East	0.35	*	0.28	ns
London	0.24	ns	0.67	**
<i>Type of neighbourhood (Thriving)</i>				
Expanding	-0.24	ns	-0.69	**
Rising	0.09	ns	0.45	*
<i>Community cohesiveness (Go own way)</i>				
Help each other	-0.32	*	-0.26	ns
<i>Economic status (working full-time)</i>				
Unemployed	0.49	ns	0.61	*
Other	0.31	ns	0.67	*

/cont...

	Past use versus never used		Recent use versus never used	
	Coefficient	p	Coefficient	p
<i>Domestic (married with children)</i>				
Divorced, separated or widowed	0.26	ns	1.14	**
Cohabiting with children	0.66	**	0.91	*
Cohabiting, no children, buying own home	0.42	ns	0.91	**
Cohabiting, no children, not buying home	0.52	ns	1.58	**
Single with children	0.93	**	1.88	**
Single, no children, buying own home	-0.29	ns	0.49	ns
Single, no children, renting	-0.25	ns	1.01	**
Single, no children, living with parents	-0.65	ns	0.27	Ns
Single, no children, buying own home * sex	0.86	ns	0.73	ns
Single, no children, living with parents * sex	-0.11	ns	0.59	*
<i>Evenings out in last week (none)</i>				
4-5 evenings	0.11	ns	0.46	*
<i>Pub (evenings in last month)</i>				
1-2 a week	0.08	ns	0.45	**
About 3 times a week	0.28	ns	0.73	**
Almost every day	0.58	*	1.16	**
<i>Drinking style (non-drinker)</i>				
Occasional or regular light drinker	0.70	*	0.12	ns
Occasional moderate drinker	0.88	*	0.59	ns
Regular moderate drinker	0.73	*	0.62	*
Regular binger	1.30	**	0.97	**
Frequent light drinker	1.32	**	0.95	**
Frequent moderate drinker	1.20	**	1.10	**
Frequent binger	1.15	**	1.37	**
Frequent heavy binger	1.66	**	1.65	**
Habitual light drinker	1.22	**	1.53	**
Habitual heavy drinker	1.22	**	1.52	**
<i>Others present (no-one else present)</i>				
Child household member present	-0.35	ns	-0.60	*
<i>Completed (self without discussion)</i>				
Completed by interviewer or discussed with someone else	-0.17	ns	-0.71	*
Constant	-2.97	**	-3.60	**

n=2,722

** = p < 0.01

* = < 0.05

ns = p > 0.05

Pseudo R² = 0.14

Note: 1) non-significant variables have been included in the model if they were part of statistically significant interaction effect; 2) single, no children, home owner * sex has been left in the model because it was very close to meeting the criteria for inclusion (p=0.050 on never used versus used but not in the last 12 months).

Table 47
Hallucinants life-course model (BCS)

	Past use versus never used		Recent use versus never used	
	Coefficient	P	Coefficient	p
<i>Age (27-30)</i>				
16-17	-0.20	ns	0.90	*
18-22	0.42	*	1.00	**
23-26	0.28	*	0.65	**
<i>Sex (Male)</i>				
Female	-0.89	**	-1.06	**
<i>Ethnicity (White)</i>				
Black Caribbean	-0.28	ns	-2.38	*
Black African, Indian, Pakistani or Bangladeshi	-1.38	**	-1.34	*
<i>Social class (Unskilled)</i>				
Managerial or technical	0.40	*	0.08	ns
None given	-0.76	**	-0.71	*
<i>Household income (< £10,000)</i>				
£30,000 or more	-0.39	*	-0.15	ns
£30,000 or more * living w. parents etc	1.03	**	0.72	ns
<i>Financial difficulty (Not low-income household)</i>				
Extreme difficulty	0.34	*	0.47	*
<i>Health status (Very good)</i>				
Good	0.31	**	0.38	*
Fair to very bad	0.28	ns	0.77	**
<i>Region (North)</i>				
East Anglia	-1.02	*	0.07	ns
<i>Type of neighbourhood (Thriving)</i>				
Expanding	-0.13	ns	-0.90	**
<i>Community cohesiveness (Go own way)</i>				
Help each other	-0.05	ns	-0.74	**
<i>Economic status (working full-time)</i>				
Unemployed or other	0.39	*	0.16	ns
<i>Domestic (Married with children)</i>				
Married no children	-0.68	*	0.26	ns
Divorced, separated or widowed	-0.43	ns	1.53	**
Cohabiting with children or cohabiting, no children, buying own home	0.25	ns	1.78	**

/cont...

	Past use versus never used		Recent use versus never used	
	Coefficient	p	Coefficient	p
<i>Domestic (Married with children)</i>				
Cohabiting, no children, not buying own home	0.41	ns	1.67	**
Single with children	0.81	**	1.67	**
Single, no children, homeowner	-0.27	ns	1.81	**
Single, no children, renting	0.21	ns	1.81	**
Single, no children, living with parents	-0.68	*	0.77	ns
Cohabiting with children or cohabiting no children, not buying own home * sex	-0.01	ns	-2.09	**
Single, no children, buying own home * sex	0.87	*	-0.34	ns
Single, no children, living with parents * sex	0.66	*	0.48	ns
Constant	-1.22	**	-3.32	**

n=2,734

** = p < 0.01

* = < 0.05

ns = p > 0.05

Pseudo R² = 0.10

Note: non-significant variables have been included in the model if they were part of a statistically significant interaction effect.

Table 48
Hallucinants lifestyle model (BCS)

	Past use versus never used		Recent use versus never used	
	Coefficient	P	Coefficient	p
<i>Age (27-30)</i>				
16-17	-0.02	ns	1.16	**
18-22	0.34	*	0.76	**
23-26	0.26	ns	0.53	*
<i>Sex (Male)</i>				
Female	-0.53	**	-0.85	**
<i>Ethnicity (White)</i>				
Black Caribbean, Black African, Indian, Pakistani or Bangladeshi	-0.44	ns	-1.13	*
<i>Health status (Very good)</i>				
Good	0.33	**	0.41	*
Fair to very bad	0.36	ns	0.85	**
<i>Social class (Unskilled)</i>				
Managerial or technical	0.44	**	0.05	ns
None given	-0.61	*	-0.18	ns
<i>Household income (< £10,000)</i>				
£30,000 or more	-0.51	**	-0.35	ns
£30,000 or more * living w. parents etc	1.02	**	0.71	ns
<i>Financial difficulty (Not low-income household)</i>				
Extreme difficulty	0.36	*	0.58	*
<i>Region (North)</i>				
East Anglia	-0.93	*	0.23	ns
<i>Type of neighbourhood (Thriving)</i>				
Expanding	-0.14	ns	-1.06	**
<i>Community cohesiveness (Go own way)</i>				
Help each other	-0.12	ns	-0.80	**
<i>Economic status (working full-time)</i>				
Student	-0.23	ns	-0.77	*
Unemployed or other	0.45	*	0.20	ns
<i>Domestic (Married with children)</i>				
Married no children	-0.65	*	0.28	ns
Divorced, separated or widowed	-0.65	ns	1.13	*
Cohabiting with children or cohabiting, no children, buying own home	0.29	ns	1.60	**

/cont...

	Past use versus never used		Recent use versus never used	
	Coefficient	p	Coefficient	p
<i>Domestic (Married with children)</i>				
Cohabiting, no children, not buying home	0.34	ns	1.49	**
Single with children	0.61	**	1.29	**
Single, no children, buying own home	-0.12	ns	1.05	*
Single, no children, renting	-0.09	ns	1.16	**
Single, no children, living with parents	-0.62	*	0.45	ns
Cohabiting with children or cohabiting no children, buying own home * sex	-0.20	ns	-2.06	**
<i>Pub (No evenings during last month)</i>				
Once or twice a week	-0.11	ns	0.53	*
About three times a week	0.57	**	0.75	**
Almost every day	0.38	ns	1.18	**
<i>Club (No evenings during last month)</i>				
Less than once a week	0.14	0.38	0.49	**
Once a week or more	0.31	0.16	1.03	**
<i>Drinking style (Non-drinker)</i>				
Regular moderate drinker	0.62	*	0.10	ns
Regular binger	0.96	**	0.74	*
Frequent light drinker	0.52	**	0.13	ns
Frequent moderate drinker	0.75	**	0.58	*
Frequent binger	0.73	**	0.54	*
Frequent heavy binger	1.33	**	0.99	**
Habitual heavy drinker	0.85	**	0.76	*
Constant	-1.96	**	-4.01	**

n=2,730

** = p < 0.01

* = < 0.05

ns = p > 0.05

Pseudo R² = 0.14

Note: non-significant variables have been included in the model if they were part of a statistically significant interaction effect.

Table 49
Cocaine life-course model (BCS)

	Past use versus never used		Recent use versus never used	
	Coefficient	p	Coefficient	p
<i>Age (27-30)</i>				
23-26	0.88	**	0.22	ns
23-26 * sex	-1.25	*	0.85	ns
<i>Sex (Male)</i>				
Female	-0.40	ns	-3.30	**
<i>Ethnicity (White)</i>				
Black Caribbean, lack African, Indian, Pakistani or Bangladeshi	-0.80	ns	-2.35	*
<i>Financial difficulty (Not low-income household)</i>				
Extreme difficulty	0.64	*	0.49	ns
Little difficulty	1.17	*	0.18	ns
<i>Region (North)</i>				
East Anglia	0.83	ns	1.67	**
South East	0.36	ns	1.14	**
Greater London	0.56	ns	1.77	**
<i>Type of neighbourhood (Thriving)</i>				
Expanding	-0.70	ns	-2.12	*
<i>Economic status (working full-time)</i>				
Other	0.85	*	-0.57	ns
<i>Domestic (Married with children)</i>				
Cohabiting, no children, buying own home	0.43	ns	1.96	**
Cohabiting, no children, not buying home	0.83	ns	1.72	*
Single with children	0.70	ns	2.16	*
Single, no children, buying own home or renting	0.44	**	1.84	**
Single, no children, living with parents	-0.05	*	0.78	ns
Single, no children, buying home or renting * sex	-0.23	ns	2.34	**
Single, no children, living with parents * sex	0.06	ns	2.95	**
Constant	-3.87	**	-4.99	**

n=2,788

** = p < 0.01

* = < 0.05

ns = p > 0.05

Pseudo R² = 0.14

Note: non-significant variables have been included in the model if they were part of a statistically significant interaction effect.

Table 50
Cocaine lifestyle model (BCS)

	Past use versus never		Recent use versus never	
	Coefficient	p	Coefficient	P
<i>Age (27-30)</i>				
23-26	0.90	**	0.29	ns
23-26 * sex	-1.22	*	0.73	ns
<i>Sex (Male)</i>				
Female	-0.27	ns	-2.82	**
<i>Financial difficulty (Not low-income household)</i>				
Extreme difficulty	0.66	*	0.66	ns
Little difficulty	1.22	*	0.36	ns
<i>Region (North)</i>				
East Anglia	1.07	*	2.15	**
South East	0.43	ns	1.23	**
Greater London	0.59	ns	1.88	**
<i>Type of neighbourhood (Thriving)</i>				
Expanding	-0.76	ns	-2.19	*
<i>Economic status (working full-time)</i>				
Other	0.85	*	-0.56	ns
<i>Domestic (Married with children)</i>				
Cohabiting, no children, buying own home or not	0.65	ns	1.73	**
Single with children	0.67	ns	1.92	ns
Single, no children, buying own home or renting	0.23	ns	1.45	*
Single, no children, living with parents	-0.14	ns	0.53	ns
Single, no children, buying home or renting * sex	0.30	ns	1.94	*
Single, no children, living with parents * sex	-0.02	ns	2.57	**
<i>Pub (No evenings during last month)</i>				
Almost every day	0.76	ns	0.81	*
<i>Club (No evenings during last month)</i>				
Once a week or more	0.28	ns	1.05	**
<i>Drinking style (Non-drinker)</i>				
Regular or frequent moderate drinker	0.03	ns	1.17	**
Frequent binger	0.04	ns	1.22	**
Frequent heavy binger	0.99	**	1.54	**
Habitual light drinker	0.40	ns	1.80	**
Habitual heavy drinker	0.96	*	1.21	*
Constant	-4.24	**	-6.27	**

n=2,783

** = p < 0.01

* = < 0.05

ns = p > 0.05

Pseudo R² = 0.18

Note: 1) non-significant variables have been included in the model if they were part of a significant interaction effect; 2) 'single with children' has been left in the model because it was very close to meeting the criteria for inclusion (p=0.054 on never used versus used in the last 12 months).

YLS models

Variables were included in the multivariate models in the following format.

Preliminary stage

Inner city

- Lives in inner city area (reference)
- Does not live in inner city area

Number of adults in household (continuous variables)

Others present during the self-completion exercise

- Parent(s) or guardian
- Sibling
- Some other adult
- Some other child
- Someone else

Sample

- Part of core sample (reference)
- Part of booster sample – not high crime area
- Part of booster sample – high crime area

Stage one: Demographics

Age

- 16-17 years
- 18-22 years
- 23-26 years
- 27-30 years (reference)

Sex

- Male (reference)
- Female

Age * Sex (interaction terms between age and sex)

Ethnicity

- White (reference)
- Black Caribbean
- Black African
- Indian
- Pakistani and Bangladeshi
- Other

Note: Pakistani and Bangladeshi were combined because they contained a small number of cases and because they are similar in a number of important respects (Modood *et al*, 1997).

Social class

- Professional,
- Intermediate
- Skilled non-manual
- Skilled manual
- Partly skilled
- Unskilled (reference)
- Unclassified

Note: respondents were classified according to their current or most recent job.

Parents' social class

- Professional (reference)
- Intermediate
- Skilled non-manual
- Skilled manual
- Partly skilled or unskilled

Note: this classification was based on father's or mother's job when the respondent was 15 years old. Where both parents had been working, the highest occupational class was selected. Unskilled was combined with partly skilled because only 31 respondents were included in the former category.

Disposable income

- Less than £20 (reference)
- £20-30
- £31-40
- £41-50
- £51-70
- £71-100
- £101-132
- £133 or more

Note: based on the amount of money respondents had to spend each week once they had paid their rent, mortgage or housing costs and bills.

Stage two: Deprivation / area of residence

To make this stage more manageable variables were entered into the model in two groups. Variables which measured individual or household characteristics were entered before those that measured neighbourhood or area characteristics.

Unemployment

- Currently unemployed (long-term)
- Currently unemployed (not long-term)
- Unemployed in past (long-term) but not now
- Unemployed in past (not long term) but not now
- Never unemployed (reference)

Note: long-term unemployment was defined as that which had lasted for one year or more. Never unemployed refers to those who were not currently unemployed and never had been for more than six months. Respondents who were studying full-time were not asked about past periods of unemployment and were classified as never unemployed.

Qualifications

- Has formal qualifications (reference)
- Not have formal qualifications

Note: respondents who were 16 years of age may not have reached the official school leaving age and were included in the no qualifications category only if they had no qualifications and appeared to have left school.

Financial difficulty

- Not low income (reference)
- Low income, no apparent difficulty
- Low income, slight difficulty
- Low income, moderate difficulty
- Low income, extreme difficulty
- Low income, very extreme difficulty

Note: low income was defined as less than £20 a week after rent, mortgage or housing costs and bills. The proportion of young adults in this category was almost identical to the proportion in the BCS living in a household with an annual income of less than £10,000 (25 per cent compared with 26 per cent). Financial difficulty was assessed on the basis of the number of items that respondents could not afford to buy. Respondents were asked which of the following, if any, do you (and the people you live with) have to go without because you cannot afford them: holiday; somewhere larger to live; personal hobby; eating out; video recorder; records, cassettes or CDs; going out; food for yourself; food for your family; clothes for yourself; clothes for your family; a place to live. Excluding items relating to 'your family' (these items were not relevant to everybody) left a total of ten items. Those who had to go without seven or more of the listed items were considered to be in very extreme difficulty; those who had to go without five or six of the listed items were considered to be in extreme difficulty; those who had to go without three or four of the listed items were considered to be in moderate difficulty; those who had to go without one or two of the listed items were considered to be in slight difficulty; and those who did not have to go without any of the listed items were considered to be in no apparent difficulty.

Parental economic activity

- Both parents economically active or single parent and economically active (reference)
- One parent economically active and other had been in the past
- One parent economically active and other never had been
- Neither parent economically active or one parent and not economically active but had been in the past
- Neither parent economically active or one parent and never had been
- Unclassified

Parental unemployment

- Neither parent had been long-term unemployed or single parent and not been long-term unemployed (reference)
- One parent had been long-term unemployed and one had not
- Both parents had been long-term unemployed or single parent and had been long-term unemployed
- Unclassified

Notes: 1) questions about parental economic activity and parental unemployment asked about the situation when the respondent was 15 years old. 2) In relation to parents, long term unemployment was defined as that which lasted two-years or more. 3) Parental unemployment and parental economic inactivity were closely related to one another and only one of these variables was included per model. Each variable was entered into the model separately and that which was associated with the most powerful model, as indicated by the pseudo R^2 , was retained.

Region

- North (reference)
- Yorkshire/Humberside
- North West
- East Midlands
- West Midlands
- Wales
- East Anglia
- South East
- South West
- Greater London

Type of neighbourhood

- Thriving (reference)
- Expanding
- Rising
- Settling
- Aspiring
- Striving

Note: see note for BCS.

Inner city (already entered in the preliminary stage).

Stage three: Life-course

Work status (reference)

- Working full time
- Working part time
- Studying
- Looking after the home
- Unemployed
- Other

Domestic circumstances

- Married with children (reference)
- Married, no children
- Separated, divorced or widowed (with or without children)
- Cohabiting with children
- Cohabiting, no children, buying own home
- Cohabiting, no children, not buying home
- Single with children
- Single, no children, buying own home
- Single, no children, renting
- Single, no children, living with parents

Note: as with the BCS, the number of separated, divorced or widowed respondents who did not have children was fairly small ($n=26$) and the multivariate models indicated that this position was very similar in its effects to being separated, divorced or widowed with children. As a result, these categories were combined into a single category. The categories 'single, no children, private renting' and 'single, no children, social renting' were also combined into a single category because they were similar in their effects and because the distinction between them was not considered to be crucial.

Domestic * Sex (interaction terms between domestic circumstances and sex)

Note: all possible interaction effects between domestic situation and sex were included in the analysis.

Stage four: Lifestyle

Religiosity

- Not religious (reference)
- Religious but not actively so
- Actively religious

Note: respondents were asked 'what, if any, is your religion or church?' and were given a range of options including Buddhism, Islam, Sikhism, Hinduism, Christianity and none.

They were also asked whether they had 'attended a religious service, meeting or some other religious activity' in the last month. Respondents were considered not at all religious if they did not identify with a particular religion; as religious but not actively so if they identified with a particular religion but had not recently attended a service; and as actively religious if they identified with a particular religion and had recently attended a service.

Number of evenings usually go out

- Every evening (reference)
- About every other evening
- At least once a week
- At least once a fortnight
- At least once a month
- Less than once a month
- Never

Time spent with friends

- Very often (reference)
- Often
- Occasionally
- Rarely
- Never

Note: separate questions were asked about time spent with a group of friends and a particular close friend. These measures were strongly associated with one another and only one was included in each model - time spent with a close friend was included in all the models because it was a consistently more powerful predictor than time spent with a group of friends (as indicated by the psuedo R^2).

Street

- Hung around high street, town or city centre during the last month
- Not hung around high street, town or city centre during the last month (reference)

Pub / Club

- Been to a pub and a nightclub, party, dance or disco in the last month
- Been to a nightclub etc but not to a pub in the last month
- Been to a pub but not a nightclub etc in the last month
- Not been to a pub or nightclub etc in the last month (reference)

Drinking style

- Habitual heavy drinker (reference)
- Habitual moderate drinker
- Frequent very heavy binger
- Frequent heavy binger
- Frequent binger
- Frequent moderate drinker

- Regular moderate drinker
- Occasional moderate drinker
- Non-drinker - desister
- Non-drinker - abstainer

Note: non-drinkers – abstainer was initially selected as the reference but did not provide a stable comparison group (the standard errors were large) and was consequently replaced by regular heavy drinkers.

Frequency of drunkenness in the last year

- At least once a week
- Several times a month
- Once or twice a month
- Every couple of months
- Less often
- Not at all (reference).

Note: the YLS also included a measure of how frequently respondents had been hungover in the last year. Frequency of drunkenness was used as the preferred measure because it was consistently associated with the most powerful model, as indicated by the psuedo R^2 .

Smoking habits

- Moderate to heavy smoker
- Light smoker
- Occasional smoker
- Ex-smoker
- Experimenter
- Abstainer (reference)

Note: moderate to heavy smokers smoked every day or more than 10 cigarettes a week; light smokers smoked between one and ten cigarettes a week; occasional smokers smoked, but not every week; ex-smokers used to smoke, but do not anymore; experimenters only ever smoked once or twice; and abstainers had never smoked.

Age first drank or smoked

- Less than ten years old (reference)
- 10-13 years old
- 14-15 years old
- 16 years or older / never

Note: those who had never drunk or smoked were initially set up as a distinct category, but the models could not estimate the effects associated with this category because no-one in it had ever used cannabis, the hallucinants or cocaine. As a result ‘never having smoked or drunk’ was combined with the ‘first drunk or smoked when 16 years or older’ category to form a non-starter/late starter category.

Table 51
Cannabis life-course model (YLS)

	Past use versus never used		Recent use versus never used	
	Coefficient	P	Coefficient	p
<i>Age (27-30)</i>				
16-17	-0.42	ns	0.49	**
18-22	0.09	ns	0.74	**
23-26	0.13	ns	0.30	*
<i>Sex (Male)</i>				
Female	-0.31	**	-0.65	**
<i>Ethnicity (White)</i>				
Black Caribbean	-0.92	*	-1.08	**
Black African	-2.46	*	-1.37	*
Indian	-1.32	**	-1.98	**
Pakistani or Bangladeshi	-2.13	**	-2.01	**
Other	-0.41	ns	-0.66	*
<i>Social class (Unskilled)</i>				
Intermediate	0.34	*	0.05	ns
<i>Parents' social class (Professional)</i>				
Intermediate or skilled non-manual	-0.15	ns	-0.49	*
Skilled manual	-0.47	ns	-0.60	**
Partly skilled or unskilled	-0.31	ns	-0.76	**
Unclassified	-0.23	ns	-0.61	**
<i>Unemployment (never unemployed)</i>				
Currently unemployed (long-term)	0.13	ns	0.54	*
Currently unemployed (not long-term)	0.16	ns	0.55	*
Unemployed in past (long-term) but not now	0.27	ns	0.49	**
Unemployed in past (not long term) but not now	0.43	*	0.29	ns
<i>Parental unemployment (neither parent etc)</i>				
Both parents or single parent long term unemployed	0.48	*	-0.10	ns
<i>Financial difficulty (Not low-income household)</i>				
No apparent difficulty	-0.29	ns	-0.68	**
Slight difficulty	-0.63	**	-0.45	*
No information	-0.41	ns	-0.97	*
<i>Region (North)</i>				
Wales	-0.14	ns	-0.57	**
<i>Type of neighbourhood (Thriving)</i>				
Rising	0.26	ns	0.47	**
<i>Economic status (working full-time)</i>				
Other	0.88	**	1.04	**

/cont...

	Past use versus never used		Recent use versus never used	
	Coefficient	p	Coefficient	p
<i>Domestic (Married with children)</i>				
Divorced, separated or widowed	0.10	ns	0.76	*
Cohabiting with children	0.46	*	0.81	**
Cohabiting, no children, buying own home	0.47	ns	1.36	**
Cohabiting, no children, not buying home	0.17	ns	1.80	**
Single with children	0.43		1.63	**
Single, no children, buying own home	0.35	ns	1.25	**
Single, no children, renting	0.25	ns	1.68	**
Single, no children, living with parents	-0.31	ns	1.11	**
<i>High crime area weight (category one)</i>				
Category three	0.31	*	0.34	**
<i>Who else present during interview</i>				
Parents/guardians (versus not present)	-0.65	**	-0.43	**
Other adult (versus not present)	0.06	ns	0.40	**
Other children (versus not present)	-0.11	ns	-0.42	*
Constant	-0.66	*	-1.22	**

n=3,422

** = p < 0.01

* = < 0.05

ns = p > 0.05

Pseudo R² = 0.10

Table 52
Cannabis lifestyle model (YLS)

	Past use versus never used		Recent use versus never used	
	Coefficient	p	Coefficient	p
<i>Age (27-30)</i>				
16-17	-0.74	**	-0.10	ns
18-22	0.05	ns	0.50	**
23-26	0.16	ns	0.40	*
<i>Sex (Male)</i>				
Female	-0.34	**	-0.59	**
<i>Social class (Unskilled)</i>				
Partly skilled	-0.40	*	-0.02	ns
<i>Parents' social class (Professional)</i>				
Intermediate	-0.35	ns	-0.84	**
Skilled non-manual	-0.32	ns	-1.10	**
Skilled manual	-0.72	*	-1.13	**
Partly skilled or unskilled	-0.59	ns	-1.20	**
Unclassified	-0.53	ns	-1.17	**
<i>Qualifications (got qualifications)</i>				
No qualifications	-0.44	*	-0.51	*
<i>Unemployment (never unemployed)</i>				
Unemployed in past (not long-term) but not now	0.41	*	0.29	ns
<i>Parental unemployment (neither parent etc)</i>				
Both parents or single parent long term unemployed	0.55	*	-0.01	ns
<i>Financial difficulty (Not low-income household)</i>				
Extreme or very extreme difficulty	0.51	*	0.58	*
<i>Region (North)</i>				
North West	0.27	ns	0.45	*
Wales	-0.16	ns	-0.69	**
London	0.30	ns	0.39	*
<i>Type of neighbourhood (Thriving)</i>				
Expanding	-0.43	*	-0.42	*
Aspiring	-0.39	*	-0.20	ns
<i>Economic status (working full-time)</i>				
Other	0.90	*	1.21	**
<i>Domestic (Married with children)</i>				
Cohabiting, no children, buying own home	0.43	ns	1.17	**
Cohabiting, no children, not buying home	0.04	ns	1.65	**

/cont...

	Past use versus never used		Recent use versus never used	
	Coefficient	p	Coefficient	p
Single with children	0.09	ns	0.95	**
Single, no children, home owner	0.20	ns	0.86	**
Single, no children, renting	0.00	ns	1.20	**
Single, no children, living with parents	-0.32	ns	0.82	**
<i>Street (not 'hung around' on street in last month)</i> Hung around on street in last month	0.15	ns	0.78	**
<i>Religion (not religious)</i>				
Religious, active in last month	-0.57	**	-0.89	**
Religious, not active in last month	-0.45	**	-0.46	**
<i>Time spent with friends (very often)</i>				
Occasionally or rarely	-0.18	ns	-0.34	**
Never or does not apply	-0.35	ns	-1.55	**
<i>Drinking style (Habitual heavy drinker)</i>				
Non-drinker (abstainer)	-2.53	*	-0.95	ns
Non-drinker (desister) or occasional moderate drinker	-0.09	ns	-0.65	**
Regular moderate drinker	-0.15	ns	-0.87	**
Frequent moderate drinker	-0.05	ns	-0.58	**
Frequent binger or frequent heavy binger	0.51	*	-0.23	ns
<i>Drunkenness (not at all in last year)</i>				
At least once a week	0.64	*	1.25	**
Several times a month	0.59	*	1.41	**
Once or twice a month	0.95	**	1.51	**
Every couple of months	0.62	**	1.02	**
Less than once ever couple of months	0.59	**	0.96	**
<i>Smoking habits (abstainer)</i>				
Moderate to heavy smoker	2.34	**	3.95	**
Light smoker	2.32	**	3.71	**
Occasional smoker	2.13	**	3.44	**
Experimenter	2.47	**	2.81	**
Ex-smoker	1.09	**	1.83	**
<i>Age first drank or smoked (less than ten years old)</i>				
10-13 years old	-0.45	ns	-0.52	*
14-15 years old	-0.86	**	-1.30	**
16 years or older / never	-1.33	**	-1.89	**
<i>Who else present during interview</i>				
Parents/guardians (versus not present)	-0.58	*	-0.32	ns
Other adult (versus not present)	0.09	ns	0.45	*
Constant	-1.06	*	-2.11	**

n=3,363

** = p < 0.01

* = < 0.05

ns = p > 0.05

Psuedo R² = 0.29

Table 53
Hallucinants life-course model (YLS)

	Past use versus never used		Recent use versus never used	
	Coefficient	p	Coefficient	p
<i>Age (27-30)</i>				
16-17	-0.84	**	-0.03	ns
18-22	0.06	ns	1.02	**
23-26	0.37	**	0.37	*
16-17 * sex				
18-22 * sex	0.82	*	1.27	**
	0.59	**	0.12	ns
<i>Sex (Male)</i>				
Female	-0.80	**	-1.05	**
<i>Ethnicity (White)</i>				
Black Caribbean	-0.87	*	-2.00	**
Black African, Indian, Pakistani or Bangladeshi	-3.20	**	-2.63	**
Other	-0.75	ns	-0.75	ns
<i>Social class (Unskilled)</i>				
Skilled non-manual	0.01	ns	-0.39	*
Unclassified	-0.40	**	-0.54	**
<i>Parents' social class (Professional)</i>				
Skilled manual	-0.32	**	-0.03	*
<i>Weekly spending money (less than £20)</i>				
£51-70	0.37	*	0.47	*
£101-132	-0.14	ns	0.55	*
<i>Unemployment (never unemployed)</i>				
Currently unemployed (long-term)	0.33	ns	0.88	**
Currently unemployed (not long-term)	0.28	ns	0.82	**
Unemployed in past (long-term) but not now	0.53	*	0.84	**
Unemployed in past (not long term) but not now	0.51	*	0.36	ns
<i>Parental unemployment (neither parent etc)</i>				
One parent long term unemployed and one not	0.14	ns	0.56	**
<i>Financial difficulty (Not low-incomed)</i>				
No apparent difficulty				
Extreme or very extreme difficulty	-0.64	*	-0.17	ns
No information	0.43	**	-0.22	ns
	-1.22	ns	-1.29	*
<i>Region (North)</i>				
North West	0.20	ns	0.37	*
East Anglia	-0.58	*	0.20	ns

/cont...

	Past use versus never used		Recent use versus never used	
	Coefficient	p	Coefficient	p
<i>Economic status (working full-time)</i> Other	0.80	**	0.85	**
<i>Domestic (Married with children)</i> Divorced, separated or widowed	0.13	ns	1.57	**
Cohabiting with children	0.32	ns	1.00	*
Cohabiting, no children, buying own home	0.18	ns	1.72	**
Single with children	0.39	ns	2.37	**
Cohabiting, no children, not buying home	0.67	*	2.30	**
Single, no children, buying own home	0.16	ns	1.77	**
Single, no children, renting	0.14	ns	2.12	**
Single, no children, living with parents	-0.26	ns	1.58	**
<i>High crime area weight (category one)</i> Category three	0.27	*	0.23	**
<i>Who else present during interview</i> Parents/guardians (versus not present)	-0.41	ns	-0.46	**
Constant	-0.85	**	-3.25	**

n=3,426

** = p < 0.01

* = < 0.05

ns = p > 0.05

Pseudo R² = 0.12

Note: the ethnic 'other' category has been included in the model even though it was not statistically significant because it had a sizeable effect; because excluding it would have masked some of the other effects associated with minority groups; and because it was close to the cut off point for significance (for past use versus never used p=0.06 and for recent use versus never used p=0.10).

Table 54
Hallucinants lifestyle model (YLS)

	Past use versus never		Recent use versus never	
	Coefficient	p	Coefficient	p
<i>Age (27-30)</i>				
16-17	-1.45	**	-0.82	*
18-22	-0.25	ns	0.52	ns
23-26	0.11	ns	-0.02	ns
16-17 * sex	0.90	*	1.30	**
18-22 * sex	0.74	**	0.40	ns
23-26 * sex	0.48	ns	0.80	*
<i>Sex (Male)</i>				
Female	-0.88	**	-1.16	**
<i>Ethnicity (White)</i>				
Black Caribbean, Black African, Indian, Pakistani or Bangladeshi	-1.04	**	-1.32	*
<i>Social class (Unskilled)</i>				
Professional	-0.86	*	-1.02	ns
Skilled non-manual	0.06	ns	-0.40	*
Unclassified	-0.35	*	-0.41	*
<i>Parents' social class (Professional)</i>				
Skilled manual	-0.33	**	-0.07	ns
<i>Unemployment (never unemployed)</i>				
Currently unemployed (long-term)	0.55	ns	0.95	**
Currently unemployed (not long-term)	0.31	ns	0.63	*
Unemployed in past (long-term) but not now	0.43	*	0.77	**
Unemployed in past (not long term) but not now	0.59	**	0.60	*
<i>Parental unemployment (neither parent etc)</i>				
One parent long-term unemployed and one not	0.14	ns	0.57	**
<i>Financial difficulty (Not low-income household)</i>				
Very extreme difficulty	0.73	*	0.36	ns
No information	-1.18	**	-1.20	ns
<i>Region (North)</i>				
North West	0.28	ns	0.54	**
East Anglia	-0.73	**	-0.03	ns
<i>Economic status (working full-time)</i>				
Other	0.80	*	0.86	*
<i>Domestic (Married with children)</i>				
Single with children	0.16	ns	1.41	**
Cohabiting, no children, buying own home	0.01	ns	0.98	*

/cont...

	Past use versus never		Recent use versus never	
	Coefficient	P	Coefficient	p
Cohabiting, no children, not buying home	0.52	ns	1.61	**
Single, no children, buying own home	-0.09	ns	0.94	**
Single, no children, renting	-0.21	ns	1.05	**
Single, no children, living with parents	-0.48	**	0.67	*
<i>Street (not 'hung around' on street in last month)</i>				
Hung around on street in last month	0.36	ns	0.44	*
<i>Religion (not religious)</i>				
Religious, active in last month	-0.43	*	-0.93	*
<i>Time spent with friends (very often)</i>				
Occasionally	-0.15	ns	-0.36	*
Never or does not apply	-0.49	ns	-1.88	**
<i>Pub / club (not been to pub or club in last month)</i>				
Been to pub and club in last month	0.18	ns	0.46	**
<i>Drinking style (Habitual heavy drinker)</i>				
Non-drinker (abstainer or desister)	-1.01	*	0.29	ns
Occasional or regular moderate drinker	-0.20	ns	-0.57	**
Frequent moderate drinker	-0.22	ns	-0.53	**
<i>Drunkenness (not at all in last year)</i>				
At least once a week	0.51	*	1.64	**
Several times a month	1.28	**	1.63	**
Once or twice a month	0.81	**	1.57	**
Every couple of months	0.45	*	0.95	**
Less than once ever couple of months	0.31	ns	0.70	**
<i>Smoking habits (abstainer)</i>				
Moderate to heavy smoker	1.31	**	1.75	**
Light smoker	1.38	**	1.51	**
Occasional smoker	1.07	**	1.14	**
Ex-smoker	1.09	*	0.56	*
<i>Age first drank or smoked (less than ten years old)</i>				
14-15 years old	-0.52	**	-0.82	**
16 years or older / never	-1.24	**	-1.68	**
Constant	-1.16	**	-3.39	**

n=3,372

** = p < 0.01

* = < 0.05

ns = p > 0.05

Pseudo R² = 0.25

Note: non-significant variables have been included in the model if they were part of a significant interaction effect.

Table 55
Cocaine life-course model (YLS)

	Past use versus never used		Recent use versus never used	
	Coefficient	p	Coefficient	p
<i>Age (27-30)</i>				
16-17	-1.08	ns	-1.40	*
18-22	-0.27	ns	0.67	**
16-17 * sex	-0.82	ns	2.14	**
<i>Sex (Male)</i>				
Female	-0.59	*	-1.14	**
<i>Ethnicity (White)</i>				
Black Caribbean, Black African, Indian, Pakistani or Bangladeshi	-1.18	*	-2.89	**
<i>Parents' social class (Professional)</i>				
Skilled non manual or skilled manual	-0.42	*	-0.14	ns
<i>Qualifications (got qualifications)</i>				
No qualifications	-0.10	ns	0.64	*
<i>Unemployment (never unemployed)</i>				
Currently unemployed (long-term)	1.25	**	0.69	ns
Unemployed in past (long-term) but not now	0.58	ns	0.94	**
Unemployed in past (not long-term) but not now	0.46	ns	0.66	*
<i>Parental economic activity (both parents active etc)</i>				
One parent economically active and other had been in the past				
One parent economically active and other never had been	0.96	**	-0.12	ns
	0.34	ns	-0.69	*
<i>Region (North)</i>				
North West	0.58	ns	1.14	**
East Anglia	0.81	*	1.22	**
South East	0.56	*	0.47	ns
London	0.89	**	1.46	**
<i>Type of neighbourhood (Thriving)</i>				
Rising	0.03	ns	0.77	**
<i>Economic status (working full-time)</i>				
Student	-0.42	ns	-0.63	*

/cont...

	Past use versus never used		Recent use versus never used	
	Coefficient	p	Coefficient	p
<i>Domestic (Married with children)</i>				
Cohabiting, no children, buying own home	0.14	ns	1.76	**
Cohabiting, no children, not buying home	0.93	ns	1.68	**
Single with children	2.07	**	2.19	**
Single, no children, buying own home	0.94	*	1.09	ns
Single, no children, renting	0.49	ns	2.22	**
Single, no children, living with parents	0.56	ns	1.84	**
Single with children * sex	-1.29	*	-0.76	ns
Single, no children, buying own home * sex	-0.56	ns	1.46	*
<i>Who else present during interview</i>				
Parents/guardians (versus not present)	-1.07	*	-1.42	**
Constant	-3.51	**	-4.81	**

n=3,443

** = p < 0.01

* = < 0.05

ns = p > 0.05

Pseudo R² = 0.15

Table 56
Cocaine lifestyle model (YLS)

	Past use versus never used		Recent use versus never used	
	Coefficient	p	Coefficient	p
<i>Age (27-30)</i>				
16-17	-2.03	**	-2.05	**
18-22	-0.66	*	0.19	ns
16-17 * sex	-0.61	ns	1.75	*
<i>Sex (Male)</i>				
Female	-0.58	**	-0.81	**
<i>Ethnicity (White)</i>				
Other	0.13	ns	1.20	*
<i>Unemployment (never unemployed)</i>				
Unemployed (long-term)	1.31	**	0.74	*
Unemployed in past (long-term or not) but not now	0.39	ns	0.38	**
<i>Parental economic activity (both parents active etc)</i>				
One parent economically active and other had been in past	0.79	**	0.04	ns
<i>Region (North)</i>				
North West	0.45	ns	1.11	**
London	0.85	**	1.65	**
<i>Domestic (Married with children)</i>				
Cohabiting, no children, buying own home	-0.11	ns	1.58	**
Cohabiting, no children, not buying home	0.54	ns	1.47	*
Single with children	0.80	*	1.11	*
Single, no children, buying own home	0.74	ns	1.46	**
Single, no children, renting	0.14	ns	1.64	**
Single, no children, living with parents	0.34	ns	1.32	**
<i>Street (not 'hung around' on street in last month)</i>				
Hung around on street in last month	0.66	ns	0.62	*
<i>Religion (not religious)</i>				
Religious, active in last month	-0.12	ns	-1.48	*
<i>Time spent with friends (very often)</i>				
Rarely, never or does not apply	-0.42	ns	-1.73	**
<i>Drinking style (Habitual heavy drinker)</i>				
Occasional moderate drinker	-0.24	ns	-1.52	**
Regular moderate drinker	-1.12	*	-1.00	*

/cont...

	Past use versus never used		Recent use versus never used	
	Coefficient	p	Coefficient	p
<i>Drunkenness (not at all in last year)</i>				
At least once a week	0.73	*	1.46	**
Several times a month	0.79	*	1.21	**
Once or twice a month	0.89	**	1.09	**
Every couple of months	0.39	ns	0.75	*
<i>Smoking habits (abstainer)</i>				
Moderate to heavy smoker	1.65	**	1.69	**
Light smoker	0.95	ns	1.33	**
Occasional smoker	1.66	**	1.38	**
Ex-smoker	1.49	**	0.12	ns
<i>Age first drank or smoked (less than ten years old)</i>				
14-15 years old	-0.26	ns	-0.77	**
16 years or older / never	-1.03	**	-1.45	**
<i>Who else present during interview</i>				
Parents/guardians (versus not present)	-0.92	ns	-1.45	**
Constant	-4,35	**	-5,44	**

n=3,386

** = p < 0.01

* = < 0.05

ns = p > 0.05

Pseudo R² = 0.25

Part Two: Notes for Chapter 4

1. Because of suggestions that drug use is starting at a younger age, analyses relating to age of onset were based on the full age range included in the YLS (i.e. 12-30 years old). Less than 10 per cent of users fell into the 12-15 age band, however, and their inclusion made very little difference to the results. For 10 of the 13 specific substances, the median age of first use was the same regardless of whether it was estimated on the basis of 12-30 year olds or 16-30 year olds. In the three remaining cases the figures were one year apart. It should also be noted that inclusion of older respondents made little difference to the results. For 10 of the specific substances, analyses based on 16-30 year olds and 16-22 year olds produced estimates that were within a year of one-another and for the remaining case figures were two years apart. Moreover, in 11 cases the estimate based on one of these age-ranges was included in the 95 per cent confidence interval for the estimate based on the other.
2. Gaps between age of first use for all of the drugs shown in Figure 2 were assessed on the basis of a non-parametric test (Wilcoxon matched pairs) as, for most comparisons, there was evidence of significant departure from the Normal distribution. In illustrating these differences, however, the mean and not the median has been used. This reflects particular difficulties in constructing confidence intervals for the difference between the medians of two groups using non-parametric methods (Altman, 1991, 194). While the central limit theorem justifies the use of means in this context (Altman, 1991, 154) it should also be noted that, for each drug, mean and median values were closely related: the mean difference between them was 0.49 of a year.

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