**Navigating Drugs at University: Normalisation, Differentiation and Drift?**

**Originality/Value/Purpose:** Whilst drug use appears to be common amongst university students, this study moved beyond mere drug prevalence, and for the first time in the UK, used the 6 dimensions of normalisation to better understand the role and place drugs play in the lives of university students.

**Design/Methodology:** 512 students completed a Student Lifestyle Survey.

**Findings:** A differentiated normalisation is occurring amongst different student groups; the social supply of drugs was common, and some users are ‘drifting’ into supply roles yet such acts are neutralized. Students are ‘drug literate’ and have to navigate drugs, their consumption, availability and marketing, as part of their relationships, leisure/pleasure/study spaces and everyday student life.

**Implications:** Student drug use is not homogenous and very little is known about the nuances and diversity of their use/non-use beyond prevalence data. Qualitative studies are needed to better understand the processes of differentiated normalisation and social supply.

**Introduction**

University student drug use has consistently been shown to be widespread (NUS & Release, 2018; Bennett 2017; Newbury-Birch et al, 2002, 2000; Webb et al, 1998). However, research in the UK is patchy, sporadic, overly reliant on ‘class-room’ surveys excluding non-attenders and overly simplistic in focus on drug prevalence. Bennett & Holloway (2014:448) state: “in the absence of a more substantial research base some of the most fundamental facts about drug consumption among university students in the UK remain unknown.”

This paper explores the nomalisation of drugs, highlighting a nuanced and differentiated understanding of the concept before discussing the changing patterns of university student drug use including the role of social supply and drift. It moves on to discuss how university lifestyle may be key in understanding differential drug prevalence before presenting findings from the six dimensions of normalisation that show students are ‘drug literate’ and a differentiated form of normalisation is occurring for some groups within the student sample.

**Normalisation of drugs**

The term normalisation originated in the field of learning difficulties and disability (Wolfensberger, 1972) but was adopted in the drugs field in 1994 with the North West Longitudinal Study (NWLS) (Measham et al, 1994). Normalisation

*“highlights the way illicit drugs consumption, particularly by conventional ‘ordinary’ young people, has grown in importance within lifestyles...Normalisation…is more a conceptual framework to monitor, in this case, how attitudes and behaviour in respect of illegal drugs and drug users change through time...* *The issue is whether the ‘sensible’ use of cannabis and more equivocally amphetamines, LSD, ecstasy and cocaine has become sufficiently widespread and socially accommodated as to ensure that, first within their own social worlds and then in the wider society, we see ‘recreational’ drug users and their drug use being acknowledged as unremarkable and within normative boundaries.” (Parker, 2005: 206).*

Therefore, normalisation uses the following six dimensions, (i) drug availability or offers; (ii) drug trying or lifetime prevalence; (iii) current usage; (iv) intended future use; (v) being ‘drugwise’ regardless of individual experiences with drugs; (vi) evidence of a cultural accommodation in wider society (Measham & Shiner, 2009:503) to monitor key changes over time as a ‘barometer of change’ (Parker et al, 2002: 943*.*

Normalisation was praised for having

*“presented a new frame of reference for perceiving drug users as being controlled rather than chaotic, disciplined rather than disorganised, and proactive recreational consumers of drugs and drug-referenced goods (music, film, fashion, etc.) rather than passive dependent addicts.” (O’Gorman, 2016: 252).*

But, has been critiqued for its oversimplification of the acceptability of drugs in the lives of young people (Newburn, 1996, 1997. For it’s overstating the breadth and acceleration of societal change (Blackman, 2010, 2004), it’s use of lifetime prevalence data and an overemphasis on agency as opposed to structure affecting drug taking (Measham & Shiner, 2009; Shiner and Newburn, 1996, 1997, 1999). Contemporary critics view the original concept as too simplistic and expansive, and that it ‘homogenizes some aspects of youthful drug use and excludes others’ (Shildrick, 2010: 46).

Some critics have therefore suggested a more nuanced understanding of normalisation and have suggested the concept of differentiated normalisation, whereby different types of drugs and different types of drug use may be normalised for different groups of young people (Shildrick, 2002). Other forms of normalisation have emerged such as relative normalisation (O’Gorman, 2016) and denormalisation, (Pennay & Measham, 2016) to support a more diverse and nuanced view of normalisation.

**Drug taking amongst university students**

Lifetime drug prevalence rates for ‘any illicit drug’ amongst university students (can be seen in Table One) peaked at 66% in 2002 (Newbury & Birchet al, 2002).

**Table One: Drug Prevalence Rates Amongst University Students**

It would appear that there have been some key changes in university students’ drug use since 2014.

*“The most troublesome findings concern the high levels of multiple drug use, the use of some of the most dangerous drugs (including crack and powder cocaine and heroin, as well as ketamine), and the list of recorded harms experienced as a result of drug misuse.” (Bennett & Holloway; 2014b:448)*

Key changes include an expansion in the type and range of drugs consumed to include New Psychoactive substances (NPS), study drugs and prescription drugs along with use of the Darknet to purchase drugs (NUS & Release, 2018, Bennett & Holloway, 2014a and 2014b; Measham et al, 2011). Holloway et al, 2013). NPS are formerly known as legal highs, which contain one or more chemical substances which produce similar effects to illegal drugs such as cannabis, cocaine, ecstasy etc. Study drugs are prescription drugs used to treat for example, Attention Deficit Hyperactivity Disorder etc. used instead to increase concentration, alertness for the purposes of studying, assessment performance. The Darknet (Cryptomarket) is a place on the internet that allows in this case drug dealers and users to encrypt their communications, which provides greater anonymity to buy and sell drugs using Bitcoins (Power, 2013). Or in the words of Barratt (2012:113) an ‘ebay for drugs’.

Despite these changes, Cannabis remains the clear drug of choice (Bennett & Holloway, 2014b; Pickard et al, 2000). Although Cocaine powder and Ecstasy (both Class A drugs) now join Cannabis as the top three drugs of choice (Bennett & Holloway, 2014). They replace amphetamines, LSD, amyl nitrate, and magic mushrooms.

The social supply of drugs has become a dominant feature of young people’s drug use (Coomber et al, 2016; Duffy et al, 2008). Social supply of drugs occurs through friends sharing their drugs, gift giving, mutual turn-taking and recipriocity as opposed to directly sourcing drugs from a dealer ‘proper’ with the latter referring to someone directly involved in the drugs economy (Duffy et al, 2008; Coomber and Turnbull, 2007). Coomber et al (2016) draw upon Matza’s (1964) theory of drift. Matza’s theory highlighted the impact of low levels of self-control contributing to fluctuations into and out of criminal and deviant behavior as opposed to a person being inherently deviant or criminal. Coomber (2004) usefully highlights the often symbiotic relationship between normalised drug use and normalised drug supply especially when occurring via social supply networks.

*“Applying Matza’s theoretical framework of drift helps explain journeys into social supply not so much as conscious decisions, but instead as taking ‘‘short steps down a familiar path’’ rather than a ‘‘long leap down an unknown road’’…where respondents drifted into supply by virtue of finding practical solutions to enable their own drug use.” (Coomber et al ; 2016:261).*

Coomber et al (2016) highlighted the desire to maintain a supply of drugs and gain the best deals as key to users drifting into and out of drug supply roles with friends. Consequently, drug use and supply roles became increasingly blurred. The effect of drift typically resulted in neither the social supplier or the friend supplied viewing the act of drug supply as a drug deal by a dealer (Coomber 2004). Further, social suppliers drew upon Sykes and Matza’s (1957) ‘‘techniques of neutralization’’ as a heuristic device to rationalise and re-label their illegal actions as ‘‘normal’’, non-deviant and as acts of sharing and gift-giving. Social supply of drugs was normalised in the micro sites of recreational drug use (Coomber, 2016).

**The importance of University Life & Drug Use**

The shift to university life is a key transition point, and as a result, there may be something distinct about university students as a social group. The normalisation thesis,

*“As well as linking patterns of drug use to young people’s leisure transitions, the original thesis linked drug-using behaviours to transitions in education, family and housing“ (Shildrick, 2016: 264).*

Similarly, Bennett & Holloway, (2014b: 1) concluded ‘students might be particularly at risk of drug use as a result of features relating to university lifestyle’. They found that students had higher levels of drug use as compared to non-students in their analysis of 26,000 students and non-students from the 2010/11 Crime Survey for England and Wales (CSEW). Three key factors were found to contribute to higher drug rates, first, students living away from their parents, second, regular visits pubs and third, regular visits to clubs. A recent comparison between university students and 16 – 24 year olds from the CSEW, show higher lifetime drug prevalence rates of any drug use for university students at 41% and at 18% for the 16-24 year olds in the CSEW (Bennett & Holloway, 2014; Home Office, 2014).

Studies show that because of the changing landscape of Higher Education, students feel increased levels of pressure. This can be due to friendship changes, academic workloads, or the need to gain a good honours degree as half of young adults now enter H.E. (Jenkins, 2018), in a globally competitive job market (YouGov 2016). Additionally, students now graduate with an average of £40,000 worth of student debt (Thorley, 2017), and need to work whilst at university (YouGov 2016). Students have also shown a fivefold increase in mental illness in the last ten years, and have lower wellbeing levels relative to other sections of the general population. (Neves & Hillman, 2018; Thorley, 2017).

**Methodology**

The study aimed to move beyond mere drug prevalence surveys by using the six dimensions of normalisation to provide a fuller picture of the role and place drugs play in the lives of university students, and therefore by extension, to explore if, and how normalisation of drug use is occurring. In total 512 university students completed a Student Lifestyle Survey during the two-week period at the end of May 2014 from a total of 1242 social science students. This represented 41% of the total target population from a university from a city in West Yorkshire. Data collection occurred within the Social Sciences Department building, and respondents had to be a current social science student (studying Sociology, Psychology, Criminology, Politics, International Relations). 62% of the sample was female, 38% male and 91% were undergraduates with 9% postgraduates. These broadly mirrored the School of Social Sciences, and the overall student population of the university. In addition, 95% of the sample had a part-time paid or voluntary job and typically worked 15 hours per week. Only 8% of the sample lived with their parents, 25% lived in halls of residence, 50% lived in shared rented housing and 17% lived in their own house or flat. 33% described themselves as working class, 63% as middle class and 4% as upper class.

Questions used in the second segment of the Student Lifestyle survey were taken directly from Parker et al’s (1998) North West Longitudinal research instrument to allow for ease of comparison across results and consistency in the measurement of the dimensions of normalisation. Questions in the first and third segments explored engagement with university and hobbies, leisure and interests beyond university or drugs.

A form of non-probability sampling was used to counter the predominant approach in the literature of ‘classroom’ based methodologies (Newbury-Birch et al, 2002, 2001, 2000, Pickard et al, 2000; Webb et al, 1998, 1997, 1996, Somekh, 1976; McKay et al 1973) and allow for participation of non-attenders. Attendance in education can be negatively affected by drug use for some (Engberg & Morral, 2006; Roebuck et al, 2004). 11% of the current sample had missed a lecture due to drug intoxication in the last semester. Some question a truly representative random sample of drug users being attained given the inherent nature of the phenomenon and population type being studied regardless of sampling method (Salgnik & Heckathorn, 2004; MacCoun & Caulkins, 1996). Highlighting issues such as anonymity, confidentiality, using peer researchers to distribute the ‘Student Lifestyle Survey’ physically or virtually hopefully helped to minimise potential selection bias (Patton, 2004; Harrison, 1997; O’Farrell, Fals-Stewart & Murphy, 2003).

A paper and an online survey were used. Two trained level six undergraduate students administered the paper survey. Social Media was used to share a link to an online survey either via a Student Union Facebook post or Twitter tweet. There were no discernible differences in sample composition or the findings from the two modes of data collection. The online survey was created and administered using Qualtrics. Students were given a free university tea/coffee voucher and seven buy one get one free Pizza vouchers for their participation. Qualtrics was set up so that only one submission per IP address was possible to ensure that an individual could only complete one survey.

It should be noted that the research was conducted prior to the 'New Psychoactive Substances Act 2016' coming into force, making it illegal to supply any ‘legal highs’ for human consumption. It is difficult to gauge the impact of the absence of this legislation on prevalence rates for these drugs in the current sample but the cross-sectional design with its associated limitations sought to capture a snapshot of use at that point in time.

**Results**

The results from the current sample will now be presented in relation to the six dimensions of the normalisation thesis.

**(1) Drug availability**

Just under half (48%) of respondents stated that it was easy to get the drugs they wanted to use, and as one respondent stated, *“All drugs are easy to get, all year round and for a cheap price” (F 322).*

The top three sources of drug supply were firstly, from a friend (54%), followed by a dealer (25%), followed by online (7%). Typical responses included, *“Drugs are very readily available; my friends sell them cheap” (M 87)*. 31% of respondents had sold or given drugs to another student. The motivation for social supply occurred due to the friendship, as a consequence of the purchase, or as a practical cost sharing solution to enable their own use as opposed to gaining a profit by supply (Coomber et al, 2016). Only small-scale social supply was noted here as opposed to large commercial transactions.

The notion of ‘drift’ (Matza, 1964) emerged in the responses of students to supply drugs as opposed to the desire for financial profit. The process of drift was described by one student, who illustrates the blurring of the user and supplier dynamic, *“I’m friends with people who are regular drug users and they sometimes casually sort friends”(F109*). The practical solution to enable drug use featured also, *“A £20 bag of cannabis sees four of us through a good fun evening for the price of a pint and with no hangover. We take it in turns to buy.” (M)* 433*).*

Sharing and gift-giving acted as an inclusionary mechanism facilitating drug use, “I've never got drugs for myself, friends have shared theirs with me.” (F162), or some students only using “when they were free” (M225) or “when passed around” (F034).

37% of the sample was drug abstainers, of which 83% stated that it would also be very/easy for them to get drugs. Abstainers typically did not report any access issues. One respondent sated: *“I don't take drugs, but I am aware of how easy it is to get hold of [drugs]” (F 099).*

Access to drug dealers (proper) was easy and quick with an average delivery time of between 30-60 minutes. One respondent quoted, “It takes longer to get your Saturday night pizza delivered than it does your drugs” (M 342). They spoke about drug dealers advertising in student areas, receiving texts of “ *their deals and prices” (M002).*

Respondents had socially reconstructed the criminal offence of drug supply to differentiate between friends supplying and ‘dealers’. This points to evidence of the techniques of neutralization operating (Sykes & Matza, 1957) in line with other studies (Coomber et al, 2016).

The existence of the Darknet has the potential to alter the way in which drugs are sold (Aldridge et al, 2017; Martin, 2014). There is some debate about the potential harms and benefits of selling and consuming drugs from the Darknet. These range from increasing the spectrum and intensity of drug use, increase some transactional risks (e.g. rip-offs), but may provide better information on drug contents; and, reduce the prospects of for example violence or arrest (Aldridge et al; 2017:6). This respondent encapsulates the appeal of the Darknet,

*“if I want to buy legal highs which are readily available on the Internet and can have next day delivery by royal mail…Online drugs are incredibly cheap. Some websites have reward systems so if you buy a certain amount over a certain period you earn points, which lowers the price of future orders. This is my main reason for not buying cocaine - it is expensive and I can find drugs online that are cheaper, legal and have the same effect.” (F074)*

The proportion of drug users reporting purchase of drugs via the Darknet is small (Aldridge et al, 2017) similar to the finding here. Further, respondents here like elsewhere liked amongst other things the convenience of ordering from home, a cheap purchase price, quick home delivery and consumer reviews (Barratt, 2012).

**(2) Drug trying or lifetime prevalence**

The lifetime drug prevalence rates for university students in this sample are presented in Table Two. 63% of students reported consuming one or more illegal drug at some point in their lives. Cannabis was most prevalent at (53%), Ecstasy, (32%), Cocaine powder (26%), Amyl nitrate (23%). Lifetime prevalence of NPS was 16% and 12% for a study drug. Neither gender nor social class showed any significant correlation to having tried drugs.

The top three reasons for drug consumption were for fun/Pleasure (58%); for relaxation (48%), to enhance an activity (36%) and fit with normalisation motivations (Parker et al, 1998). The next two reasons were ‘to reduce stress’ at 26% and ‘to wind down’ at 21%.

Poly drug use revealed that the sample were not a homogeneous group in terms of their drugs of choice, routines, patterns or places of use. Poly drug consumption is where a person consumes two or more drugs in a ‘single event’ e.g. during a night out etc. The specific combination of drugs consumed during this ‘single event’ is referred to as a drug repertoire. 40% of university students had engaged in poly drug consumption. 225 poly drug events were recorded by respondents that produced 71 unique drug repertoires. 40% of respondents said that their poly drug repertoire consisted of two substances (alcohol and cannabis or alcohol and tobacco featured heavily in these poly drug repertoires). 28% consisted of three substances (alcohol, tobacco and either cannabis or ecstasy featured heavily in these poly drug repertoires). 17% consisted of four substances (alcohol, tobacco, ecstasy was often often combined with cocaine, ketamine or cannabis). 9% consisted of five substances, and from this category onwards the repertoires diversify more and it is difficult to summarise a typical repertoire. 3% had used six substances, 2% had used seven substances and 1% had used eight substances.

Students were asked what desired effects they sought to achieve during each drug event. Analysis revealed four distinct groups operating that points to a form of differentiated normalisation occurring highlighting the complexity of youthful drug consumption (Shildrick, 2010). Here it can be observed that some types of drugs and some types of drug use may be normalised for some groups of young people. Each group expresses their agency via their distinctive motivation or intention for their drug consumption; yet their resultant places and spaces of consumption, routines and rhythms of use and lifestyle are also mediated by diverse structural, temporal and socio-spatial settings (O’Gorman, 2016; Measham & Shiner, 2009).

**‘Get Wasted’ Group**

This group sought to be heavily intoxicated using more drugs during a single event usually at a club during the weekend. They wanted to: “get messy”; and “have a mad night”; to “get fucked up” (M109); or “to get wasted” (F157); and “not be in my own head” (M409). The patterns of use potentially suggest for some serious or heavy recreational drug use, given both the drug types consumed as well as a typically higher than average number of drugs in their poly drug-repertoires as compared to those from the other groups. Poly drug repertoires were most diverse for this group as compared to the other groups. A popular poly drug repertoire was LSD, ketamine, 25NBOMB, MDMA, Alcohol, Tobacco, and Cannabis. There were some initial signs emerging for some of the beginnings of problematic use given their selection of more serious statements relating to their concerns about their drug use and more frequent responses to serious concerns as compared to the other groups, such as “I worry I am dependent on drugs”, “My life without drugs is boring”, “I spend too much money on drugs” etc. This group typically worked between 15 and 24 hours per week in paid employment.

**Clubbing Enhancer group**

Ecstasy, alcohol, cocaine, cannabis and NPS were used by clubbers predominantly to provide energy to dance and maximize pleasure at the weekend in the mainstream night-time economy. Typical motivations for use included: *“increased enjoyment” (F078) and to “stay out longer clubbing” (M501)*; and to *“dance all night” (M255)*. Users in this group spoke of managing stimulant drug use and come downs, *“I get a buzz from the ecstasy and then I use the cannabis to cheer me up in the come down.” (F311).* The majority of this group lived in halls of residence and worked 15 hours or less a week in a job.

**Mellow Mood Group**

A clear profile of alcohol and cannabis use in an informal, social and private context at home with a small group of friends emerged. Respondents stated: “a few of us just get high and happy, and mellow out” (M368) and that “smoking together with friends is a good feeling” (F209). Their use predominantly occurred during weekdays and their poly drug repertoire typically consisted of alcohol, tobacco and cannabis.

**Study Group**

Study drugs were used by students to temporarily enhance alertness for academic attainment as opposed to ‘getting high’ recreationally. Respondents felt they: *“needed to pull an all nighter to catch up” (M499); or of simply needing “to get assignments done (F029)”* and for some because they were aware that *“other students are doing them [study drugs]. (M261)”* Common poly drug repertoires consisted of Modafinil, tobacco, Ritalin and tobacco. Consumption was not based on the typical hedonistic motivations and occurred both during the week and weekend.

**Student characteristics**

Females were more likely than males to have used a drug, however, no statistically significant differences were found by gender or for social class. Third year students had the highest levels of drug consumption (34%). Year of study and drug use in the last 12 months was shown to be statistically significant p = < .05. The average age of first use for the three most prevalent drugs amongst this sample is 16 for Cannabis, and 18 for both Ecstasy and Cocaine powder. The average age of first use for a NPS was 19, and 20 for a study drug.

**(3) Current usage**

In the current sample 25% of students were current users and therefore had used at least one drug on one or more occasion in the last four weeks. 38% were former triers, and 37% were abstainers. 100% of current users had friends who used drugs and (73%) had six or more close friends who used drugs, knew where to source drugs very/easily (83%), and considered themselves drug wise (94%), the majority of them considered using drugs in the future (100%), and 100% had no problem with others taking drugs. 56% had sold or given drugs to a friend.

The majority of abstainers had friends who used drugs (59%). 14% had six or more close friends who used drugs, and knew where to source drugs very/easily (83%). The majority considered themselves drug wise (69%), and a minority considered using drugs in the future (11%). Yet the majority (54%) also felt that others should not use drugs. 4% had sold or given drugs to a friend. This illustrates the micro-politics of drugs that results in contrasting and conflicting positions, behaviours and views (Hathaway et al, 2016; O’Gorman, 2016).

The majority of former triers had friends who used drugs (85%). 32% had six or more close friends who used drugs, and knew where to source drugs very/easily (96%). The majority considered themselves drug wise (56%), and considered using drugs in the future (55%). 86% had no problem with others taking drugs. 40% had sold or given drugs to a friend.

**(4) Intended future use**

Drug user status is not static and can change. 100% of current drug users said that they intend to use drugs again in the future. One current user stated *“Why wouldn’t I?”.* 55% of former triers and 11% of abstainers also intended to use drugs. Significant proportions of this sample intended to use drugs in the future. As one abstainer stated, *“I don’t think anyone can absolutely say never”*.

**(5) Cultural accommodation in wider society**

Depictions of drug use in the media were widespread with 83% of students stating that drug use had featured in the music/TV programmes/Movies/Magazines consumed. 78% said that they felt very/comfortable consuming media that featured drug use. As one respondent noted, *“I had to think twice about the question, I mean drug use being on TV or in magazines. It’s a given isn’t it?”. (M261).*

Further, evidence of the shift from drug use as a deviant activity into mainstream cultural arrangements can be seen as 59% of abstainers said they had one or more close friends who used drugs. 36% of students had six or more close friends who used drugs.

**(6) Being ‘drugwise’**

76% of respondents were very/knowledgeable about drugs and their effects. 69% of abstainers also felt this way. Poly drug users responses for the desired effects sought demonstrated clear drug knowledge. For others, Shildrick’s (2010) notion that young people are more ‘drugs aware’ than ‘drug wise’ would seem to fit here as drugs knowledge was limited, confused or absent.

The top three sources that students went to for information about drugs and their effects were, first, the internet (68%) for an easy, quick, reliable source of information offering a sense of anonymity. Second, their friends (61%) due to them having personal experience of using drugs and could be trusted. Third, their housemates (21%) for the same reasons cited for friends.

Despite high levels of self-perceived drug knowledge, students expressed concerns about ‘having an unpleasant come down’ (33%); of feeling paranoid or scared after taking drugs’ (26%); of ‘spending too much money on drugs’ (22%); of taking ‘drugs too often’ (19%); or ‘too much/too many drugs’ (17%).

**Discussion**

Access to and use of a broad spectrum of drugs to aid pleasure and fun during university life required very little effort. Drug careers developed and extended at university, for example, the onset of NPS and study drug use. Drugs are inclusive to a broad spectrum of university students regardless of gender, socio-economic status, ethnicity or age. The availability and marketing of drugs didn’t occur at limiting times, places or spaces, rather they had access through a range of sources.

The issue of normalisation is however a complex and nuanced one (O’Gorman, 2016). The micro-politics between abstainers, former triers, current users which include the 4 user groups, at times create interesting dynamics and requires students to navigate drugs in their day to day realities and relationships. It appears that different drugs and patterns of drug use may be normalised for different groups within the sample to differing extents (Shildrick, 2002) and are not uniform or homogenous. For example, the motivations, patterns and micro-sites of use for the club enhancer and the mellow moods group differ. Their micro-sites of choice were club versus home settings (public versus private), consumption typically occurred on different days of the week (weekend versus weekday). Students’ actions to consume are mediated by structural opportunities and constraints as well as their own desires and preferences.

The classic elements of controlled, recreational pleasure based consumption at set periods of the week (Aldridge, et al, 2011) were evident for the ‘clubbing enhancer’ and the ‘mellow moods’ group. Controlled, recreational pleasure based consumptionis is questioned for the ‘study group’. It seems that when, and what they use, is determined more by their workload, deadlines, stress levels and therefore not linked to hedonistic motivations. Similarly, the ‘get wasted’ group due to their desire to obtain a state of obliteration and their drug related health concerns, they do not seem to match this profile. Thus a differentiated normalisation appears to be occurring for some groups of students and not for others.

Both clubbing groups: ‘Get Wasted’ and ‘Clubbing Enhancer’, highlight the segmented nature of the night time economy (Measham & Moore, 2009) with their own distinctly different experiences during their weekend clubbing experiences. Data did not indicate that either group represented a subcultural or underground clubbing group, but rather, their differential motivations and experiences in part reflects the diverse and nuanced night time leisure consumer clubbing scenes. Similar, to the findings here, Measham & Moore (2009:455) noted that there were “significant differences in the polydrug profiles of customers in diverse urban playspaces”. Chatterton and Holland (2003: 94) concluded that ‘there is no “single” mainstream, but a variety of mainstream scenes’.

The mellow mood group appears to align more to the normalisation perspective of young adults enjoying leisure with their social network of friends (Aldridge et al, 2011) as opposed to the perspective that cannabis use represents opposition or cultural difference even when accounting for subcultures as a collection of rituals, stories and symbols (Sandberg, 2013).

The Study group is both culturally different due to their choice to use substances to give them a potential performance or attainment advantage, and they stand in opposition by their refusal to always adhere to legitimate study methods for the attainment of their degree classification (Kolar, 2015). It is therefore possible that this group has subcultural practices (Muggleton, 2000) that need researching further. They do not appear to be in alignment with the typical profile of controlled recreational leisure based hedonistic drug consumption (Measham & Shiner, 2009).

The majority of students relied on social supply via their direct social networks to source drugs through ‘friends’ and ‘friends of friends’ (Parker, 2000: 6) as would abstainers if they later decided to use drugs. Similar to Coomber et al, (2016) a generalised culture of social supply of drugs in the form of sharing, gift-giving, and small scale designated buying practices were found to be normalised here. These practices were inclusionary, enabling some to consume who otherwise would have been excluded from consumption based on price or low levels of disposable income.

The intricate relationship between recreational drug use and social supply (Parker, 2000) highlighted how ‘drift’ occurred for users. Here the drug use and drug availability dimensions of normalisation interact (Coomber et al, 2016) whereby the perceived deviance present in either use or supply is simultaneously neutralized by the other to produce a normalised effect. The linguistic distinction for the same act of drugs supply of a ‘friend’ versus a ‘dealer’ was universal and unquestioned amongst students, and highlights the use of techniques of neutralization (Sykes & Matza, 1957). This differentiated view of supply has also been acknowledged outside of the student population in the Sentencing Council Guidelines in England and Wales (2012) by using an understanding of ‘‘profit’’ and gain and ‘‘harm’’ to differentiate social supply from dealing ‘proper’.

The social network provides a protective barrier so that the majority of students do not come into direct contact with dealers from the drug economy, and ensures drugs can be exchanged in micro-sites that are less visible to the police (Aldridge, 2011). However, groups using and supplying in public microsites (clubbing enhancer and get wasted) may be more at risk of coming to the attention of club security and the police.

Improved partnerships are needed between university students, drug and alcohol services, universities, legal policy makers and the police to work together for the benefit of students. Clear tensions operate between such partners. For example, between UK drugs laws, the zero tolerance approach to drugs by universities, drug and alcohol services and a public health or harm minimisation approach and the routineization breaching of the UK drug laws in respect of recreational drug use and supply by university students.

The current research has limitations as it is uncertain whether the findings are representative of the wider university population at the target university or other universities, but nevertheless provides a valuable insight at least amongst this sample. The broad trends and levels of drug use found here mirror those of other recent university student studies (Bennett & Holloway, 2014; Bennett 2014) and from the normalisation literature (Parker et al., 1998; Parker, 2005; Parker et al., 2002).

Longitudinal research, larger or nationwide surveys using the six dimensions of normalisation are needed to provide richer data, trend data and geographic comparisons, to better understand the complexity of the variables operating. The findings here represent a first step. Given a differentiated normalisation being found, more qualitative research is needed to explore further the social meanings and normative context in which drug use occurs (Hathaway et al, 2016; Shiner & Newburn, 1997).

**Conclusion**

The six dimensions of normalisation have allowed for a greater understanding of how the perceptions, experiences, desires, motivations, intentions and lifestyles of the groups discussed are differentiated (Shildrick, 2002). It cannot be said that drugs are normalised amongst university students as a whole but rather drugs, drug use, and drug supply, take a form of differentiated normalisation within the lives of differing groups within the university student population. The use and supply of some drugs, in some locations at certain times in their weekly routines were more or less normalised depending on which group they belonged to. Regardless of group belonging, students are required to navigate drugs and drug taking in their relationships, in their study, social and leisure/pleasure spaces where drugs are present, marketed and consumption is taking place. Collectively, the findings from the six dimensions point to the fact that we have a cohort of university students who are ‘drug literate’ in the same sense we talk about someone being computer literate or emotionally literate.

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