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Title: Status, stigma and stereotype: how drug takers and drug suppliers avoid negative labelling by virtue of their ‘conventional’ and ‘law abiding’ lives.

Abstract

A minority of those who consume or supply illegal drugs are detected and subsequently punished for breaching these laws. Thus, only a minority of active ‘drug offenders’ are ever formally subjected to criminal sanctioning, the criminal label, its stigmatising affects, and the resultant collateral consequences. The current paper analyses data from two studies on drug offenders — a sample of 26 users and a sample of 25 suppliers — who form part of the ‘silent majority’ of drug offenders whose offending behaviour goes largely unnoticed and unpunished. Both sets of actors are what we consider ‘law-abiding’ criminals insofar as their regular criminal transgressions are not reflected in the ways broader society, their immediate networks, nor they, view themselves. We argue that the perceived risks posed to their conventional commitments and roles ensure their careful management and subversion of behaviour and information that might otherwise be indicative of their drug offending. Yet, at the same time, we argue that these conventional roles provide sufficient protection that their crimes go unnoticed or, if detected, unpunished. Our conclusions support Taylor (2008; 2011; 2016) that only a minority of ‘low hanging fruit’ are subject to the law, and the collateral consequences of a criminal and deviant label. We argue more research needs to be conducted with these ‘hidden offenders’ to help reduce the inequities, stigmas and stereotypes that befall the subsection of drug offenders who are routinely policed, sanctioned and studied.

Key words: status, stigma, stereotype, drug use, drug supply

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Introduction

Drug offences are both highly stigmatised and severely punishable in the United Kingdom. For instance, possession of the most widely used drug in the U.K., cannabis, carries a maximum sentence of up to five-years in prison (plus an unlimited fine), while its supply is punishable with up-to 14 years in prison (plus an unlimited fine). Yet, neither stigma nor punishment are apportioned equally among the offender population. Drug offences by-and-large go unpunished and unchallenged. Nonetheless, the fear or risk of sanction is an ever-constant threat for breaching these laws. This paper draws data from two separate PhD projects. The first of these projects involved interviews with 26 adult recreational drug takers, while the second provided an ethnographic account of 25 drug suppliers operating at various stages of the supply chain. Participants of both studies had protracted careers in drug offending, namely possession and supply. At the time of the fieldwork, only one of our participants had been subjected to criminal sanctioning. They are, therefore, what we might consider ‘law-abiding criminals’, insofar as neither they, their immediate social or familial networks, or indeed broader society (through formal detection and sanctioning within the criminal justice system) label them criminal. In short, these individuals constitute part of the hidden population of drug offenders – what Mohamed and Fritsvold (2010: 2) term ‘the silent majority’. Most participants had legitimate forms of paid or voluntary work, some were parents and many were educated to degree level. Drug-related activities — including sourcing, supplying and using drugs — were often incidental components of their everyday lives. They were, to all other intents and purposes, pro-social and otherwise conventional law-abiding citizens.

The overarching goal of this paper is to understand how individuals embedded within conventional roles negotiate highly stigmatised, criminalised and widely condemned behaviour within the various social arenas they inhabit. The paper assesses (i) how knowledge about illicit
drug activity is socially managed, (ii) why knowledge of such behaviour remains hidden and private from particular people and contexts and (iii) how our participants respond to threats and experiences of informal and formal sanctioning. We begin with a review of the literature: first, by assessing who constitutes the visible ‘drug offender’ population i.e. those featured within criminal justice and treatment figures. Second, by reviewing the possible outcomes of being labelled a drug offender.

The ‘law-breakers’ versus the ‘law abiders’: visible and hidden populations

Far more people breach drug laws than are detected and punished for these crimes. According to the 2016/17 Crime Survey for England and Wales an estimated 2.8 million adults aged 16-59 consumed (and had thus possessed) an illicit drug in the previous year (Broadfield, 2017), during that same period, however, only 108,098 drug possession offences were recorded across England and Wales (Flatley, 2017). There are no comparable figures for drug supply prevalence rates. However, Reuter and Stevens (2008) estimate there was roughly a six per cent chance of being imprisoned for crack and heroin dealing in the UK. Combined, such figures indicate that the majority of those breaching UK drug laws do so undetected, unpunished and are therefore hidden from the criminal justice system and treatment services. But what is known about the minority who are caught and sanctioned for drug offences?

Though prevalence rates of drug use in the U.K. are higher amongst the White majority (Lader, 2016), White people are less likely to be detected and punished for drug offences than minority groups. Data indicates significant racial disparities in terms of who is stopped and searched on suspicion of illegal drugs, charged and subsequently imprisoned for breaching drug laws (Lader, 2016; Hopkins et al. 2016; UKDPC, 2010). Such disparity is perhaps most evident in Eastwood, Shiner and Bear’s (2013) analysis of Ministry of Justice and police force data in England and Wales, who found that: mixed race people were stopped and searched for drugs at twice the rate of White people, Asian people at 2.5 times the rate, and Black people at over 6 times the rate; Black people were arrested for drug offences at 6 times the rate of White people, and Asian people twice the rate of White people; Black people were subjected to court proceedings for drug possession at 4.5 times the rate of White people and were also found guilty of this offence at 4.5
times the rate of White people; Black people were subjected to immediate custody at 5 times the rate of White people – despite lower rates of use.

Criminalisation, stigmatisation and marginalisation are thus also likely to be concentrated among these same populations. This bias skews our understanding of users and suppliers of illegal drugs and creates a false impression that these communities are inextricably linked to drugs and supply markets (see Alexander, 2012; Paoli and Reuter, 2008).

At a systemic level, drug policy has been criticised for assuming a causal relationship between drugs and crime (Duke, 2009; Seddon, 2006; Seddon et al, 2008). From the 1990s onwards, policy has focused upon deterring drug related criminal activity by engaging drug users into treatment, most notably through the introduction of the Drugs Intervention Programme. In this regard, ‘problematic’ users are far more likely to engage with and thus come to the attention of service providers. For instance, 52 per cent of those in contact with drug and alcohol services in England in 2015/16 were opioid users. However, problematic users account for only five per cent of the whole drug using population (Rolles, 2009; Hough, 2001). Policy therefore focuses on a small proportion of all drug takers; it overlooks the fact that most use is non-problematic and relates to cannabis (estimated 2.1 million users in the past year), cocaine (estimated 725,000 users in the past year), and ecstasy (estimated 492,000 users in the past year) (Lader, 2016). Furthermore, policy fails to acknowledge that most drug users have few health problems or contact with authority (Monahan, 2012; Seddon 2006).

The normalisation thesis (Parker et al., 1998; Measham et al., 2001; Aldridge et al. 2011) was developed on the basis of rising drug trends in the 1980s and 1990s. The authors argued that drug use could no longer be associated with deviant subcultures and had become accommodated into British youth culture via several dimensions, including increased access and availability, lifetime and recent drug use, social and cultural accommodation of ‘sensible’ drug use in youth culture, even by abstainers (Aldridge et al, 2011). Seemingly law-abiding individuals were argued to be tolerating or indeed using illicit substances. Although the extent to which this is accommodated by young people has been criticised (see Shiner and Newburn, 1997; 1999), there is a body of evidence that demonstrates that drug use is integrated into the lives of adjusted and conforming people, such as young people in full-time education and employment, professional and working

In summary, the visible population of drug offenders are those who come to the attention of treatment services and the criminal justice system. Yet, these individuals are not representative of drug offenders at large, whose behaviour goes unchecked, unpunished and therefore is hidden from public view.

**The othering of the drug offender: the power of label and the consequences of stigma**

The labels assigned to a particular group or person can hold significant sway over how others view and react to them and, in turn, influence how those labelled come to perceive themselves (Becker, 1963; Lemert, 1967). The implications of labelling seem particularly salient with regards to illegal drug behaviours (Lenton et al., 2000 and Pager, 2003). Users and suppliers face stigma associated with their acts, for example via the ‘junkie’ or ‘pusher’ labels, as well as being formally sanctioned and thus labelled ‘criminal. As McKeganey (2016: 451) argues, “There can be little doubt that the acquisition of a criminal record as a result of drug dealing or drug use can be a source of stigma and marginalization for the individuals involved”. Indeed, as The Lammy Review\(^1\) (2017) points out, drug supply offences will never be filtered out of a person’s criminal record check in the UK, and thus may exclude the individual from various occupations, meaning that “selling drugs as a teenager could prevent you becoming a plumber or licenced taxi driver in your thirties” (p64). Formal sanctions for drug offences thus result in labelling and stigmatisation, which can have long-term collateral consequences i.e. negative outcomes.

Supplying drugs is widely seen as a morally egregious act, one far more socially harmful than using drugs. This view is ratified through the Misuse of Drugs Act (1971) with significantly higher minimum sentences for supply and production than for possession. As such, the UK’s

\(^1\) The Lammy Review, chaired by David Lammy MP, is an independent review of the treatment of, and outcomes for, Black, Asian and Minority Ethnic (BAME) individuals in the Criminal Justice System (CJS)
Sentencing Council’s guidelines (2012) advise far tougher ‘starting points’ and sentencing ranges for supply offences. Although some have argued that drug dealers can be constructed as ‘folk heroes’ (Carter, 2007), political discourse and the media widely portray ‘dealers’ (so-called ‘pushers’) as ‘evil’: they are depicted as amoral individuals, concerned only with maximising financial profits via their targeting of ‘vulnerable addicts’ and the utilisation of violence to monopolise markets (Coomber, 2006; Coomber et al., 2016; Beckett et al., 2017). Those involved in the distribution of drugs are, as Boyd notes (2002: 397), “constructed as ‘outsiders’ that threaten the world order of white, middle-class protestant morality”. The connotations between drug supply and such predatory and violent behaviour heavily stigmatises both the act and the actor. Currently, little is known about the extent to which suppliers conform to such stereotypes, though some have argued that empirical studies tend overwhelmingly to focus on drug offenders living and operating on the margins of society, to the detriment of our knowledge of drugs markets at large (Salinas, 2017; Ancrum, 2014).

Two ethnographic studies exemplify the way in which certain drug offenders avoid informal or formal sanctions and so avoid the subsequent labelling and stigma. This includes Jacques and Wright’s (2015) study of middle-class suburban drug users and dealers and Mohamed and Fritsvold’s (2010) study of affluent university ‘door room dealers’ and users. Mohamed and Fritsvold (2010: 100) noted how “university officials, local police, and other persons charged with enforcing the rules generally failed to apply the label of drug dealer to these young men and women or otherwise treat them as the city police and society in general would an urban street dealer”. Both populations were thus ostensibly ‘immune from being self-labelled or labelled by others’ as drug dealers or users (2010: 103). Three factors outlined by Mohamed and Fritsvold helped these so-called ‘anti-targets’ from adopting a deviant identity. First, the absence of any legal reprisal (or formal sanctioning) meant they avoided the formal ‘deviant’ label. Instead, the they were seen (and internalised) the label of non-deviant law-abiders. Second, by virtue of their race, socioeconomic standing, and their similarly affluent customer base, these individuals distanced themselves from the archetypal imagery (and demographics) typically associated with drugs. Third, these individuals’ core identities were centred on conventional (i.e. legitimate) roles — e.g. being a college/university student, being a college athlete — drug dealing was seen
as a harmless and temporary transgression. In sum, despite the stigma ascribed to many drug offenders it appears as though ‘the least powerful members of society are unequally targeted and officially labelled deviant’ (ibid: 105) — they are the low-hanging fruit: the visible drug offenders.

Stuart Taylor has written extensively about the creation of stigma and stereotype through prohibition and political rhetoric; abstinence based policy and treatment; and the misrepresentation of users and dealers in the media. He argues this systemic stigmatisation, i.e. through the creation of drug policy and enforcement of the law through the criminal justice system, creates marginalisation, disproportionate targeting and the continuation of wasted governmental resources (Taylor, 2016, Taylor et al., 2016; Taylor, 2011 and Taylor, 2008). Given the class and racial inequities in the distribution of criminal justice sanctions, in particular the inherent bias towards BAME populations, we can also conclude such groups are disproportionately subjected to the collateral consequences of being labelled drug offenders. However, it is unclear how labelling and stigma affects those who breach drug laws but have not, and are unlikely to be, caught and sanctioned for their crimes. In this paper, we look specifically at how these ‘invisible’ drug offenders circumnavigate the stigma and stereotype of illicit drug activities alongside their status as conventional and otherwise law-abiding people.

**Methods**

Our paper draws data from two qualitative research projects. Askew conducted interviews with 26 adult recreational drug takers who primarily use cannabis, cocaine and ecstasy (Project Use). Salinas collected data from 25 individuals as part of an ethnographic study of a drug distribution network of cocaine, ketamine and cannabis (Project Supply). Forty-five of the 51 participants are White British, four participants are British Asian, one participant is Black British Caribbean and one is Mixed White and Black African. The participants in Project Use were aged between 30 and 59 and split evenly between male and female. The twenty-five drug suppliers in Project Supply are slightly younger, aged between 18-29 and are exclusively male.

Rather than using demographic classifications to define our participant groups, we use status
characteristics to exemplify their ‘law abiding’ lives. These are divided into four identifiers, (i) occupation; (ii) education; (iii) family/social/community commitments; (iv) no previous sanction for offences relating to drug activity. We do not suggest these to be an exhaustive list applicable to the general population nor a definition of what constitutes conformity, but rather factors that exemplify attachment to conventional lifestyles. Our participants were embedded within conforming roles, including jobs and careers in a variety of sectors and varying levels of seniority, as well as holding responsibilities outside of work, such as parenthood, community involvement and stable relationships.

Among ‘Project Use’ (N=26) 14 considered themselves to have been in ‘stable relationships’ at the time of their interview, while 12 were parents/care-givers. In terms of the highest qualification held: eight held industry-specific accreditation/s (e.g. BTEC); eight bachelor’s degree; eight postgraduate qualifications; while one held A-Levels (further non-compulsory education), and one GCSEs (high school). Individuals were employed in the following professions/sectors: education (4); public sector (3); public relations (3); creative arts (2); administration (2); healthcare (2); customer services (1); retail (1); finance (1); construction (1); design (1); sales (1); management (1); student (1); voluntary (1); retirement (1).

Among ‘Project Supply’ (N=25) 12 considered themselves to have been in ‘stable relationships’ during the study period while two were parents/care-givers. In terms of the highest qualification held: seven held industry-specific accreditation/s (e.g. BTEC); six bachelor’s degree; five postgraduate qualifications; while one held A-Levels (further non-compulsory education), and six GCSEs (high school). Individuals were employed in the following professions/sectors: engineering and manufacture (4); finance (4); transport and logistics (4); small business owners (3); hospitality and leisure (3); administration (3); construction (2); education (1); management (1).

For a more detailed description of participants, including the drugs used and/or sold, see Askew (2016) and Salinas (2017).
The data collection and analysis was originally completed as two separate and unrelated research studies. However, there were key similarities between our two participant groups, namely the ‘conventionality’ of the participants’ lifestyles (other than their illicit drug activity) and that the majority of participants’ had not been sanctioned for their offences. Project Use involved conducting one to one semi-structured interviews with the 26 participants. These participants were asked questions about whether they had previous contact with the police regarding drug offences; in addition, the extent to which knowledge of their drug use extended within their family, social and professional lives. Project Supply was an ethnographic study, which involved systematically observing and regularly interviewing the 25 participants as they transitioned into adulthood. This study collected a broad range of data, including (but not limited to): operational features of criminal enterprises; risk mitigation strategies; information about job satisfaction (both legitimate and criminal work); aspirations; and development of human and social capital. Using thematic analysis, we explored i) how knowledge about illicit drug activity is socially managed, (ii) why knowledge of such behaviour remains hidden and private from particular people and contexts and (iii) how our participants respond to threats and experiences of informal and formal sanctioning. We developed an analytical strategy to show either synergy or distinction between users and dealers within those three areas. All names and personal identifiers have been changed to protect the identity of the participants.

**Findings**

**How knowledge of illicit drug activity is socially managed**

Given the inherent criminality of their drug offending and the criminal and occupational sanctions it could warrant, information pertaining to participants drug activities was kept largely confidential: secrecy was the default position. The aversion to openness was particularly evident in the social spheres relating to parenthood (e.g. with parents they met via their children, or at school), family (e.g. with parents and extended family members) and employment (e.g. management or subordinates). Nonetheless, information about drug use and sales were rarely hidden from intimate partners or close and trusted friends. Participants *wanted* to be open about
their drug activities with those to whom they were emotionally close or else deemed ‘safe’ (and non-judgmental). For example, Helena speaks to colleagues who she felt emotionally close to, despite them not having indicated a history of use,

*And do you feel comfortable talking about it [to colleagues] and that people know?*

Yeah but only because I know them so well, it wasn’t something that I spoke about straight away. I just think I wouldn’t be that close friends with someone that was going to be judgemental about something like that. There would be some part of their character that I didn’t like along the way, so they wouldn’t be someone I would be close to (Helena, Project Use)

Suppliers were more guarded about their supply activities and tended to admit use well before admitting involvement in distribution. There was an acknowledgment that someone’s approval of one drug behaviour, such as cannabis smoking, did not necessarily equate to an acceptance of supply, such as cocaine sales. Consequently, participants only divulged information when they deemed the social setting safe and accommodating.

*Four or five of them [i.e. the staff] [...] had known I smoked weed before I started sorting any of them out [...] You work long shifts in restaurants — like 60/65 hour weeks — you’re with them a lot, so you just get talking. You just get to know them [...] We’d share a spliff after work some nights [...] [However] most of the people [at work] didn't actually know about the coke [sales] [...] [My] colleagues were my weed lot. I think they'd think it was less respectable [than cannabis] so never talked about it. In fact, [some] [...] were dead against it. They're a completely different group [to the friends who used/sourced cocaine]. (Harvey, Project Supply)*

Openness about drug offending is, as we have demonstrated, restricted to specific contexts and trusted acquaintances. However, social life is fluid and evolves over time through exposure to new environments and people, for example meeting new acquaintances through friends, dating new people and starting new jobs. There was evidence of ‘fishing’ within both studies, which we
describe as a social tool to gauge whether people in ‘new’ environments were morally accepting or opposed to illicit drug activity. Participants were attuned to verbal and non-verbal indicators based on shared (and at times broader) cultural understandings of drugs.

Descriptions of where people spent their leisure time also indicated possible acceptance or tolerance of drugs, for example references to particular club nights, holiday locations (e.g. Ibiza or Amsterdam) or a music festival. Other specific references acted as proxy indicators for drug use, for instance references to a lack of sleep and appetite suppression after a weekend away. A more direct non-verbal indicator was noticing the familiar physical effects of drugs on others. Participants made reference to the signs of stimulant drug use, for example, looking awake and alert; having dilated pupils; and increased familiarity with others. Blood shot or droopy eyes and mellowed demeanour were described as an indication someone smokes cannabis, "you can just tell: they look stoned whenever they come into work" (Harvey, Project Supply).

‘Fishing’ also relates to other non-verbal indicators, such as overall connectivity with others based on shared interests and opinions as Meg explains:

*And how do some colleagues know and others don’t, what is the difference there?*

*Just people that have told me they smoke or I have found out that they smoke dope and I don’t know how it comes out. You just sort of connect with people, just people you hit it off with and you can tell they are similar and have a similar sort of attitude toward things.* (Meg, Project Use)

‘Fishing’ is therefore a social and cultural tool used to determine the views of others without explicit reference to drugs. It was used to establish other peoples’ opinions and beliefs about drugs, which could result in bonding through shared interests. ‘Fishing’ was an important way to gauge whether others are accepting of drugs. This enabled participants to protect knowledge of their drug activities from those who might judge or sanction them. Interestingly, ‘fishing’ relied upon heuristic judgments of a person’s moral stance based on drug user stereotypes. This
illustrates how ingrained stereotypical notions of ‘drug users’ are, even among those whose drug using/supplying behaviours directly challenge such imagery.

In summary, our participants occupied numerous social arenas in their everyday lives, participants had to judge the acceptability of drugs within each of these arenas before outing themselves as either using or supplying drugs. The principle protective strategy in those arenas deemed ‘unsafe’ was simply to omit information and behaviour that could be indicative of use/supply activities. As the following section demonstrates, decisions to subvert their drug activities were influenced by a range of factors.

**Why information is managed: protecting others’ sensibilities, deflecting moral judgment.**

Where a significant rapport had been established, participants hoped their dominant (conventional) identities would protect against crude labelling, such as ‘druggie’, ‘addict’ or ‘pusher’. Nevertheless, participants were mindful of how others who disapproved of illegal drugs might judge them for using or supplying them. Here Annabel discusses the unspoken knowledge of her drug use by her parents, she goes on to argue that her relative successes in life undermine any pressing need for them to raise their disapproval with her. Annabel distinguishes herself from a dysfunctional addict as she defends her position as a ‘functional’ drug taker:

*They clearly know we smoke weed. I hate the idea of them knowing and what they think of me for that, but they clearly don’t think of me in a negative way or it doesn’t necessarily upset them completely because if it did then I would be hearing from them. Whatever their views and attitudes are towards drugs, and they have clearly never touched a drug in their life, they don’t feel that they need to impose it on me and I think part of that is to do with the fact of where I am in my life and what I have achieved and even though I do, do those things, it is in a controlled kind of way. I haven’t spiralled out of control and started shooting up heroin on the streets or anything like that.* (Annabel, Project Use)

Participants often emphasised how their drug use and/or sales remained private often out of respect for others; they simply did not wish to worry those close to them. Four participants in
Project Use had received mild disapproval from their partners, friends or family about their drug use. In general, this was not connected to the illegality of substances but instead related to assumed behavioural problems and health risks during periods of excessive use. By contrast the majority of participants in Project Supply were acutely fearful of their parents becoming aware of their dealing activities, as this would (and on occasion, did) elicit severe parental anxieties about the possibilities of criminalisation, imprisonment or an assumed association to gangs or organised criminals. The following extract demonstrates the overriding power of the ‘drug dealer’ label and the difficulties faced by those attempting to challenge the stigma associated with it.

My mum's got it in her head that all drug dealers are gangsters [...] When her and my uncle went rooting through my bag years ago and found them bags of coke she was in tears. I can laugh now, but she was in bits. She was saying, "How are you going to get out of it? What if they don't let you? It's not as easy as just walking away from it". She thought I was part of some gang. I tried telling her it wasn't like what she thought. It was fucking gutting trying to reason with her, coz you couldn't. (Cliff, Project Supply)

Those (such as parents or work colleagues) who viewed drug taking as immoral were assumed to have had limited or no exposure to environments in which illegal drugs were sourced, supplied and consumed, and were instead informed by prevailing drug offender stereotypes. Participants believed such ‘outsiders’ would struggle to comprehend how drug use could be functional and occasional, or how sales could be undertaken without coercion, violence or connections to serious criminal gangs. Participants were therefore discreet about their illicit drug activity in order to minimise distress felt by those close to them and to protect themselves from negative moral judgement. Negative opinions associated with crime, addiction, immorality and recklessness needed to be deflected to retain their positive social status, as Khalid illustrates in the following examples:

If someone in my family had found out I was dealing drugs they'd look down on me. Fraud, not so much. Drugs is a bigger thing they'd look down at me for [...] [My two brother-in-laws] have both been to prison for white-collar crime [...] But drugs are seen in a worse light
[...] The family would look at me as a lower-class criminal than what they were doing [...] No one would look down on uncle Faisal for selling fake clothes, or look down on Khan [brother-in-law] for what [high level fraud offences] he's done. (Khalid, Project Supply)

These extracts indicate a heightened awareness of the dominant anti-drug discourse and strong cultural connotations to drug activities. Participants believed they could not morally defend themselves as a user or supplier of drugs to those whose views were underpinned by stereotype. The negative connotations attached to drugs, and more specifically the negative depictions of ‘users’, and ‘dealers’ were so entrenched that participants felt these labels could not be challenged.

The fear of moral judgment was apparent amongst many in our sample who were attached to “conforming” jobs in health care, the criminal justice system and education, who were parents and whose social circles extended beyond those associated with their illicit drug activity. For example, Paula who works in the public sector and has a partner who disapproves of drugs, emphasises the varied levels of exposure and understanding of drugs within her social world:

Perhaps my boyfriend is a bit…is certainly not into it and perhaps a bit anti and that has had a bit of an effect on me...I think some of my friends who have taken drugs for a long time with me probably surround themselves mainly with people who do that, whereas I feel that I live in two worlds and I feel very acutely aware that some people are actually quite hostile and have no understanding of it. I work with some people who would fall into that category and would find that the most shocking thing ever. People are shocked that a parent of my age with a responsible job still likes to ‘get off their tree’ every now and then. (Paula, 44 Project Use)

Perhaps counter-intuitively, both sets of participants were concerned more by the potential loss of status and respect within their ‘law-abiding’ daily lives, than about criminal sanctions. In their experience, immediate social networks were far more likely to become aware of these activities than criminal justice agencies. Participants therefore employed discretionary tactics to guard
against more than simply arrest, they did so to avoid the stresses and moral judgments this could engender from those close to them. The final section addresses their anticipated fears and concerns and the lack of extent to which they were realised.

**Responses to threats and experiences of informal and formal sanctioning**

Despite participants’ fear about what *could* happen if outed within unsafe social settings, their experiences suggest such fears were rarely warranted. Incidences whereby participants’ drug activities were informally or formally sanctioned were rare. Informal sanctions included being asked to move out of a family home, the threat of terminating intimate relationships or suspension of car privileges from parents. Formal sanctions related to employer warnings or criminal justice system actions. Note that only one of our participants had been legally sanctioned for their involvement in illicit drugs and was sentenced to 12-months in custody for cocaine supply. An instance of formal and informal sanctioning was discussed by Abu, who was living with and working for his uncle in a retail outlet while supplementing this income dealing cannabis. His uncle became suspicious about involvement in drug supply. This was confirmed when he discovered drugs in the house. The consequences of this exposure were twofold, the loss of his home and employment. Abu moved back to his hometown over an hour away and ceased supplying cannabis. Yet his uncle chose not to inform either Abu’s parents or the authorities, thus minimising the fallout from his criminal activities. Khalid's exposure occurred within a more formalised occupational setting. Whilst employed in a high-street bank, the branch manager, was made aware of allegations regarding his involvement in cocaine supply and approached Khalid:

*I was slightly nervous that colleagues knew. But the ones who did were friends, people that I trusted, people I didn’t think would ever grass [...] I’d call them more ‘mates’ than ‘work colleagues’ [...] [However] my main manager pulled me aside in work [...] It was very awkward. He didn’t say I was selling it, he said I’m around drugs, and could be selling it. I just said “I don't know what you’re talking about [...] I know people that do sell drugs, but I don't personally sell it”. He didn’t know what to say – just “I had to speak to you coz obviously, it’s been mentioned” [...] He was a nice guy anyway, we used*
to have a laugh and he was the main manager [at the branch]. He just said he had to say something – it was more of a “I don’t really want to talk to you about this but I’m going to have to mention it for my notes” kind of thing. He never mentioned it again.

Khalid (Project Supply)

Khalid was a valued and well-liked member of the workforce and it appears that his relationship with his manager acted as a protective factor against formal sanctioning in the workplace. We can assume that the branch manager either did not believe the allegations or did not wish to pursue further investigation and punishment.

There were no reported incidences of workplace or criminal justice sanction in Project Use. However, participants were concerned about the threat of exposure, particularly in the workplace. Both job sector and role seniority strongly influenced the need for privacy and discretion around drug activity. Those working within the public sector, in education, health care, emergency services and criminal justice, were especially wary about the threat of workplace sanctions and felt institutional stigma more acutely. As a result these individuals kept work and social lives almost entirely separate. Some avoided public spaces when using or sourcing drugs for fear of being seen or recognised by people outside of their friendship circles – for example colleagues, managers, subordinates and other parents.

Billy works in the public sector and stated that knowledge of his drug use would jeopardise his position and career. He explains he is now more cautious about having drugs in his possession in public places due to his job and keeps work socialisation separate from that with personal friends. When asked about the impact that knowledge of drug use could have on his job, he responded:

I think if I didn’t tell them [about my drug use] and I got caught and they found out, I would be sacked. If I got caught and I said I have a problem with it, obviously I would be taken off duties and they would give me support to get me off drugs. Rather than me saying, oh it’s recreational. If I said it was recreational you would be out of the door and
if I said I have got an issue with it that ‘I need it’ then I would get help. (Billy 30, Project Use)

Billy’s extract demonstrates how recreational illicit drug use may be perceived as unacceptable within official institutions. In this instance, Billy believed he could be protected against formal sanctioning in the workplace by adopting the identity of a ‘drug addict’ as organisations have greater obligation to support drug addiction rather than recreational drug use. Here, Billy demonstrates self-awareness about how status and identity adoption can be utilised for self-protection.

Our participants undertook various efforts to keep their drug offending behaviours hidden and avoid possible negative repercussions: they subverted their behaviour and avoided undertaking drug activities in public space (when possible); they restricted knowledge of their drug activities; they often separated their social (drug accepting) networks, from their familial or work networks; and at times considered what justifications or defence they would employ ifouted. Overall, the vast majority of our participants appear to have avoided legal sanctioning in large part because they were never targeted for breaching drug laws: they were not the ‘usual suspects’ of stop-and-search procedures whilst on the street (see McAra and McVie, 2005); they did not have their lockers searched in work; and they were not drug-tested at work or educational settings. In those instances when unwanted knowledge of illicit drug activity became known, participants met disapproval and concern from family members or work colleagues, yet no one was reported to formal authorities. This highlights how participants’ ‘conventional’ and otherwise law-abiding lives acted as protective factors.

Discussion

Our participants constitute the ‘silent majority’ of ‘drug offenders’ (Mohammed and Fritzvold, 2010): barring one supplier, these individuals avoided being publically identified or subsequently sanctioned and labelled by the criminal justice system or drug treatment services. Our findings resonate with Mohamed and Fristvold’s (ibid) study of privileged ‘dorm room [drug] dealers’ and users, in that our participants were, essentially, ‘anti-targets’ of drug enforcement. Though our participants neither came from, nor inhabited, especially privileged social arenas, their
(otherwise) law-abiding and ‘conventional’ lives, prevented them falling under suspicion or scrutiny from others, such as criminal justice agents, work colleagues or family members.

In part, the lack of suspicion resulted from purposeful subversion of obvious drug related activities in public settings. Participants carefully managed their drug behaviours by first assessing individuals and social environments as either ‘safe’ (free to discuss or engage in drug use/sales) or ‘unsafe’ (inappropriate to discuss or engage in use/sales). Proxy and sometimes ‘stereotypical’ indicators were used to assess the safety of unfamiliar settings, including people’s appearance and their affinity for certain music or environments (e.g. Ibiza or nightclubs). We term this assessment of social cues and cultural identifiers as ‘fishing’. However, beyond their own effort, it is likely our participants’ social standing as ‘law abiding’ and ‘conventional’ citizens – and the contrast between this and stereotypical drug ‘offenders’ – helped guard against the presumption of deviancy and criminality (cf. Jacques and Wrights, 2015; Mohamed and Fritsvold, 2010). It appears as though a certain level of social privilege may be a sufficient enough defence against punitive drug laws. As Reiner (2016: 80) notes:

“The predominant view pervading political and media discourse is that the majority of people, in particular the ‘respectable’ and aspirant middle classes, are law abiding, and the function of criminal justice is to protect them against victimisation by ‘others’, the ‘dangerous classes’ of the indigent and excluded”

Our participants would likely constitute part of the “‘respectable’ and aspirant middle classes” insofar as they maintained a range of pro-social attributes: they were educated; economically self-sufficient through employment and, for some, caregivers/parents. In addition, the areas where the middle classes reside tend not to be policed. In short, these attributes deflected suspicions and assumptions about breaching drug laws. This further emphasises the disparities of drug prohibition, in which certain ethnic and social groups bear the burden of drug enforcement, whilst the socially privileged by-and-large avoid being targeted and punished for the same infractions. Despite not explicitly assessing the racial components of our participants’ lives, there is every likelihood their racial and ethnic demographics acted as crucial protective factor – as ethnic minorities are highly visible with regard to the policing and punishment of drug offences
(Eastwood et al, 2013). Further research is required to fully assess the intersectional relationship between race/ethnicity and other social risk factors. As Salinas (2017: 13) asserts:

‘The usual suspects [of drug offences i.e. BAME groups] are not marginalized populations simply because of the stringent police surveillance or punitive policies targeted toward them… but because they are also likely to fare poorly in terms of their health outcomes, educational outcomes, occupational outcomes, and residential and familial stability’.

Stereotypes permeate the discourse on illegal drugs. Politicians and formalised policy make reference to victimised addicts and predatory ‘pusher’ stereotypes. Indeed, the UK’s recent Drug Strategy refers to suppliers as “criminals seeking to profit from others’ misery” (2017: 2). We identified four ways in which stereotypes were discussed or presented by our participants. Firstly, stereotypes were invoked by ‘others’ (parents/colleagues) as a heuristic judgment/assessment of drug use or supply – as when Cliff’s mother feared gang reprisals for his leaving the drug trade. Second, by participants as a means of distancing themselves from a stereotype – for example, when Annabel cited her controlled consumption and successful life as a means of distinguishing herself from ‘the addict’. Thirdly, within the concept of ‘fishing’ when our participants made judgements about a persons’ demeanour or social activities that may link them to (however tangentially) illicit drug use. And finally, when users, such as Billy, would willingly utilise the ‘addict’ label if necessary, for occupational protection. Drug stereotypes therefore appear so ingrained in to the collective consciousness that even the users and suppliers in our study – whose behaviour and demographics directly challenge such stereotypes – utilise and draw upon such notions.

Conclusion

Taylor et al. (2016) argue that political and media rhetoric has created apartheid between certain substances on the basis of their legality. We argue that this apartheid could be extended to include the divide between users and suppliers, which hinges on an assumed relationship between vulnerable addicts and coercive drug pushers. The dichotomy between ‘addict’ and ‘pusher’ greatly simplifies our understanding of drug markets. We have demonstrated that our
drug takers and drug suppliers do not occupy vastly different groups. Despite deriving from two distinct projects, all our participants had attachment to conforming identities and the findings elucidate how social status acts as a protective feature against the stigma associated with drug behaviours. The divide between use and supply is created by the law, policy and the media. Further research that studies drug markets holistically is required to take in to account the often mutually-beneficial user-supplier relationship, and the close ties between these actors.

Our findings have the potential to advocate two polarised policy pathways. It could be argued that a greater proportion of police resources should be allocated towards these more socially privileged (largely hidden) drug offenders in order to redress the inequities of drug prohibition enforcement. The alternative pathway is to lessen the punitive means by which drugs and their associated harms are managed – with the aim of negating the and further disadvantaging some of society’s most marginalised groups. We favour the latter pathway given the detrimental impact of a drug conviction on an individual’s life-course (e.g. collateral consequences upon future employment opportunities), as well as the broader societal impact (e.g. the economic and social costs associated with a greatly expanded prison population) and the moral and political imbalances of the current model of prohibition which legitimates the use and supply of some psychoactive substances (caffeine, alcohol and tobacco) but prohibits others. We argue that decriminalisation, as adopted by Portugal and more recently Norway, continues to affirm an arbitrary dichotomy between users and supplier. We would instead advocate for the depenalisation of all non-violent drug offences. Resources could then be used to better effect: undermining the most noxious and harmful forms of markets (i.e. violent drug trades) whilst supporting a public health and human rights orientated approach to use.

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Conflict of Interest

The authors declare no conflict of interest.
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