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## **Title**

Cultural Competence to Cultural Obsolescence: Drug Use, Stigma and Consumerism

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## **Introduction**

This chapter considers the stigmatisation of drug users within the context of consumer capitalism, arguing that the contemporary remit and nature of stigma is increasingly shaped by consumerism and its polarisation of proficient and flawed consumption practices. Its point of departure sees the socio-political positioning of substance use as a drug apartheid (Taylor, Buchanan & Ayres, 2016) with the legal status of different drugs aligning with the evolution of capitalist markets, their subjectivities, drives and needs (Ayres, 2019, 2020). The ensuing outcome, in a society where *everyone* is a drug consumer, is that the substances we consume interact with our real/imagined social status and in the construction of our unique and individualised identity(s); a process governed by both the type of drug and its consumer.

Stigmatisation, therefore, is seen as being determined - in both form and application - by a neo-liberal era of consumer capitalism, which sees engagement with consumer markets and the consumption of goods mediating all aspects of social life, including citizenship. Neoliberalism, according to Harvey (2007: 2) is 'a theory of political economic practices that proposes that human well-being can best be advanced by liberating individual entrepreneurial freedoms and skills within an institutional framework characterized by strong private property rights, free markets, and free trade'. It is in this context that the drug apartheid - a concept defined by Taylor and colleagues (2016: 459) as an arbitrary division of drugs 'that has privileged the use of certain substances and outlawed the use of other substances, a corrupt system that has much to do with who uses the drugs and little to do with the risks posed by the drugs' - has flourished. Hence, while certain legal drug markets prosper within the neo-liberal context with, for example, a loosening of regulatory restrictions, other substances and their users are simultaneously posited as detrimental to the functioning of the dominant order.

Resultantly, a range of negative stereotypes surrounding some drugs and their users exists, but not others, which over time have been shown to result in stigmatisation and spoiled identities (Goffman, 1963). Here, the consumption of certain drugs 'spoil' individuals as they are seen as deviating from

social norms (UKDPC, 2010a, 2010b). As the ensuing discussion will show, however, these social norms are contradictory, discriminatory, and harmful due to the drug apartheid. Importantly, whilst substances can represent the *attribute* which Goffman (1963) refers as being *deeply discrediting*, they can conversely, depending on what substance and how/by whom it is used, be an indicator of social competence and status. Hence, on the one hand righteous consumption of licit drugs infers cultural competence, indicating effective citizenship within set parameters, serving crucial social functions, and even acting as a signifier of success. Whilst on the other hand inappropriate drug use infers cultural obsolescence, indicating the failure of users to make the right consumption choices, abide by neo-liberal notions of responsible consumption, and play an active and productive role in society (Reith, 2004). This juxtaposition means that those who consume drugs such as heroin, crack cocaine, and spice are jettisoned into the cultural abyss. They are stigmatised as ‘addicts’ but also as flawed consumers (Bauman, 2000), unable to engage with the virtuous consumptive practices of the majority. It is in this context that the drug apartheid operates and thrives, as stigma – a public form of branding – is used to demarcate those who deviate from societal norms, acting as a mechanism of social control (Szasz, 2003).

Crucially, at a time when capitalist markets in relation to substance use are rapidly evolving, there exists a liminal space between these two extremes, which sees the boundaries between acceptable and unacceptable consumption based on notions of the licit and illicit blurring. On one side market forces are demanding we make healthier, less risky consumer choices, meaning that those who use legal drugs inappropriately are increasingly framed as social pariahs. While the liberalisation of laws around cannabis in certain jurisdictions means that the once stigmatised (see Young, 1971) are being repositioned. As such, it is only through a consideration of the position and outcomes of all drug consumption within the ever-evolving context of consumerism, that we can fully locate the historical and contemporary existence, application, and consequences of stigmatisation – and, as this chapter argues, illustrate the purposeful role this serves in ensuring the smooth order of the (harmful) socio-economic status quo.

To explore these competing and indeed contradictory facets, we utilise and attempt to build upon Goffman’s seminal work on stigma, employing his straightforward definition of stigmatisation as a status or ‘attribute that is deeply discrediting’ that reduces a ‘whole and usual’ person ‘to a tainted, discounted one’ (Goffman, 1963: 12), particularly when it becomes their master status, as is often the case with those labelled problematic substance users. For Goffman (1963), the new identity ascribed is internalised, so they take on the new role/identity being assigned to them (master status), which influences the way they see themselves (see also Becker, 1963). It is also important to acknowledge that ‘shifts have occurred in the kinds of disgrace that arouse concern’ (Goffman, 1963: 11), which can be seen in the consumption of (some) drugs by some users throughout history, yet stigmatisation has mostly been reserved for those obvious/visible problematic illegal drug users (UKDPC, 2010a). Here,

we consider issues of stigma within a framework which locates drug consumption on a spectrum of social acceptability. This provides insight into the differential positioning of substances within the current drug apartheid, the drug's social status, framing, function, and outcomes, illustrating how a hierarchy of substance use exists within the context of neoliberal consumer capitalism.

The theoretical spine of this discussion draws attention to two key processes. Firstly, that the drug apartheid provides a vehicle to mobilise society against what Bauman (2007) refers to as the collateral casualties of consumerism, whereby those addicted to illegal drugs are framed as failures in terms of their consumption choices and *de facto* their civic existence as morality is now relative and determined by the ability to be an efficient and ethical consumer. Secondly, that the drug apartheid distances certain substances from the 'drugs' label allowing their consumption to be understood as an indicator of social competence/functionality, attracting commendation rather than condemnation. This is a process which ironically demonstrates the essentialism of drug consumption, and even addiction, to the economic and social fabric of modern society and the construction of individual identities (Ayres, 2019, 2020).

In conclusion, we argue that there is a need to reconceptualise our understanding of drugs to contest the ongoing drug apartheid and to reposition attention onto the wider sphere of substance use with the intention of developing a single regulatory system which encompasses all currently legal and illegal substances. In doing so, we recognise the full spectrum of social harms and benefits that arise not only from substance use, but from society's reaction, stigmatisation, and criminalisation of certain substance use/users; and its juxtaposed accommodation and celebration of others, despite them being as/more harmful.

### **Cultural Obsolescence**

Whilst the prohibition of certain substances is justified as 'evidence based' (Taylor, 2016) a body of writers contend that the legal/illegal drug dichotomy is grounded in political, economic, and moral bias (Szasz, 2003; Pryce, 2012). Instead of being rooted in science, this framework is legitimised through a fallacious interlinking of problematic populations, using problematic substances, and engaging in problematic behaviours (Taylor, 2008). In essence, therefore, prohibition represents a system of control premised on capital rather than scientific harm (Ayres, 2020) – a system more accurately described as the drug apartheid, which privileges certain drugs and their users whilst criminalising others (Taylor, et al, 2016). So while certain intoxication practices are deemed socially acceptable and desirable, the practices of others are framed as social ills that require punishment and/or treatment (Ayres & Taylor, 2020). Instead, unprivileged substances (i.e. illicit drugs) are blamed for many of society's ills (e.g., crime, disease, promiscuity, violence and abuse), while the wider systemic causes of societies objective

violence is disavowed (Žižek, 2008). It is in this context that certain substances, particularly illegal ones, act as a scapegoat, which sees their users ritually persecuted (Szasz, 2003) and in some instances stigmatised (Goffman, 1963). This is a malaise underpinned by illegal drugs being framed as inherently harmful, uncivilized, and resulting in a key outcome - addiction. Addiction is associated with a 'junkie scumbag' narrative (Radcliffe & Stevens, 2008) that infers its prevalence among certain types of people, who use certain substances and consume outside the boundaries of acceptability. Here, addiction is used as a cypher for concerns about a lack of control (Reith, 2004), to illustrate the inevitable consequences of inappropriate drug/lifestyle choices, as the fairy-tale villain through which we persuade people to 'just say no' to avoid becoming not only addicted but also an 'addict'.

Indeed, the 'addict' is stereotypically portrayed in society as a spectacle, which acts as a warning to us all to stay away from drugs (Ayres & Jewkes, 2012). The power of some drugs is emphasised/portrayed as a demon possessing and haunting individuals, destroying them both morally but also physically (Ayres & Jewkes, 2012) reducing them 'from a whole person to a tainted, discounted one' (Goffman, 1963: 3). While a dependency on other more privileged drugs (e.g. caffeine) is not only ignored/glossed-over, but is actively solicited (e.g. via the new coffee shop culture) and encouraged (e.g. sugary rewards for children). Such incongruences are not only indicative of the dichotomies inherent in drug policy and the wider political economy, but they also illustrate capitalism's dynamics of (planned) obsolescence (Burlow, 1986). In this sense capitalism constantly seeks to revolutionise itself via new products, services, substances, lifestyles, and experiences, which also perpetuates the illusion of freedom and choice (Winlow & Hall, 2016), as every aspect of life is constantly revolutionised and commodified (Bauman, 2000). This ethical and moral framing influences the social and cultural processes that arise from the spectacle as the 'boundary lines between conformist and deviant, good and bad, healthy and sick' are continually drawn and reasserted (Cohen, 1971: 10). Those lacking the fortitude to 'say no' are ultimately held responsible for their morally reprehensible decision to use such substances, which simultaneously acts as a symbolic indicator of their morally repugnant lifestyles, creating a 'twofold stigma' which questions the utility of such populations within the neo-liberal social-economic order (Atkinson & Sumnall, 2020: 2).

Consequently, addiction to illegal drugs has become a metaphor for failure, with the 'addict' exemplifying Bauman's (2007) collateral casualties of consumerism. Here, addiction represents flawed consumption (and therefore citizenship) as it 'turns the sovereign consumer on its head, transforming freedom into determinism and desire into need' hence 'rather than consuming to realize the self, in the state of addiction, the individual is consumed *by* consumption; the self destroyed' (Reith, 2004: 286 emphasis in original). Addiction, therefore, whether seen as a disease or value driven choice (Pickard, 2020), is portrayed as a moral failure as 'addicts' constitute flawed consumers - yet in reality these consumers are merely heeding the calls/demands of the market (Žižek, 2014; Ayres, 2019, 2020).

Resultantly, moralistic notions of self-responsibility permeate understandings and responses to consumerism generally and addiction more specifically. Consequently, state intervention is perceived as both necessary and benevolent (Brown & Wincup, 2020), as competition between individuals is sublimated (Winlow & Hall, 2013). Hence, the category of the 'junkie' through its association with uncontrolled substance use, specifically heroin use, and criminality (Radcliffe & Stevens, 2008), threatens the social order and thus warrants condemnation, which as Bauman (2000), drawing on the work of Levi-Strauss observes, manifests as stigmatisation and results in either their exclusion (anthropoemic) or assimilation (anthropophagic).

The stigmatisation of these casualties of consumerism therefore presents a warning to us all. It is a warning that many heed, aware of the ever present threat of apparent harm and stigmatisation. According to official statistics, the majority of the public do not use illegal drugs (ONS, 2020), a key reason being that they associate such use with problematic outcomes (Fountain et al., 1999) and/or being contrary to personal values/self-image (Rosenberg et al., 2009). Meanwhile the significant minority that do use illegal drugs actively engage in processes to avoid stigmatisation in both their personal and professional lives through carefully managing disclosures of use, not engaging with drug services etc. (UKDPC, 2010a; Askew & Salinas, 2019). Here, we see those whose wider lifestyles indicate an allegiance to the wider norms and demands of a successful neoliberal consumerist existence – a group who Askew and Salinas (2019) refer to as the *law-abiding criminal* - camouflage their second lives to maintain a position of social credibility. Nonetheless, their activities do receive denunciation from authorities but rather than proactively policing these, there is an attempt to shame those involved as unethical consumers who should modify their irresponsible marketplace behaviours (Siddique, 2018; Elliot, 2021). This is a process with lineage in the UK whereby free market access to products such as alcohol and on-line betting is accompanied by the contradictory messages to drink and gamble responsibly. Whilst there is some apparent public compassion for those who fail to assert control and progress towards addiction then (Roberts, 2009), there is a strong belief that such an outcome is explained by personal (moral) failings (UKDP, 2010b) as drug use is consistently linked to morality.

Drug addiction has a long history of being posited, understood, and responded to on moral grounds (Berridge, 2013; Szasz, 2003). Whilst this can take the form of 'addicts' being perceived as victims of circumstance (or indeed diseased) and considered with a degree of public sympathy, the dominant narrative of drug scares (Reinarman, 1994) associates drug users with an outsider status, concurrently constructed as vulnerable, peripheral, damaged, and dangerous. In fact, addiction is a convenient term to describe disapproved consumption patterns, in this instance for substance use. Historically, 'addicts' have been labelled as evil, amoral, and passive individuals controlled by the substance and who would do anything for their next fix as they are demonised, scapegoated and othered (Szasz, 2003; Berridge, 2013). Drug users and 'addicts' are something we should not be. In an epoch of fear, the addicted have

been framed as a threat that needs to be exposed and/or managed – a belief that has seen an extension of prohibitive drug laws and the implementation of ever more punitive responses to such individuals (Ayres, 2019). Instead, the dominant perception is that ‘addicts’ contaminate communities and in any ‘decent’ society they constitute ‘matter out of place’ (Douglas, 1966: 36). Resultantly, we see addiction as a threat – a threat which arises due to poor individual consumption choices (Bauman, 2001). Hence those who choose to use illegal drugs who consequently become enslaved through an inability (for biological, psychological, or sociological reasons) to control this, become a fundamentally different entity (Taylor, 2016). Whilst constructions of this threat show a proclivity towards racial, sexist, and class-based bias, they fit into a broader theme of concern around the monstrous, immoral consumer.

Whilst addiction is therefore a failing, it is the wider connotations attached to the stereotypical ‘addict’ that cement their position as a social failure – an inability to work, ill-health, unacceptable parenting, reliance on welfare, committal of economic-impulsive property crime (Taylor et al. 2016). ‘Addicts’ erroneous consumption of drugs becomes the defining factor in their lives and identities. Their addiction is blamed for everything that is wrong as they are held individually responsible for consuming outside the boundaries of acceptable and legitimate consumption. Hence the addicted are ‘portrayed as lax, sinful and devoid of moral standards’ (Bauman, 2007: 34). Their spoiled identities are deeply discrediting as it distinguishes them – the drug user – from other members of society. Those who encounter addiction, or more precisely those who encounter addiction who are drawn from certain populations, are framed as a menace to the status quo – an already marginalised population, who despite the illusory freedom offered by contemporary consumer society are unable to engage with, or contribute to it ‘properly’, and who therefore endanger our way of life (Douglas, 1966). Resultantly, they are posited as a problem to be managed, legitimising continued adherence to policies of drug prohibition and the bifurcated criminal justice system’s coercive/punitive responses to those deemed problematic drug users (Brown & Wincup, 2020). Here stigma is used by communities, individuals, the state, and its agents to strengthen, produce and reproduce social inequality (Parker & Aggleton, 2003) - with drug ‘addicts’ exemplifying how the ritual persecution of scapegoats pervades society (Szasz, 2003), invoking stigma (Goffman, 1963). Not only are certain forms of consumption vilified (e.g. excessive), but as Szasz (2003) shows, policies scapegoat certain drugs and their users illustrating the drug apartheid.

Yet the scale and scope of the ‘monster hypothesis’ is both fluid and related to the evolution of the consumer marketplace, which manipulates and shapes our desires (Baudrillard, 1998). Monaghan and Yeomans (2016: 126) have emphasised the need to consider the convergence of drug and alcohol policy in the UK around the central facet of the ‘problematic behaviours of problematic populations’ noting that ‘...problem drinking and drug use are located within groups who exist somewhere outside of the societal mainstream’. While untrue, this argument draws attention to how the use of alcohol (and indeed

tobacco) in certain ways has begun to blur with the characteristics of the illegal drug consumer we identify above. In relation to alcohol, recent decades have seen UK government funded marketing campaigns with taglines such as ‘know your limits’, ‘fewer units more happy hours’, ‘you wouldn’t start your night like this so why end it that way?’ all emphasising the need for personal accountability in relation to alcohol consumption. Such thinking reinforces the message to consume and engage in risk, just not too much or they only have themselves to blame (Bauman, 2001; Žižek, 2008, 2014). It is also reinforced by partnerships between UK government and industry which frame engagement with these liberalised markets as an individual responsibility (e.g. Drinkaware). So, whilst the majority engage with multi-buy offers on alcohol in supermarkets and happy hours in local bars in a sensible manner - therefore legitimising the legality and freedom of the market - a minority are unable to show such restraint (e.g. street drinkers; binge drinkers). Consequently, the latter group of flawed consumers become the target of policy advancements which seek to control and change or failing that exclude their behaviour as individuals seen as responsible for their own stigma are more heavily stigmatised (UKDPC, 2010a). Resultantly, whilst heroin and crack cocaine users have consistently maintained a position as fallen and flawed individuals, there is a blurring of such unacceptability with those who use licit substances yet in unacceptable ways (e.g. pregnant women who smoke) (Ayres & Taylor, 2020).

As Goodwin and Griffin (2017: 21) note ‘in exercising consumer-based lifestyle choices, the individual is recast as an entrepreneur of the self who becomes responsible for their own fate’. Hence, those who lack the ability to consume (Bauman, 1995) or those who consume beyond the boundaries of acceptable and civilised consumption (Ayres, 2019, 2020), are marked out as beyond the boundaries of social order (Douglas, 1966). Those that stray are criminalised, stigmatised and excluded as they become ‘wasted humans’ potentially infecting and polluting the rest of society and its normal functioning (Bauman, 1995, 2004; Douglas, 1966). It is here that the politics of exclusion (anthropoemic) implemented by the state operates, which, according to Bauman (2001: 96), has a tribal element that leads to a ‘balkanisation of human coexistence’, imposed through society’s objective violence (Žižek, 2008). This justifies the conjoined strategies implemented by society aimed at eradicating otherness as well as the unwanted ‘Other’, which applies to the stigmatised drug user:

All over the urban spaces of the lands conducting the civilizing crusade. Fighting the 'ethnic cleansers', we exorcize our own 'inner demons', which prompt us to ghettoize the unwanted 'foreigners'...to demand the removal of obnoxious strangers from the city streets and to pay any price for the shelters surrounded by surveillance cameras and armed guards (Bauman, 2000: 199).

Instead, society has created public spaces designed to nullify otherness or exclude others via a bricolage of enclaves where we only encounter people just ‘*like us*’ (Bauman, 2000: 176, emphasis in the original)



to create ‘a pathology of public space resulting in a pathology of politics’ (Bauman, 2000: 109). Thus, the flawed consumers – the outcasts – either warrant assimilation via treatment and therapy - or exclusion that operates as a form of social control (Szasz, 2003). Public (and structural) stigma allows drug ‘addicts’ and vagrants (many of whom are also substance users), to be physically excluded from public spaces (Ayres, 2019), employment (Singleton & Lynam, 2009), and clinical interactions (Chang, Dubbin & Shim, 2016) to be treated and cured of their malaise (Ayres & Taylor, 2020); they become a problem to be resolved or concealed (Bauman, 2004, 2007), which is ideologically justified. It is in this context that the moral relativism that pervades contemporary society channels/sublimates competition, whilst also facilitating feelings of moral superiority over others (Winlow & Hall, 2013). What we, and you as the reader of the chapter, fail or are unwilling to recognise, is that we are *all* drug users and many of us are also ‘addicts’, it is just that we are dependent on socially acceptable and sanctioned substances like sugar and caffeine that for the majority of us, does not impact on our productivity or ability to be a productive and consuming citizen, since citizenship is reserved for the good (not the unruly) consumers.

Instead, these ideologically biased perspectives serve as ‘both an enabling condition and a pervasive ideological outcome of our systemically violent liberal democracies’ (Taylor, 2010: 147) perpetuating capitalism via its system of divide and rule as ‘fantasy constructs the scene in which...the Other [the ‘addict’, the ‘junkie’]’ wants to steal or has already stolen our enjoyment, partly by threatening to ruin our way of life’ (Žižek, 1997). Rather than acknowledge that capitalism has no ‘genuine grounding in morality’ (Winlow & Hall, 2013: 57), ‘addicts serve as a warning to us all; the ‘memento mori’ sandwich men walking the streets to alert or frighten the bona fida consumers. They are the yarn from which nightmares are woven’ (Bauman, 2007: 32) and the only way to redeem themselves is via consumption; the consumption of products and services available from the legitimate marketplace (Ayres, 2020).

It is only by consuming such products and services (e.g. drug treatment) that the flawed consumer with their spoiled identity can redeem their citizenship and be assimilated (anthropophagic) back into society as ‘getting rid of that stigma... now conditions happiness; and happiness, as everybody would agree, needs to be paid for’ (Bauman, 2007: 37). Nowhere is this more evident than around illicit drugs, where we have a responsibility to consume ourselves out of addiction via the products and services proffered on the contemporary marketplace as drug use and addiction is individualised and pathologized. People are seen as either weak willed or sick, while the external, social, and political economic factors are disavowed (Žižek, 2008). As Bauman (2004: 118) contends:

The state washes its hands of the vulnerability and uncertainty arising from the logic (or illogicality) of the free market, now redefined as a private affair, a matter for the individuals to deal and cope with by the resources in their private possession.

Illegal drugs use, addiction and stigma are therefore entwined within the content of neoliberal consumer capitalism, yet it is important not to view these phenomena in a substance use vacuum. Whilst some have recognised this by unveiling how not only dependent but also recreational drug users and dealers negotiate processes of stigmatisation (Askew & Salinas 2019), there is a need to move beyond a focus on solely illegal drug markets (Ayres & Taylor, 2021). We must, therefore, expand our horizons into the wider drug apartheid to explore the social position and indeed negation of stigma in relation to legally accommodated drug consumption – as it only through an acknowledgement that other drug users gain social credence and identity from their use, that we develop a fuller understanding of the stigmatisation of illegal drug users as failed consumers.

### **Cultural competence**

Whilst considering issues of stigmatisation in relation to illegal drug users is therefore insightful, to recognise that such a process of stigmatisation is purposeful rather than an unfortunate by-product of the drug apartheid, there is a need to consider the wider malaise of drug use within consumer society, and indeed the differential social reaction it receives. For whilst a spoiled identity may ensue from illegal drug use, most drug use affords a socially competent identity free from stigmatisation. The key reason being that in the context of consumerism there sits a hierarchy of substance use – one built not on the premises of reason, science, harm or danger but on the expediency of respectability, popularity, class of user and profit.

Resultantly, this is a house built on sand, which lacks a logical underpinning foundation and therefore has no structural integrity. Yet it uses the stigmatisation of the drug using other to camouflage these weaknesses: cloaking the systematic processes of corporate harm and structural inequalities inherent in contemporary capitalism, serving to control those deemed uncivilized, problematic and dysfunctional yet rewarding those who engage in practices, which although equally harmful (on an individual, social, environmental level) are deemed acceptable (Buchanan, 2015). Whilst critical drug scholars have therefore focussed on the stigmatisation of a minority of drug users, to fully expose the contradictory practices of the drug apartheid and the harms faced by this group, there is a need to ‘destabilize the boundaries’ (Ivins & Yake, 2020: 34) of drug prohibition by considering the social stature of, and harms experienced by, the majority (Ayres & Taylor, 2021) as processes of stigmatisation represent a purposeful tool for the perpetuation and evolution of the capitalist status quo. It is therefore imperative to expose how those licit drugs, which promote harm on an equal, if not greater scale than illegal drugs (Taylor et al., 2016) are socially accommodated and embedded, demonstrating how the differential social positioning of a drug and its users enables the continuation of the two central motivations of the drug apartheid – ongoing profitability and control.

Taylor and colleagues (2016) argue that the legal/illegal positioning of substances is arbitrary as the claim that such categorisations are governed by notions of harm is untenable. Within these frameworks, however, the utility of different substances is far from arbitrary as they provide intentional outcomes. Take for example our incentive system with young children whereby good behaviour is positively reinforced through treats such as ice creams, sweets, fizzy drinks, and chocolate. Here we provide sugar (and caffeine) as a reward for social success with conformist behaviour positively reinforced with the supply of a drug over which children crave due to its deserving and pleasurable characteristics (McCafferty et al., 2019). While most people see nothing inherently wrong with rewarding children in this way, the reality is we are encouraging them to eat what is scientifically posited as a poison, that they will become addicted to, and which has the potential to cause many of the same harms we attribute to alcohol - and yet there are not many who would reward a child with a glug of whiskey or a bottle of gin (Lustig, Schmidt & Brindis, 2012) after they have put their toys away, but why?

The answer is that our understanding and accommodation of drugs are governed by engrained understandings of dominant social practices (Bancroft, 2009) – which are themselves engineered by the consumer marketplace and contemporary ideology (Ayres, 2020). The substances used by the majority result in sought after social reactions and labels (Becker, 1963) because they are used by the majority. The stigmatisation of the minority occurs because they are just that – the minority – a tangential group, on the periphery, the other. Let alone when the drug use of this minority is combined with other stigmatised traits/backgrounds including class, race/ethnicity, and sexuality. Whilst the question of why illegal drug use is stigmatised is therefore a relevant one, it is insignificant in relation to the more imposing question of why the majority of drug use – which prompts a much wider scale and scope of harm – is constructed as socially acceptable/competent.

It is essential to therefore realise that the consumption of the ‘right’ substances does not invoke stigma unless you exceed the constantly changing and contradictory limits of acceptability outlined/proffered by postmodernity’s imaginary ideals and moral relativism. This means that most drug use, despite resulting in greater harm than that associated with illegal drug use, fails to attract condemnation. Instead, it is indicative of cultural competence and conspicuous, often wasteful, consumption (Ayres, 2020; Veblen, 1969). In fact, luxurious substances like Krug champagne, diamond encrusted Royal Courtesan Gurkha Cigars or Henri IV Dudognon Heritage Cognac have shaped the spirit of capitalism (Veblen, 1969; Baudrillard, 1998; Ayres, 2020). Quite aside from whether consumers enjoy the taste of these products, their consumption is associated with celebrations of wealth, status, and achievement alongside the formation of identities as people consume themselves into being (Baudrillard, 1998). Indeed, ‘champagne wars’ among the rich and famous see oligarchs attempting to outspend each other to become the ultimate embodiment of success (see Binns, 2013) as everyone attempts to stand out from the crowd but also fit in as they conform to the imaginary ideals and symbolic frames of reference

promoted by neoliberal capitalism (Baudrillard, 1998; Hall et al. 2008). In fact, consumerist performances/behaviours determine their inclusionary or exclusionary status. Even when used to excess, rich and famous ‘addicts’ are not stigmatised and excluded, instead the celebrity ‘addict’ living the high life makes money from their addictions, as addiction sells, and moral relativism dominates. Look at Russell Brand who has made a career from his addictions or Kate Moss who increased her market value after being dubbed ‘Cocaine Kate’ (Ward, 2005; Vernon, 2006). However, it is not just the consumption of luxury substances by the rich and famous that warrant such a reaction, we also see it with more mundane and everyday privileged non-drugs like caffeine and sugar, which an addiction to is neither mentioned nor acknowledged, and may in fact be actively encouraged.

The social positioning of substances and their consumption therefore relates to socially reinforced norms and patterns of behaviour, but also to how we construct our social identities and leisure time, our lifestyles. A good example here, is the way people organise social interactions around (non) drug consumption (e.g. meeting for coffee or going for afternoon tea). Whilst such a rendezvous may not immediately appear drug focussed, the social position of a drug, caffeine (and sugar) in this instance, is crucial to the whole meaning, experience, and existence of such behaviour. Here, we can draw on an exchange from the film *Good Will Hunting* (Van Sant, 1997);

Skylar: Maybe we could go out for coffee sometime?

Will: Great, or maybe we could get together and just eat a bunch of caramels.

Skylar: What?

Will: When you think about it, it's just as arbitrary as drinking coffee.

Will's comments are astute, but he is wrong to assume that meeting for coffee is arbitrary. Instead, it represents a lifestyle choice, one in which the competent consumption of caffeine is a key factor in a wider cultural experience which espouses sophistication. It also allows consumers to implement their freedom and partake in ethical consumption, as everyone seems to have bought into the new coffee ethic; an ethic that legitimises the non-drug coffee and promises its drinkers redemption (Žižek, 2008). Meeting for caramels simply does not carry the same social significance. Instead, going for a coffee in chains like Starbucks are imbued with ideology (Žižek, 2014) as are other substances which includes drugs and non-drugs (see Ayres, 2020). In fact, although you may pay more for coffee in Starbucks (as well as other ‘good’ coffee houses/chains) you are buying more than just a coffee, you are buying into a lifestyle choice - ‘a coffee ethic’ – that constitutes ethical consumption, which means you are partaking in ‘good coffee karma’ that offers you redemption for being nothing more than a consumer (Žižek, 2008, 2014).

The centrality of substance use to such cultural experiences and lifestyles epitomises the wider role it plays within our consumerist existences and the exigencies of capitalism more widely (Ayres, 2019, 2020). Indeed, substance use increasingly plays a pivotal role in our attempts to redress the substantive lack whilst acting as a medium through which we may avoid disparaging social labels which demarcate us as flawed (Ayres & Taylor, 2020). Consumption of these substances put us ahead of the competition (Ayres, 2019, 2020) as everyone strives for perfection (Bauman, 2007; Hall et al. 2008). Here we see people consume an array of legal substances (which are increasingly procured through illicit marketplaces - see Hall & Antonopoulos, 2016) to achieve a desirable social identity/image/status - e.g. Viagra and masculinity (Loe, 2001); steroids and an enhanced body image (Begley, McVeigh & Hope, 2017); cosmetics and beauty; pharmaceuticals and health (Ayres, 2020). These (non)drug users, rather than warrant condemnation and stigmatisation, actually elicit envy and desire, despite consuming sham objects that are potentially harmful – more harmful than many illicit and prohibited drugs (Ayres, 2020; Winlow & Hall, 2016). These are (non)drugs around which users project an image of themselves and their accomplishments, indicating their eminence (Hayward & Turner, 2019). For at a time when a demand for ethical consumption interweaves with a middle-class desire for authentic, artisan products that detach users from the gullible crowds who lack the ingenuity and independence to break free from mass produced goods (Thurnell-Read, 2019), drug use has become a key defining feature around which we both inwardly and outwardly centre our lives and lifestyles around. We have therefore seen the reinvention of established alcohol products which boast their craft credentials, one only has to look at the ‘embourgeoisement of beer’ (Thurnell-Read, 2018) whereby it has moved from being ‘bitter’ to ‘real ale’ to ‘craft ale’ with an explosion in the markets surrounding the product allowing those involved to centre their leisure pursuits around this (through attending beer festivals, brewery tours or micro-pubs). Simultaneously a beer’s craft credentials mean its consumers distance themselves from the crass orange, pink and blue flavoured products imbibed by the stigmatised binge drinking neanderthal (Thurnell-Read, 2017).

Engels et al. (2020) have argued the need for more positive drug stories relating to illegal substances to enable users to move beyond a stigmatised identity to one which demonstrates a degree of pride. Just as the brand of beer one drinks can reflect on one’s self-image, so could the type of ecstasy tablet. Yet this is not the case. But when considering this we must recognise that this demarcation is not grounded in any rational scientific basis. Legal drugs are equally, if not more dangerous than illegal drugs, despite the former being illicitly produced. The stigmatisation of drug use and users therefore is only achieved through society attributing stigma to the use of certain substances and not others. In an alternative universe, a daily dose of amphetamine in a morning might be acceptable, a night-cap of heroin equally so; whilst a double shot of coffee with sugar to wake us up and a large whiskey to send us off to sleep might attract condemnation. The position of a drug in the hierarchy of the drug apartheid – and the ensuing stigmatisation that it does or does not receive, is not an accident and is certainly not governed

by the inherent danger that it apparently represents – instead, it is determined by its social positioning, which is guided by the capitalist markets that produce, distribute and sell it – and the markets inherent need to polarise and pillory those on the periphery. Hence, this positioning demarcates between acceptable/unacceptable, and healthy/unhealthy substance use, drawing attention to certain unwelcome consumption practices whilst celebrating others, highlighting what harms are constructed as drug related and which are not, determining the gaze through which we apply notions of stigma and success, of cultural obsolescence and cultural competence. Thus, it establishes that it is only possible to understand the stigmatisation of certain drug use and drug users through locating such use/users within the ideology of neoliberal capitalism and its erroneous hierarchy of substances determined by the drug apartheid; a context increasingly moulded by the market forces of consumerism, its moral relativism and the omnipresent lack felt by its consumers.

## **Conclusion**

When considering substance use, in its widest sense, through the lens of stigma, amidst the context of consumerism, things are undoubtedly complex. This chapter, however, utilises the concept of the drug apartheid to illustrate how these facets interact to present an apparent justification for the differential positioning of drugs and their consumers within contemporary society – a situation we regard as untenable. In doing so, we argue that this complexity is indicative of an economic system built upon contradictory principles, which ensures the dominant status quo is maintained and indeed perpetuated; and a set of laws surrounding such markets which are inconsistent, arbitrary, and grounded in fallacious reasoning. Hence, whilst certain drug use signals cultural competence, embedding the functional citizen into the circuits of consumerist society, other drug use is pilloried with users jettisoned into cultural obsolescence; casualties of their flawed consumption choices.

It is in this context that the drug apartheid operates and thrives, as stigma, operating as a public form of branding, vilifies those who deviate from societal norms, acting as tacit form of social control (Szasz, 2003). Resultantly, those branded warrant either exclusion (anthropoemic) or assimilation (anthropophagic) (Bauman, 2000) as stigma is used to perpetuate social inequality (Parker & Aggleton, 2003), while the hypocrisy underpinning the erroneous distinction between drugs and non-drugs is disavowed. Despite *everyone* being a drug user and many demonstrating characteristics of drug dependency - albeit to legal non-drugs - the focus remains on certain substances and certain users in certain contexts. Meanwhile, the harms arising from these non-drugs, the frameworks which govern their use, and the wider structural social inequalities are fetishistically disavowed (Žižek, 1997). Instead, certain drugs become the scapegoat - blamed for the breakdown of society, families and communities, a cause of crime, disease and even death – as this process of demonization conveniently detracts from

the more complex personal, social, and structural drivers of addiction and the innate harms of neoliberal capitalism and its objective violence (Žižek, 2008; Taylor et al, 2016; Ayres, 2020).

Erroneously, certain drug use brings cultural competence and some cultural obsolescence whilst others still occupy a liminal position somewhere in between these (Taylor et al, 2018). Within this malaise the contrasting processes of social stigmatisation and significance are applied (and in some cases sought after) and experienced in a discriminatory fashion formulated around wider notions of a (un)successful, normative neo-liberal existence that largely revolves around consumption. Such processes will continue unabated until we reconceptualise what we understand to be drugs (Seddon, 2016), contest the dominant drug apartheid, and revise the damaging processes of consumer capitalism. It is not until all drugs become recognised as drugs, and all people become recognised as drug users that this can occur – and until we breakdown the arbitrary dichotomy between drugs and non-drugs this cannot happen. Within the consumerist context people self-identify as tea or coffee drinkers, as craft ale enthusiasts, as artisan gin lovers, as having a sweet-tooth, as cigar aficionados, with a degree of pride – illegal drug users should also be able (if they so wish) to do the same, and enjoy such emotions, and whilst the stigmatising processes of drug prohibition currently mean that the label ‘drug user’ is more stigmatising than it is beneficial, it should be something that we have an ambition to readdress as long as it is redressed along scientific evidence-based lines than stand up to scrutiny, rather than a political, economic and morally biased system that is shot through with contradictions and paradoxes. There is therefore a need to move beyond contemporary constructions of drugs and stigma, which merely exacerbate many present harms through their legitimisation of the drug apartheid. Until then, drug related harm, of which stigma constitutes a singular yet crucial element, will continue unabated as a tool of condemnation to indicate an individual’s failure to abide by the barometers of a successful neoliberal existence, which merely perpetuates and prioritises the exigencies of capitalism.

## References

Askew, R. & Salinas, M. (2019). Status, stigma and stereotype: How drug takers and drug suppliers avoid negative labelling by virtue of their ‘conventional’ and ‘law-abiding’ lives. *Criminology and Criminal Justice*, 19(3), 311-327.

Atkinson, A. & Sumnall, H. (2020). ‘Zombies’, ‘cannibals’, and ‘super humans’: a quantitative and qualitative analysis of UK news media reporting of the cathinone psychostimulants labelled ‘monkey dust’. *Drugs: Education, Prevention and Policy*, DOI: 10.1080/09687637.2020.1799944.

Ayres, T.C. (2020). Substances: The luxurious, the sublime and the harmful. In S. Hall, T. Kuldova & M. Horsley (Eds.), *Crime, Harm and Consumerism* (pp. 108-122). London: Routledge.

- Ayres, T.C. (2019). Substance Use in the Night-Time Economy: Deviant Leisure?. In T. Raymen & O. Smith (Eds.), *Deviant Leisure: A Criminological Perspectives on Leisure and Harm* (pp. 135-160). Basingstoke: Palgrave MacMillan.
- Ayres, T.C. & Jewkes, Y. (2012). The Haunting Spectacle of Crystal Meth: A Media Created Mythology. *Crime Media Culture*, 8(3), 315-332.
- Ayres, T. C. & Taylor, S. (2021). Drug Markets and Drug Dealing: Time to move on. In T.C. Ayres & C. Ancrum (Eds.), *Understanding Drug Dealing and Illicit Drug Markets: National and International Perspectives*. Oxon: Routledge.
- Ayres, T.C. & Taylor, S. (2020). Media and Intoxication: Media Representations of the Intoxicated. In F. Hutton (Ed.), *Cultures of Intoxication: Key Issues and Debates* (pp. 239-261). Basingstoke: Palgrave MacMillan.
- Bancroft, A. (2009) *Drugs, Intoxication and Society*. Cambridge: Polity Press.
- Baudrillard, J. (1998). *Consumer Society: Myths and Structures*. London: Sage.
- Bauman, Z. (2007). *Collateral Casualties of Consumerism*. London: Sage.
- Bauman, Z. (2004). *Wasted Lives: Modernity and Its Outcasts*. Cambridge: Polity.
- Bauman, Z. (2001). Consuming Life. *Journal of Consumer Culture*, 1(1), 9-29.
- Bauman, Z. (2000). *Liquid Modernity*. Cambridge: Polity Press.
- Bauman, Z. (1995). *Life in Fragments: Essays in Postmodern Morality*. London: Wiley-Blackwell.
- Becker, H. (1963). *Outsiders*. New York: The Free Press.
- Begley, E., McVeigh, J. & Hope, V. (2017). *Image and performance enhancing drugs: 2016 national survey results*. Liverpool: Liverpool John Moores University.
- Berridge, V. (2013). *Demons: Our changing attitudes to alcohol, tobacco and drugs*. Oxford: OUP.
- Binns, D. (2013, October 10). Champagne 'war' in bar leaves tycoons with £131,000 bill. *The Metro*. Retrieved from <https://metro.co.uk/2013/10/10/champagne-war-in-bar-leavestycoons-with-131000-bill-4142369/>
- Brown, K. & Wincup, E. (2020). Producing the vulnerable subject in English drug policy. *International Journal of Drug Policy*, 80, 102525.
- Buchanan, J. (2015). Ending Prohibition with a Hangover. *British Journal of Community Justice*, 13(1), 55-74.



- Burlew, J. (1986). An Economic Theory of Planned Obsolescence. *The Quarterly Journal of Economics*, 101(4), 729-749.
- Chang, J., Dubbin, L. & Shim, J. (2016). Negotiating substance use stigma: the role of cultural health capital in provider-patient interactions. *Sociology of Health and Illness*, 38 (1), 90-108.
- Cohen, S. (1971). *Images of Deviance*, Harmondsworth: Penguin Books.
- Douglas, M. (1966). *Purity and Danger*. London: Routledge.
- Elliot, F. (2021, May 16). Middle-class drug users share blame for deaths of black children ‘pimped by crime bosses’, says David Lammy. *The Independent*. Retrieved from: <https://inews.co.uk/news/politics/midle-class-drug-users-black-children-deaths-david-lammy-1003632>.
- Engel, L., Bright, S., Barratt, M., et al. (2020). Positive drug stories: possibilities for agency and positive subjectivity for harm reduction. *Addiction Research & Theory*, DOI: 10.1080/16066359.2020.1837781
- Fountain, J., Bartlett, H., Griffiths, P., et al. (1999). Why Say No? Reasons Given by Young People for Not Using Drugs. *Addiction Research*, 7(4), 339-353.
- Goffman, E. (1963). *Stigma: Notes on the Management of Spoiled Identity*. Englewood Cliffs, New Jersey: Prentice-Hall.
- Goodwin, I. & Griffin, C. (2017). Neoliberalism, alcohol and identity: A symptomatic reading of young people’s drinking cultures in a digital world. In A. Lyons, T. McCreanor, I. Goodwin, et al. (Eds.), *Youth Drinking Cultures in a Digital World: Alcohol, Social Media and Cultures of Intoxication* (pp. 15-30). Abingdon: Routledge.
- Hall, A. & Antonopoulos, G. (2016). *Fake meds online: The internet and the transnational market in illicit pharmaceuticals*. Basingstoke: Palgrave Macmillan.
- Hall, S. Winlow, S. & Ancrum, C. (2008). *Criminal Identities and Consumer Culture*. Collumpton: Willan.
- Harvey, D. (2007). *A Brief History of Neoliberalism*. Oxford: Oxford University Press.
- Hayward, K. & Turner, T. (2019). Be More VIP’: Deviant Leisure and Hedonistic Excess in Ibiza’s ‘Disneyized’ Party Spaces. In T. Raymen & O. Smith (Eds.), *Deviant leisure: A criminological perspectives on leisure and harm* (pp. 105–134). Basingstoke: Palgrave MacMillan.
- Ivsins, A. & Yake, K. (2020). Looking beyond harm: meaning and purpose of substance use in the lives of marginalized people who use drugs, *Drugs: Education, Prevention and Policy*, 27(1), 27-36.

- Loe, M. (2001). Fixing broken masculinity: Viagra as a technology for the production of gender and sexuality. *Sex Cult*, 5, 97–125.
- Lustig, R., Schmidt, L. & Brindis, C. (2012). The toxic truth about sugar. *Nature*, 482, 27–29.
- McCafferty, C., Shan, L., Mooney, R., et al. (2019). How do adults define the treats they give to children? A thematic analysis. *Appetite*, 133, 115-122.
- Monaghan, M. & Yeomans, H. (2016). Mixing drink and drugs: ‘Underclass’ politics, the recovery agenda and the partial convergence of English alcohol and drugs policy. *International Journal of Drug Policy*, 37, 122–128.
- ONS. (2020). *Drug misuse in England and Wales: year ending March 2020*. London: ONS.
- Parker, R. & Aggleton, P. (2003). HIV and AIDS-related stigma and discrimination: A conceptual framework and implications for action. *Social Science & Medicine*, 57, 13–24.
- Pickard, H. (2020). What We're Not Talking about When We Talk about Addiction. *Hastings Center Report*, 50(4), 37– 46
- Pryce, S. (2012). *Fixing Drugs: The Politics of Drug Prohibition*. Basingstoke: Palgrave MacMillan.
- Radcliffe, P. & Stevens, A. (2008). Are drug treatment services only for 'thieving junkie scumbags'? Drug users and the management of stigmatised identities. *Social Science & Medicine*, 67(7), 1065-73.
- Reinarman, C. (1994). The Social Construction of Drug Scares. In P. Adler & P. Adler (Eds.), *Constructions of Deviance: Social Power, Context, and Interaction* (pp. 92-104). Belmont: Wadsworth.
- Reith, G. (2004). Consumption and its discontents: addiction, identity and the problems of freedom. *The British Journal of Sociology*, 55, 283-300.
- Roberts, M. (2009). What does the public really think about addiction and its treatment? Report on the findings of a DrugScope/ICM poll. *Druglink* July/August 2009.
- Rosenberg, H., Baylen, C., Murray, S., et al. (2008). Attributions for abstinence from illicit drugs by university students. *Drugs: Education, Prevention and Policy*, 15(4), 365-377,
- Seddon, T. (2016). Inventing drugs: A genealogy of a regulatory concept. *Journal of Law and Society* 43(3): 393-415.
- Szasz, T. (2003). *Ceremonial Chemistry: The Ritual Persecution of Drugs, Addicts and Pushers* (Revised Edition). New York: Syracuse Press.

Siddique, H. (2018, July 31). Middle-class cocaine users are hypocrites, says Met chief. *The Guardian*. Retrieved from <https://www.theguardian.com/society/2018/jul/31/middle-class-cocaine-users-are-hypocrites-says-met-chief-cressida-dick>

Singleton, N. & Lynam, B. (2009). The other half of the equation: Employers' readiness to recruit problem drug users. *Drugs and Alcohol Today*, 9(1), 7-12.

Taylor, P. (2010). *Žižek and the Media*. Cambridge: Polity.

Taylor, S. (2016). Moving beyond the other: A critique of the reductionist drugs discourse. *Cultuur and Criminaliteit*, 1, 100-118.

Taylor, S. (2008). Outside the Outsiders: Media representations of drug use. *Probation Journal*, 55(4), 369-387.

Taylor, S., Beckett Wilson, H., Barrett, G., et al. (2018) Cannabis Use in an English Community: Acceptance, Anxieties and the Liminality of Drug Prohibition. *Contemporary Drug Problems*, 45(4), 401-424.

Taylor, S., Buchanan, J. & Ayres, T.C. (2016). Prohibition, privilege and the drug apartheid: The failure of drug policy reform to address the underlying fallacies of drug prohibition. *Criminology and Criminal Justice*, 16(4), 452–469.

Thurnell-Read, T. (2019). A thirst for the authentic: craft drinks producers and the narration of authenticity. *The British Journal of Sociology*, 70(4), 1448-1468.

Thurnell-Read, T. (2018). The embourgeoisement of beer: Changing practices of 'Real Ale' consumption. *Journal of Consumer Culture*, 18(4), 539-557.

Thurnell-Read, T. (2017). 'Did you ever hear of police being called to a beer festival?' Discourses of merriment, moderation and 'civilized' drinking amongst real ale enthusiasts. *The Sociological Review*, 65(1), 83-99.

UKDPC. (2010a). *Getting Serious about Stigma: the problem with stigmatising drug users*. London: UKDPC.

UKDPC. (2010b). *Representations of Drug Use and Drug Users in the British Press: A Content Analysis of Newspaper Coverage*. London: UKDPC.

Veblen, T. (1969). *Theory of the Leisure Class*. London: Penguin Books.

Vernon, P. (2006, May 14). The Fall and Rise of Kate Moss. *The Observer*, 14 May. Retrieved from: <https://www.theguardian.com/lifeandstyle/2006/may/14/features.woman6>.

Ward, V. (2005, December). The Beautiful and the Damned. *Vanity Fair*, December. Retrieved from: <https://www.vanityfair.com/news/2005/12/kate-moss-200512>.

Winlow, S. & Hall, S. (2016). Criminology and Consumerism. In P. Carlen (Ed.), *Criminologias Alternativas*. Buenos Aires: IEA.

Winlow, S. & Hall, S. (2013). *Rethinking Social Exclusion*. London: Sage.

Young, J. (1971). *The Drugtakers*. London: Paladin.

Žižek, S. (2014). The Impasses of Consumerism. In teNeus (Ed.), *Prix Pictet 05: Consumption*. London: teNeus.

Žižek, S. (2008). *Violence*. New York: Picador.

Žižek, S. (1997). *The Plague of Fantasies*. London: Verso.