

## **The impact of heavy cannabis use on young people**

### **Vulnerability and youth transitions**

*Margaret Melrose with Penny Turner, John Pitts and David Barrett*

#### **This study explores young people's views of what constitutes 'heavy' cannabis use and how their usage affects their lives.**

Surveys tell us that a fairly large proportion of young people have tried cannabis. But we know relatively little about which young people are regular or 'heavy' users, what constitutes 'heavy' use, or what sorts of cannabis this involves. We also know very little about the personal and social effects heavy cannabis use may have or how young people view such use.

For this study, researchers interviewed 100 16- to 25-year-olds who are or have been regular cannabis users, and 30 professionals working with them in various contexts.

The report explores:

- what sort of cannabis these young people used and how they used it
- their definitions of what constitutes 'heavy' use and how these vary between individuals
- when, why and how they began to use cannabis and why they continue to do so
- participants' accounts of the positive and negative impacts of regular cannabis use
- anomalies and complexities in participants' attitudes towards cannabis.

Through the follow-up interviews the report also examines any links between changes in cannabis use and participants' social situations over time.

The researchers draw on their findings to make recommendations for the development of policy and practice in this field.



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# Executive summary

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- Most of these young people smoke a form of cannabis known as 'skunk' through choice and preference.
- The average age of beginning to use cannabis across the group was 13.7 years and although many said they smoked at school, teachers had not seemed to pick up on the fact that many of these young people were 'stoned' in the classroom.
- There is no consensus amongst regular users about what constitutes heavy use and there are wide variations in the amounts regular users consume.
- Most young people attribute a range of positive functions to cannabis although some thought it had impaired their school performance and/or led to difficulties in relationships with parents.
- Heavy use and its impacts are situational, relative and normative in relation to particular reference groups.
- There is a cyclical relationship between heavy cannabis use and youth transitions whereby lack of opportunity to make transitions to higher status roles might lead to high levels of consumption, and high levels of consumption further impede the ability to make transitions to higher status roles.
- Many young people held contradictory attitudes and beliefs about cannabis and some were ambivalent about using it. There is considerable uncertainty about its legal status and need for a more coherent government education programme.
- Young people appear to be able to modify and/or reduce or stop their use apparently without difficulty when their circumstances improve and their priorities change.
- Our findings suggest a need for opportunity- and problem-orientated interventions to tackle young people's cannabis use.
- Children's Trusts, or their equivalent structures, may offer an ideal vehicle through which to deliver joined-up, young-people-centred holistic interventions.
- More training is needed for professionals across a range of services to ensure greater consistency in their response to young people's cannabis use.
- Police responses need to be homogenised and policy makers need to clarify the current confusion in relation to the legal status of cannabis.

# Glossary

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Bare stuff	Cheeky things (as in 'bare-faced cheek')	Hash	A generic term for cannabis resin
Base	A pure form of amphetamine	Joint	A cannabis cigarette in which tobacco and cannabis are mixed together and rolled into a large cigarette using cigarette papers
Blag it	To bluff/pretend	Mashed	To be very stoned
Blunts	Cigar-like papers in different flavours used for making cannabis cigarettes (joints – see below)	Mong/monged out	To be incapable of doing anything as a result of smoking cannabis
Bong	A form of water pipe (usually homemade from a plastic bottle)	On a para	Feeling paranoid as a result of smoking cannabis
Brown	Heroin	Pills	Ecstasy tablets
Burns	Puffs on a joint	Puff	Cannabis resin
Chill out	To relax and/or hang out with friends	Rizla	Cigarette papers used for rolling cannabis cigarettes (joints)
Chung	To be stoned	Skin up	To roll a cannabis cigarette (joint)
Crackhead	Someone who uses or who is addicted to crack cocaine (usually used pejoratively)	Skunk	A generic term for a hybrid form of herbal cannabis that is marketed under different brand names (e.g. Northern Lights, Psychosis, Purple Haze, White Widow)
(A) Draw	A portion of cannabis or enough cannabis to make a joint (see below)	Smashed	To be stoned on cannabis
Gas	Aerosols (volatile substances)	Solid	An alternative word for hash or cannabis resin
Gear	Cannabis	Spark it	To light a cannabis cigarette (joint)
Green	A generic term to refer to herbal cannabis – can refer to 'weed' or 'skunk' (see below)		

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Speed	Amphetamine	Weed	A generic term for herbal cannabis
Spliff	An alternative word for joint (cannabis cigarette)	Zoot	An alternative word for joint (cannabis cigarette)
Tick a draw/Tick it	To get cannabis on credit	£10 bag	Size of deal in which skunk is purchased (weighing between 1.3 and 1.75 grams)
Trips	LSD		
Wake and bake	To smoke cannabis as soon as one wakes in the morning		

# Introduction

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The issue of cannabis use has been a matter of some controversy and debate in the UK for a number of years (Jenkins, 2005) and public debate has intensified since 2004 when the new Labour Government took the decision to reclassify cannabis from a Class B to a Class C drug.

In the light of emerging evidence about the potential risk of harm that cannabis might pose, in 2005 the Home Secretary asked the Advisory Council on the Misuse of Drugs (ACMD) to review the decision to reclassify. After reviewing the evidence, the Council concluded:

*After a detailed scrutiny of the evidence the council does not advise the reclassification of cannabis products to Class B; it recommends they remain within Class C.*

(ACMD, 2005, p. 3)

At the same time, the Council emphasised that cannabis use is associated with both physical and psychological harms and suggested that a public education and information strategy be developed to warn children, young people and young adults of those harms and to remind them that cannabis is still illegal (ACMD, 2005).

Its legal status or the potential harms associated with cannabis use notwithstanding, it remains the most widely used illicit drug amongst young people in the UK and other European countries but evidence indicates that prevalence rates in the UK are amongst the highest in Europe (EMCDDA, 2005). The British Crime Survey (2002/03), for example, indicated a prevalence rate of 30.6 per cent for those aged 16–59 years while a school-based survey has suggested a prevalence rate of 16 per cent for 11–15 year olds (EMCDDA, 2005). A

Department of Health survey of schoolchildren in England, however, suggests a lower prevalence rate than this and suggests slight fluctuations over a five-year period. While from 2001 to 2003 prevalence rates remained steady at 13 per cent for 11–15 year olds, these dropped to 11 per cent in 2004 but rose to 12 per cent in 2005.

Prevalence rates are slightly higher amongst boys than girls (12 per cent boys and 11 per cent girls in 2005) and tend to increase sharply with age – 27 per cent of 15 year olds reported use, while just 1 per cent of 11 year olds did so (Department of Health, 2005).

While survey data tell us that a fairly large proportion of young people have tried or used cannabis, these data tell us little about why young people use cannabis or what impact that use might have on their lives. We also know relatively little about the proportion of people who are regular or heavy users, what level of use constitutes heavy use, or what sorts of cannabis they tend to use. Furthermore, we know very little about the personal and social impacts that might be associated with regular or heavy cannabis use or about the potential benefits young people might themselves attribute to their cannabis use. The study reported here therefore set out to rectify this situation and to explore with a group of 16–25 year olds, who were regular cannabis users, what they considered heavy cannabis use to be and how they perceived the personal and social impacts of regular, heavy cannabis use.

Chapter 1 of this report begins by describing the aims of the study and briefly discusses the methodology employed to conduct it (a fuller discussion of methodological issues can be found in the Appendix). It then describes

the sample achieved and the limitations of the study.

Chapter 2 proceeds to describe what sorts of cannabis these young people used and how they used it. It reflects on what participants told us about the amounts of cannabis they were using and suggests that it is possible to classify our group of young people into 'light-heavy', 'medium-heavy' and 'high-heavy' users according to the amounts spent per week and/or the volumes consumed. This chapter also discusses what the young people (and the professionals working with them) considered to be heavy use and whether they considered themselves to be heavy users or not. The discussion notes the variability in participants' accounts of the amounts they say they are using and in their definitions of what constitutes heavy use. It demonstrates that while they may struggle to quantify heavy use they are able to qualify it in terms of social and personal impacts.

Chapter 3 presents data on what participants told us about when, why and how they began to use cannabis and notes that reasons for beginning to use cannabis may differ from reasons for continuing to use it. It suggests that while 'peer pressure' is inadequate to explain initiation of cannabis use, peer acceptance and peer belonging are important factors for understanding continued use.

Chapter 4 considers participants' accounts of the positive and negative impacts of regular cannabis use. While acknowledging the benefits these young people derived from their cannabis use this chapter notes that regular cannabis use can and does have negative social and personal costs for some of these young people. In particular the social costs are noted in terms

of impact on educational performance, family relationships and accommodation, and legal consequences of cannabis use. Personal costs are described in terms of financial costs/debts, health/mental health and the demotivating effects of using cannabis regularly. Our data suggest that there is not a necessary correlation between the amounts used and problems experienced and that some young people appear to be able to use cannabis regularly with minimal social or personal costs while for others these costs appear to be much greater. In particular this chapter suggests that when young people are severely disadvantaged (in terms of education, employment, housing and so on), this appears to impact negatively on their cannabis use. The absence of alternatives and opportunities means that cannabis is more likely to become a central focus of their lives which may in turn lead to higher levels of cannabis use and/or the development of more problematic types and levels of drug use.

Chapter 5 explores anomalies and complexities in participants' attitudes towards and beliefs about cannabis. This section demonstrates that a number of young people are ambivalent about their cannabis use but nevertheless do not intend to stop using it in the immediate future, and that while some participants are confused about the penalties for possessing/supplying cannabis, the legal status is largely an irrelevance as many participants do not even seem to consider it. The beliefs and attitudes expressed by the young people are compared and contrasted with those of the professionals working with them.

Chapter 6 explores data from follow-up interviews and examines changes in cannabis use and participants' social situations over

time. This section demonstrates that positive changes to social circumstances sometimes presaged reductions in cannabis consumption – even amongst those who might be considered to be most disadvantaged. Given that the time between initial and follow-up interviews was relatively short, it is not possible to say how sustainable such changes might be over the longer term. For others the direction of change

had been in the opposite direction and a small number, for example, had increased their use of cannabis and/or had begun to use Class A drugs (heroin/crack).

Chapter 7 summarises our findings and considers their policy and practice implications. Recommendations are made for the development of policy and practice in this field.

# 1 The study and the sample

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## Aims of the study

For the purpose of the study, 'heavy' cannabis use was defined as 'using more or less on a daily basis and using for at least six months'. It aimed to explore with young people aged 16–25 years who use cannabis regularly:

- what they considered to be heavy cannabis use and how much they typically used themselves in any given week
- how they believed their cannabis use impacted on their lives
- what they judged to be positive or negative about their cannabis use in terms of the personal and social costs and benefits.

## Methodology

The research reported here is primarily based on qualitative data generated from interviews with 100 young people (aged 16–25) and 30 professionals working in a variety of contexts with young people involved in cannabis use. The study was conducted in two geographical areas (both shire counties) but in order to protect the confidentiality of participants, these remain anonymous throughout this report.

Cannabis use is an illegal and clandestine activity engaged in by a 'hidden' population. It is then a 'sensitive' topic for researchers to explore and, as with research into other sensitive issues, taxes the 'methodological ingenuity' of the research team (Lee, 1993, p. 2). In order to maximise the potential for data capture from a 'difficult to reach' population, in-depth semi-structured interviews were

combined with questionnaires. Questionnaires were intended to cross-check and supplement some of the information derived from interviews as well as to 'test' participants' attitudes to, and beliefs about, cannabis in relation to a number of issues.

Of our 100 young people, 80 took part in one-to-one interviews and 20 took part in focus groups (four focus groups in total).<sup>1</sup> Of these 100 participants, 97 have completed questionnaires. Interview data have been analysed using conventional content coding and questionnaire data have been analysed using SPSS. Statistical data cited in this report therefore refer to the 97 case entries for SPSS.

A limited longitudinal element was built into the research design which enabled us to re-contact some participants for a second interview four to six months after the first meeting. This is important because evidence shows that young people's drug use can be highly 'fluid' and fluctuates over time (Measham *et al.*, 1998; Melrose, 2000). A longitudinal element would therefore enable us to explore any changes in cannabis use, as well as social situations, in the intervening period. Such an approach represents an improvement on the 'snapshot' that is usually provided by 'one-off' research studies (Parker *et al.*, 1998). Although the longitudinal element is relatively limited, in terms of the time over which participants were involved in the study, it does enable us to explore how drug-using pathways develop and change in the course of adolescence and how wider social changes impact on patterns of drug use. Overall the study achieved a follow-up rate of 52 per cent – that is, 52 of the original participants were interviewed on a second occasion to explore developments in their lives and any changes in

their cannabis use in the intervening period.

In addition to research with young people, the project undertook data collection with a total of 30 professionals from a variety of agencies across the two geographical areas in which our research was conducted. These practitioners tended to be working 'on the front line' with young people involved in using cannabis. The aim of this element of the research was to explore the extent to which our participants' accounts resonated and corresponded with professionals' experience of young people's cannabis use and thus to compare our findings from the young people with practitioners who have first-hand experience of working with young cannabis users.

Practitioners from the following agencies participated in this element of the research process:

- Connexions
- youth offending teams
- hostel workers
- drug treatment agency workers
- alcohol and drug project workers
- youth workers
- educational welfare officers
- college tutors
- Drug Action Team workers
- YMCA project workers.

Our findings from this element of the research are integrated into the discussion below in the different sections that discuss what the young people told us. Overall, however,

our findings from the study did accord with the experience of practitioners working with these young people.

### Accessing the young people

Accessing participants who are engaged in clandestine or illicit activities can be a very challenging process for researchers (Melrose, 1999, 2002). A variety of means of contacting young cannabis users might have been available to us (e.g. advertising in local media, visiting places where young cannabis users might potentially hang out and so on). In this instance, however, having taken into consideration practical and ethical issues, and being mindful of our need to ensure the personal safety of researchers and participants, the research team decided to contact participants through agencies<sup>2</sup> and other sources that were likely to be in contact with young people who might be involved in cannabis use.

A number of agencies agreed to assist us with access to participants and the study was advertised by means of a flyer distributed to agencies with which young people who might be using cannabis were likely to be in touch. The young person completed the flyer and returned it to the research team and they were then contacted by a researcher to arrange a convenient time and place to meet. Amongst the agencies that assisted with access were:

- Connexions
- youth offending teams
- hostels
- YMCA

- drug and alcohol service<sup>3</sup>
- Prince's Trust
- student unions
- colleges/universities
- training providers.

### Composition of sample/research population

Our sample is predominately male (72 male participants and 28 female<sup>4</sup>) and approximately two-thirds (63) are aged between 16 and 18 years while the remaining third fall in the 19–25 age band. Almost two-thirds (44) of the young men are in the 16–18 age group as are almost three-quarters (19) of the young women. Just over three-quarters of the original sample are white (this group includes some Eastern European, Turkish, Kurdish and Irish participants), approximately one-tenth (9) are black Caribbean/black British (all male) while six are dual heritage (three male and three female) and just two are of Asian origin (both male).

The contours of the follow-up sample broadly mirror those of the original. That is, three-quarters (39) are male, just under two-thirds (33) are aged 16–18 and just over three-quarters (43) are white.

As well as using cannabis, 48 of our participants admitted that they had used or tried a range of other drugs. In some cases drug-using repertoires were much more extensive than in others: for example, some participants had used 'everything' including solvents, amphetamine, 'base' (a pure form of amphetamine), LSD, 'magic mushrooms', ecstasy, cocaine, crack and heroin while others

said they had tried ecstasy or cocaine or heroin 'once or twice'. These patterns were complex and while a small number seemed to be moving away from Class A drug use (heroin and/or crack) with the help of treatment programmes (methadone), another small group said they had stopped using crack and/or heroin of their own accord and without outside intervention. For others their poly-drug use was 'recreational' (perhaps indulged in once a month) and as far as our participants were concerned, these indulgences did not seem to present them with any problems. At least two participants had moved towards Class A drug use when they were interviewed for a second time.

### Limitations of the study

How research populations are accessed inevitably impacts on the sample obtained and thus limits claims that can be made from the data generated (Melrose, 1999, 2002). In this instance, accessing participants through agencies providing services to young people is likely to have skewed our sample towards more socially excluded or 'vulnerable' young people who smoke cannabis. For example, a third (33) of our participants were living in hostels – almost half the young women (10) and just under a third of the young men (23). Just over a third (36) were still living at home with parents – almost half (32) the young men but just over a tenth (4) of the young women – whereas almost a third (8) of the young women were living in their own accommodation (local authority or privately rented) compared to under one-tenth (6) of the young men.

Just under a third (29) were unemployed, approximately a quarter (27) were on basic

training schemes, a fifth (20) were in further education (FE) or higher education (HE) and three participants were in their final year at school. While very few (8) participants were in full-time employment, six worked part-time while training or studying in FE or HE.

Additionally, almost half (47) of the group had been excluded from school at some point – over two-thirds (17) of the young women and almost half (30) of the young men; almost half (48) had been involved in offending – almost two-thirds (15) of the young women and almost half (33) of the young men – indeed five of these participants (three male and two female) had served time in prison; and just over a tenth (13) had been ‘looked after’ by a local authority at some point – one-fifth (5) of the young women and just over one-tenth (8) of the young men.

There are some slight variations in the socio-economic and social circumstances between the original and the follow-up samples. In the latter a slightly smaller proportion were living in hostels and a higher proportion were unemployed (mainly due to the fact that they had dropped out of or finished training schemes or given up or completed college courses). Under a tenth were on basic training schemes at the follow-up stage but, on the other hand, a small number who had previously been unemployed were in employment by this stage.

Furthermore, our sampling method relied on voluntary participation and so is self-selected. It might therefore reasonably be assumed that this skewed the sample in favour of subjects who were least troubled or most confident about revealing and talking about their cannabis use (see Dean and Melrose, 1996; MacLeod *et al.*, 2004). However, because the population of

young cannabis users is largely unknown, we have no way of knowing if, or in what ways, this sample of young cannabis users might differ from those in the general population. For these reasons, we do not make any claims about the statistical significance of patterns observed within the data but do contend that the sample was broad enough for us to generate authentic data in relation to cannabis use by this particular group of young people and for the findings we have produced to be persuasive.

An additional limitation is imposed by the fact that this study is based on self-report data which is not untypical of research with drug-using populations in general. As Harris (2005, p. 59; see also MacLeod *et al.*, 2004) has observed:

*Measuring drug use is difficult, as desire for ‘street credibility’ leads some young people to increase estimates of their usage, while others, for fear of the consequences of disclosure, reduce it.*

And, as Parker and colleagues (1998, p. 148) have noted, young people are not necessarily ‘immune from exaggeration or distortion nor can they always even adequately define their own relationship with drugs’.

Furthermore, ‘how a drug user presents to another user, drug worker, doctor, reporter [and even researcher] or judge will vary dramatically according to need’ (Harris, 2005, p. 14). Having pointed to these limitations, however, the researchers detected very few occasions on which participants appeared to be deliberately dissembling or falsifying their accounts of their cannabis use. In many instances, in fact, these participants appeared to be almost shockingly frank.

## 2 Heavy cannabis use

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### Introduction

This chapter presents data on what sort of cannabis these young people used and how they used it. It then goes on to explore how much they typically spent on cannabis in any given week and how they thought about and defined heavy cannabis use. It was clear that, for many, heavy use was defined not so much by the amounts consumed or spent but by the personal and social impacts of regular use. The chapter also shows that by comparing their cannabis use against Class A drug use, many of these young people were able to construct their own drug use as relatively unproblematic. The chapter then looks at whether young people thought of themselves as heavy users and briefly considers what some of them said about how they were able to afford their cannabis use.

### What sort of cannabis did the young people use?

Almost two-thirds (63) of participants said they used skunk<sup>1</sup> while just over a quarter (26) said they used a combination of hash (cannabis resin) and/or skunk and/or weed or 'whatever they could get'. There have been many anecdotal and media reports of increases in the availability of skunk and much discussion of its supposed greater potency when compared to other forms of cannabis. In our study the proportion of young people saying they smoke skunk is higher than that found in a study of young drug users in London where 36 per cent said they usually smoked skunk and 49 per cent smoked grass (McCann and Strang, 2004, p. 107).

Just four participants (all hostel residents)

said they only smoked cannabis resin (hash). On the whole, the young women were less likely than the young men to use only skunk and more likely to use a combination of hash and skunk.

A few participants had started off using cannabis resin but had then progressed to skunk.<sup>2</sup> Rosie<sup>3</sup> (17 years, training scheme), for example, had started by using resin but then discovered skunk. She said:

*I started smoking skunk, the powerful stuff, cos the puff [resin] I would just smoke every now and then. But when I bought the skunk, that was it, it was a better buzz. It was more expensive but it was, you'd rather pay more because you'd get a better buzz from it.*

Most participants expressed a preference for skunk and were clear about their reasons for this:

MM: *What sort of cannabis do you tend to smoke?*

R: *Skunk.*

MM: *All the time?*

R: *Yeah, it used to be hash but now skunk.*

MM: *And do you prefer skunk?*

R: *Yeah.*

MM: *And is it easier to get skunk than it is hash?*

R: *No you can probably get more hash [for your money] than skunk because it's cheaper.*

MM: *But you still prefer skunk?*

R: *Yeah, it's better, it gets you more stoned. It's more effective the skunk, much*

*better than hash. Hash is just shit really.  
But you get more, big more [sic] joints [if  
you buy hash].*

Rachel (17 years, at college) went on to explain that she didn't like to smoke hash because 'It's got shit in it, it's all mixed with other stuff. It's got all chemicals in it as well'. It is not, however, unheard of for skunk to be contaminated and in January 2007 the Department of Health issued a public health alert in relation to 'herbal' or 'skunk-type' cannabis that appeared to have been contaminated with 'microscopic glass-like beads (or possibly ground glass)' ([www.drugscope.org.uk](http://www.drugscope.org.uk), 17 January 2007).

Paul (16 years, at school) was asked what he usually smoked:

P: *Skunk, from the bud.*

MM: *And is that because that's what you prefer or is that ...?*

P: *Yeah, it tastes better and it's stronger.  
Hash and weed, you could smoke a half [ounce] of it to yourself and not get a buzz.*

These comments were typical of many participants and they demonstrate a type of cost/benefit calculation in relation to the 'buzz' they hope to derive from their cannabis use and the money they spend. Even though skunk is twice the price of hash, the latter does not seem to deliver the mood-altering effects that these participants are obviously seeking, thus they would prefer to buy a small amount of skunk rather than double the volume of hash.

## How do they use cannabis?

Almost three-quarters (70) of participants tended to smoke cannabis in joints – that is, rolled in cigarette papers mixed with tobacco – while approximately a quarter said they smoked a combination of joints, pipes and 'bongs' (a form of water pipe). One male and one female said they used only bongs. Some participants spoke about using 'blunts' for 'special occasions', suggesting a new dimension to the routine or 'normal' rituals that accompany cannabis use. Blunts are American-manufactured cigar-like papers that are widely available in tobacconists and cost about 75p each. They are available in a variety of flavours. Those who used them said they liked the taste from them.

That a large proportion of participants smoke cannabis mixed with tobacco raises additional concerns about the health implications of using tobacco regularly as well as the potential carcinogenic effects of the cannabis itself. Some evidence suggests that smoking cannabis can be a 'gateway' to cigarette use (Amos *et al.*, 2004; Patton *et al.*, 2005)<sup>4</sup> while other research indicates an intimate association between cannabis and cigarette use with the former tending to reinforce use of the latter (Amos *et al.*, 2004; Coggans *et al.*, 2004; CRFR, 2004; Highet, 2004). The relationship between cannabis use and cigarette use is clearly illustrated in the following extracts from Martin, Saul and Marlon:

*I've been smoking cigarettes for far too long  
and that's a big part of it as well. I couldn't give  
up one without giving up the other, and I'm not  
ready to give up cigarettes yet.*

(Martin, 24 years, HE student)

*I'm trying to quit cigarettes, it's hard when you're smoking cannabis and it's got cigarette in it, so. It's hard to quit. If you really want to quit smoking you've got to quit both really.*

(Saul, 16 years, just finished school)

*If I could stop smoking cigarettes I could stop smoking weed cos I think that if I stop smoking weed I would still be smoking cigarettes and I think I would get back on the weed through smoking cigarettes and vice versa.*

(Marlon, 17 years, FE student)

### How much cannabis did these young people use?

We asked participants to tell us how much cannabis they used per week by providing us with a figure for the weight they consumed or the amount they spent in a typical week – some participants provided both figures. Where only a figure for the weight they used was provided, we have estimated the amount spent per week, using the figure of £20 per eighth (3.5 grams) for skunk. These costs are calculated from information provided by most of the young people that the street price of 3.5 grams of skunk (which, as we have seen, is what most of them say they smoke) is £20. This price was cited consistently across both geographical areas. These figures are verified by data supplied by the Independent Drug Monitoring Unit (IDMU) annual survey which, in 2004, priced 3.5 grams of skunk at £19.93 ([www.idmu.co.uk](http://www.idmu.co.uk), accessed September 2006).

However, some young people may be using cannabis resin which, according to our participants, is half the price of skunk. Again this is borne out by IDMU data which, although

acknowledging slight variations in the price of different types of cannabis resin, in 2004 priced the cheapest (Moroccan resin) at £9.91 for 3.5 grams ([www.idmu.co.uk](http://www.idmu.co.uk), accessed September 2006). Furthermore, the price paid for any amount of cannabis will be determined by the young person's proximity to the source of supply and their position in the supply chain. It will also depend on the amounts purchased at one time as the greater the quantity purchased, the cheaper the price. For example, in 2004, IDMU priced one ounce of skunk at £117.83 and one ounce of Moroccan resin at £45.36. However, nine ounces of skunk worked out at £92 per ounce and nine ounces of Moroccan resin worked out at £30 per ounce.

If participants did not provide information about amounts spent or consumed in questionnaires, interview data have been used to provide a broad indication of the amounts spent. There are, however, caveats applied to the data provided here.

First, participants often gave figures for the amount spent or amount consumed per day rather than a weekly figure. However, many said they did buy cannabis on a daily basis (usually a £10 bag) – this was more often the case with those who were more at the socially excluded end of the social spectrum (unemployed, living in hostels) than those who were more securely situated (e.g. HE/FE students). The cannabis would tend to be bought and consumed on the same day.

When asked about why they did not save their money to buy bigger amounts and thus achieve a reduced price, many indicated that they would not have the self-control to ration their use and felt that if they had a large amount, they would keep using it until they

had none left, thus leaving them 'short' for the remainder of the week. This point is illustrated by Eva (17 years, training scheme) when she was asked why she did not save up to buy a quarter in one transaction instead of £10 bags:

E: *Because I'd smoke it all.*

PT: *Yeah?*

E: *I wouldn't be able to save it for the week.*

PT: *Yeah?*

E: *And I'd end up smoking it all and then I wouldn't have no money and no ...*

PT: *Yeah, so it's a way of sort of rationing it out over the week?*

E: *Yeah.*

According to information supplied by IDMU, buying £10 bags of skunk on a daily basis is 'quite rare in the bigger picture and would tend to be associated with younger casual users rather than experienced users' (personal correspondence with Matthew Atha, September 2006). However, many participants indicated that a £20 bag was the maximum they would be supplied with, so bulk buying often seemed not to be an option for them. This suggests a propensity for suppliers to maximise profits by selling in smaller amounts, indicating something about market conditions in our research sites and our participants' positions in the supply chain.

Second, participants tended to give a range of spending, for example, £10–£20 per day/£30–£40 per week and/or £100–£120 per week. For many it was clear that they did not think about what they might be spending on a weekly basis and when asked to calculate it, they seemed to

be surprised that they were spending so much on cannabis.

Third, amount spent per week does not necessarily provide a clear indication of how much they might be using as frequently participants 'chipped in' with friends (usually in groups of three or four) 'to get a draw' and the cannabis would then be smoked collectively between those who had clubbed together to pay for it.

Fourth, a wide range of figures is cited with, for example, at the lowest end one young woman saying she spends £2.50 per week while at the highest end one young man saying he spends £255 per week (approximately 45 grams). Similar variations applied to the weights young people said they were using per week, with one young woman saying she smokes 1.5 grams per week while three young men and one young woman said they smoked 56 grams (two ounces) per week. In total we have precise data for weekly spending or weekly amount consumed from 56 participants – 23 gave precise spending while 33 gave precise weight consumed.<sup>5</sup>

Taking account of precise figures provided for amounts spent per week and converting the precise figures for weight consumed per week to a monetary value provides the spending patterns shown in Table 1.

The data provided in Table 1 demonstrate that approximately three-quarters (41) of these participants were spending up to £90 per week and, of these, three-quarters (30) were actually spending £60 per week or less.

Compared with data supplied by IDMU,<sup>6</sup> many of these participants do seem to be spending a lot on cannabis. IDMU survey data for 2004, for example, suggest an *average*

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**Table 1 Weekly spending on cannabis ( $n = 56$ )**

<b>Amount spent</b>	<b>Number citing this amount</b>
Up to £30	13
£31–£60	17
£61–£90	11
£91–£120	4
£121–£150	1
£151 and above	10

*monthly* spend of £69. Amongst the heaviest users, IDMU survey data suggest the following *monthly* spends:

- top 25 per cent of users = £75 and over
- top 10 per cent of users = £135 and over
- top 5 per cent of users = £200 and over
- top 1 per cent of users = £475 and over (personal correspondence with Matthew Atha, IDMU, September 2006).

Based on our participants' estimates, 75 per cent of the sample falls within the top 10 per cent of cannabis users included in the IDMU sample.

Taking into account precise spending figures, precise weights consumed and figures where a range of spending was cited (taking the midpoint of the range as the indication of actual spending), for example £20–£30 pounds per week, we have data for 86 participants and have tentatively subdivided the sample into three groups. While they were all heavy users based on our criteria for inclusion in the study, some were heavier than others. Our three groups are therefore described as 'low-heavy' users, 'medium-heavy' users and 'high-heavy' users. The groups we are suggesting roughly correspond to a division of the sample into

thirds. Low-heavy users (32) are spending up to £40 per week, medium-heavy users (29) are spending £41–£100 per week and high-heavy users (25) are spending £101 or above.

In our study, a greater proportion of males than females fall into the low-heavy user band (almost half of all males compared to approximately a quarter of all females) while just over a quarter of all males fall into the high-heavy user band compared to just over a third of all females. This suggests that within this sample, on a cost per week basis, the females are heavier users than the males. Given that the group of girls we accessed appeared to be more criminogenic and troubled than their male peers, this is perhaps not surprising, but what is interesting in the context of this study is that the girls were less likely than the boys to think of themselves as heavy users.

The 25 participants in the high-heavy user band were on the whole characterised by limited educational achievement, family problems, hostel dwelling, unemployment or basic training schemes. Some of this group were former Class A drug users (6) and, in some instances, are now being maintained on methadone programmes (3). Two of this group have served time in prison (not for drug-related offences) and one has mental health problems (not attributed to cannabis use). Generally then,

those in the high-heavy user group tended to be experiencing the greatest number of pre-existing social problems, but, importantly, a small number of this group are FE students and at least one works full-time. The majority of this group do think of themselves as heavy users while some say they used to be heavy users but aren't any longer (particularly the former Class A drug users) and a small proportion do not think of themselves as heavy users. One of those who did not think of himself as a heavy user was Greg who said he smoked about 20 bonges per day.

In contrast, the low-heavy user group tends to be dominated by HE students; however, also within this group there are a small number who are unemployed and/or who live in hostels and/or who are educational underachievers. None of this group has been to prison. This group was almost equally divided between those who considered themselves to be heavy users and those who did not.

This demonstrates that the patterns of cannabis use to emerge from this study are complex and that how young people evaluate their own use (heavy or not) depends on the particular reference group they use as a comparator of their own behaviour. Oscar (21 years), a university student, said he was spending £20 per week and considered himself to be a heavy user but was classified into our low-heavy user group. When he was asked if he thought he smoked more or less than other people he knew, he said:

*I know people who smoke it more than that, erm, I also know people who smoke it hardly at all. I suppose the people I know that regularly smoke it, I smoke about the same as them.*

Marlon (17 years, FE student) said he was using 'about half an ounce' a week. He thought he was a heavy user and was classified in our medium-heavy user band. When asked if he thought he used as much or more than other people he knew, he said:

*I'd say my best friend probably smokes more than me, but in general, I'd say I'm kinda catching up now with how much I smoke, or probably going over what people generally have per day.*

Heavy use then emerges as situational, relational and normative according to the parameters of particular peer groups.

### Young people's definitions of heavy use

In talking about heavy use, young people were asked to say what they thought a heavy user would be spending or how much cannabis they might be using in a week. While some participants offered these quantitative definitions, for others a heavy user was defined in qualitative rather than quantitative terms.

For ease of comparison, where participants did not provide a definition in terms of weekly cost, we have converted the weight (amounts consumed) they provided us with into a monetary value, again assuming the cost of £20 per eighth (3.5 grams) for skunk. The figures provided below are intended to give a broad indication of what participants believed a heavy user might be spending per week on cannabis but they carry some 'health warnings'.

It was difficult to elicit accurate measures or definitions from the young people and there was a great deal of variability in their responses. While one young man considered spending £20

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per week to be heavy, others considered £200 or more to be heavy use. This demonstrates that even amongst regular users there is no consensus about what constitutes heavy use.

The difficulties young people had with defining what heavy use might be are illustrated in this exchange with Noel (21 years, unemployed):

N: *Anything from like an eighth [3.5 grams] to a half ounce [14 grams] a day. Would you class that as heavy?*

MM: *I don't know, that's why I'm asking you.*

N: *An eighth a day would be.*

MM: *I don't know how you could smoke half an ounce a day. I just don't see how you could do it.*

N: *Oh yeah, you can do it, believe me. It does depend on how long you've been doing it, obviously. I mean, if you've only done it for a couple of months you'd be able to handle an eighth, or £10 worth at least a day.*

When Rachel (17 years, at college) was asked what she thought was heavy use, she said:

R: *Erm, probably about an ounce [28 grams] a day or something. [Laughs]*

MM: *Do you think you could smoke that much in a day?*

R: *Probably*

MM: *Do you think so?*

R: *Yeah*

MM: *You wouldn't do much else would you?*

R: *No. [Laughs]*

These excerpts demonstrate that young people sometimes struggled to define heavy use in quantitative terms and there is a great deal of variation in what participants might consider to be heavy use. They also demonstrate that in many instances young people would tend to think a heavy user would be using more than the amounts they themselves said they were using.

### Qualitative definitions of heavy use

While some young people struggled to define heavy use in terms of money spent or weight consumed they were clearer about the quality of behaviour that might define a heavy user. Hayden (18 years, training scheme), for example, thought heavy use was:

*Someone who smokes it everyday is a heavy user. Whether it's just one or two spliffs a day cos it's still ... Whether it's as much as I smoke or somebody who's just smoked, to smoke it everyday, four or five spliffs a day. But it's still a heavy user if you use it everyday. Everyday drug abuse basically at the end of the day.*

Jodie (16 years, school pupil) thought heavy use was:

*I dunno, cos I reckon like, if you use it everyday you're a heavy user anyway. Cos if you use it everyday, I know I've done it but, if you use it everyday then you're a heavy user, innit? Because you are using it every single day.*

For Hayden and Jodie, then, heavy use is considered in terms of daily use of cannabis. Marlon (17 years, FE student), on the other hand, thought of it in terms of regular, rather

than daily, use and ‘abusing’ or ‘being abused by’ the drug. He said:

*Errmm, heavy use, I would say, if you smoke on a regular basis, erm, definitely be regular, I don't think someone who smokes maybe once every two weeks or once every three weeks would be classified as a heavy user. A heavy user to me is someone who's abusing a drug or being abused by a drug. Probably roughly about an ounce or hal ... yeah, probably about an ounce [28 grams] a week I would say.*

**For Sofie (18 years, training scheme) heavy use was defined not so much by the amounts consumed as by the impact of regular use and in particular not being able to go without cannabis. She said:**

*Somebody that depends on it and smokes it every day and can't go a day without going moody and that if he was going to, say he, if somebody has their last £10 or £20 or whatever how much they pay for it, and they spend all their money, the last of their money on it then I think that is quite a heavy smoker cos spending your last money, you're not going to have anything left on it.*

**These sentiments were echoed by Darren (18 years, employed) and Dionne (20 years, unemployed single parent). Darren said:**

*Spending all your money you got on it, every bit, that is heavy use. Like if every bit of money goes on it, and you don't worry about paying bills and things like that, that is heavy use.*

**For Dionne, however, heavy use was not so much about spending all your money on it but more about how someone might react if they did not have cannabis. She said:**

*Per week, erm, somebody that smokes every day – spending £10–£20, between £10 and £30 for a draw and buying another draw the next day. I'd say that was a heavy user. Especially if you are on income support, if you're spending that much money on drugs then you are a heavy user. But then again, I'd say that even if you were buying a £10 draw, even if you're buying a £10 draw and it's lasting you over a period of two or three days and you can't get a draw and you're moody and everything, I'd still class that, to me, I'd still class that as you're a heavy user, if you're getting moody, and you know, even maybe aggressive cos you haven't got a draw, then you're still a heavy user, not depending on how much money you spend.*

**For Rosie, however, heavy use was not defined in terms of the money spent or the amount consumed per day or per week or the effects of not having cannabis. She considered a heavy user to be someone who did nothing other than smoke cannabis. She said:**

*Heavy cannabis use? I would call heavy cannabis use someone who sat in seven days a week and smoked it and didn't move off their arse, that is what I call heavy cannabis use. Whereas someone who smoked it, got up, still went to work, got their money at the end of the week, done what they had to do and weren't being a bum, or a dosser, I wouldn't call that a heavy smoker. They could smoke it constantly all day long, but I wouldn't see them as a heavy smoker.*

**These extracts tell us a number of things, including:**

- **Participants think about heavy use in different ways and there are a number**

of discourses and values informing their definitions of what heavy use might be.

- Heavy use involves daily or regular use and, in particular, becoming dependent on the drug.
- There is wide variation in the amounts one would need to be using to be considered a heavy user – for example, Rachel cites 196 grams per week while Marlon cites 28.
- Heavy use is considered to be use that is out of control/dependent, habitual and/or compulsive.
- Heavy use is when cannabis becomes the main focus of someone's life and their main priority, and prevents them from doing other things with their lives.
- Heavy use involves neglecting other aspects of life because all their money is being spent on cannabis.
- Heavy use is defined in terms of the person's reaction to not having cannabis.

### **Did these young people think they were heavy users?**

Despite the fact that a majority of these young people smoke cannabis on a daily basis and, in some cases, have been smoking for some considerable time, when asked if they thought they were heavy users, just half (47) of those who answered this question said they did. Just under half (41) said they did not think of themselves as heavy users while six said they would previously have said they were heavy users but did not think they were now.

As we have seen above, whether one regards

oneself as a heavy user or not seems to depend on the reference group the young person compares their consumption with and different levels of consumption seem to be normalised across our three user groups (low-heavy, medium-heavy, high-heavy). In the low-heavy user group approximately a third (11) thought they were heavy users; this rose to two-thirds (19) of the medium-heavy user group and slightly under two-thirds (15) of the high-heavy user group. This suggests that in the medium-heavy and high-heavy user groups a majority of participants in each were aware that their patterns of consumption might be considered high in relation to their peers, and/or where these patterns were normalised in the peer group, these young people were aware that they were smoking at what might be considered a high level.

Participants were also asked if they thought other people worried about their use and those who described themselves as heavy users were more or less evenly split between those who thought others did worry and those who thought they did not. Interestingly, it was those who said that they used to use heavily but no longer did so who were most likely to say they thought other people worried about their use.

Some participants were very ambivalent about describing themselves as heavy users. Martin, a full-time HE student (24 years), said he tended to smoke about £30–£40 worth of cannabis per week and when he was asked what he thought heavy use was he said:

*Oh, I would say heavy as maybe £20 a day ... I would consider that to be heavy. But, maybe mine's heavy as well, maybe I'm a heavy user but I don't wanna say that to myself if you know what I mean? I just don't want to admit it.*

Anita (18 years, training scheme) became quite annoyed when she was asked if she thought she was a heavy user:

*What do you mean 'heavy'? One spliff a day isn't heavy to me. I am a light smoker. I smoke enough, put it that way, but I wouldn't want to call myself a heavy smoker.*

### **Cannabis and Class A drugs**

In talking about what they considered to be heavy cannabis use, it was evident that many participants drew a qualitative distinction between use of cannabis and use of other drugs such as heroin and/or crack (cf. Melrose, 2000) – even amongst those who were still using or who had previously used these drugs. Anita (18 years, training scheme), who had never used any other drug except cannabis, was asked:

PT: *How do you feel when you have bought it and you know you've got it and are going to smoke it?*

A: *I will put it in my room and go out for five hours and come back. I am not the sort of person to rush, I'm not like that, that is what people on crack do. It's cannabis, not bloody Class A drugs.*

Eva (17 years, training scheme), who had used 'coke, trips, mushrooms, pills [ecstasy]' in the past but was not using any of these drugs at the time of the interview, considered herself to be a heavy cannabis user:

PT: *And how do you feel about that?*

E: *Well, I don't think it's that bad cos it's not like the bad drug. I know it's a drug and it is quite bad but it's not as if I'm like, a heavy coke user or a heavy crack user.*

Marlon, who had never used any other drugs, said:

*I mean, I know people that have smoked weed for years and still done their lives, still had their sessions and got up in the morning and gone to work but when you get onto the Class A's, whole different thing, whole different thing.*

Marcus (17 years, training scheme) was asked if had ever tried or used any other drugs:

M: *No, never.*

PT: *Never? Not even to try?*

M: *No, no.*

PT: *No, do you think you would?*

M: *No.*

PT: *No, why would that be?*

M: *Never, it is just, never, innit? Never, ever. I would never try no other drugs.*

PT: *No. What's your thinking? Why do you say that?*

M: *Crackhead. That's how I see that. It is crackhead, innit? I would never, no.*

PT: *So when you say 'crackhead', you are saying ...*

M: *That does mess with you, because I know what has happened to people that I know.*

Sudip (18 years, FE student), who had never tried or used any drugs except cannabis, said:

*They [his parents] think like, 'Yeah, you're on drugs, you're on drugs' and I've told them, 'It's just a plant man. It's not heroin or cocaine or nothing, it's just green. It's nothing bad'.*

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Greg (17 years, training scheme), who had used 'ketamine, pills, coke, base and MDMA' in the past, said:

*I don't believe in all the other drugs really, I just stick to green and that's it. I wouldn't go into all the Class A's – that's too dangerous. I've done it before but I wouldn't touch it again. That's what makes you go downhill.*

Sophie (18 years, basic training scheme), whose parents had both been heroin users, had previously used a wide variety of other drugs herself. She tended to contextualise her cannabis use in relation to these drugs and the drugs her mother had been using:

*I suppose I'm using a drug but it's not as bad as, sort of things as my mum like did. That's what I think of like.*

As did Tasha (18 years, training scheme):

*I don't see smoking weed as bad though as like taking crack or anything. Like because my dad he used to take crack and all that. I wouldn't starve myself or my son to buy a draw [sic]. Not like crackheads.*

It is clear from these extracts that comparing cannabis with Class A drugs allows these participants to minimise and even trivialise their own use and to construct it as relatively safe or unproblematic (cf. Parker *et al.*, 1998, p. 132; Pearson and Shiner, 2002, p. 77). Greg illustrated this point very clearly when he said:

G: *I don't, well heavy user is what I smoke, but to me it's not heavy to me. When I'm smoking I don't see nothing wrong with it. I've had a lot more hassle on different drugs. I don't say cannabis you can get heavy on it. I say class A are heavy drugs.*

MM: *You wouldn't think that you can use cannabis heavily?*

G: *No, I don't know why, I just don't see it as heroin really. That's going into thousands of pounds worth of stuff. That's a lot.*

Some young people went so far as to deny that cannabis was a drug. Tyrone (18 years, training scheme) said:

*It is natural, not a big exciting thing or whatever, it is natural nowadays. It is just like smoking a cigarette. I see it as a cigarette. I don't see it as smoking a drug. It's like, I don't see it as drugs.*

When practitioners working with young people were asked to define what they considered to be heavy use of cannabis, the variation in their responses was somewhat less marked than those of the young people, but in defining heavy use professionals were far from unanimous. However, all professionals who answered the question (19) considered that spending up to £100 per week would constitute heavy use compared to under half of the young people.

Amongst the professionals, nine participants (representing almost half of those who answered the question) thought that spending between £30 and £60 per week would represent heavy use while just over a quarter (5) thought that spending up to £30 per week would represent heavy use. It was unclear, however, whether professionals were aware of the amounts of cannabis these sums of money might buy but in terms of what some participants said they were using, they wouldn't buy very much.

### Paying for cannabis

Given that these participants appear to be spending relatively large sums of money on cannabis, a note should be made about how they said they financed it.<sup>7</sup> Some participants (particularly those living in hostels) had devised quite ingenious ways of raising money for cannabis by pawning personal possessions (play station games, walkmans and so on), taking it in turns to redeem the goods when they received their giros and then pawning them again until someone else received a giro. Kenny (18 years, unemployed) told us he smoked ‘about an eighth a day, maybe more, maybe less’ because:

*It all depends on the money situation. And maybe sometimes tick a draw off a dealer. A dealer that we [he and his friends from the hostel] hardly ever go to I’d tick a draw off him and never pay him back and never use that dealer again or we’d sell stuff, buy it back and sell it again, buy it back and sell it again. So it’s like a little routine.*

Others sold rather than pawned personal possessions. For example, Kim (18 years, unemployed) told us:

K: *Then selling my phone to buy, to go towards draw.*

MM: *You were selling stuff?*

K: *Yeah, like my mobile phone, CD walkman.*

Certain participants disclosed they had occasionally been involved in criminal activity:

M: *Money is a big issue, obviously, cos at certain times you end up doing things you wish you hadn’t done all for a bit of weed.*

MM: *Could you tell me a little bit more about what you mean by that, if you’re doing things you wish you hadn’t done?*

M: *Street robbery, err like.*

When professionals working with these young people were presented with data on what they told us they were spending, some were quite surprised while others suggested that participants were probably overestimating the amount they were spending/using and underestimating the amount of crime they were involved in to pay for it. As we have noted above, this is an unavoidable difficulty when relying on self-report data but only one or two admitted that they had been involved in crime to finance their drug use.

On the other hand, several admitted that they sometimes sold cannabis in order to cover the costs of their own use. Craig, a 16 year old on a basic training course, said:

*I don’t really intend to sell it, but when I’ve got some and someone says, you know, ‘Got an eighth to sell?’ it’s stupid for me to smoke it all. So yeah, I do make my money back sometimes. I don’t intend to do it. I just sit there. I don’t go round telling people, ‘I sell it, yeah, do you want to buy this, do you want to buy that?’ I just do what I normally do and if they come up to me and I’ve got it and I want to sell it, that’s what I’ll do. Get my money back.*

Some relied on friendship groups to share with them when they could not afford to buy it themselves. Troy (24 years, unemployed), for example, said:

*I was around a lot of people a lot of the times, who always buy it constantly, get money from their parents, you know, pocket money sort of*

*thing, they'd always buy it and I was always there smoking it with them. And also had times I had videos and DVDs or games, I used to go and sell them.*

### Others just did

*... bare stuff just to get your money, like going round making little raises at school and asking people for like 20p just to make up the next ... just to put to a draw. It's crazy the stuff people do to get the money'*

(Jodie, 16 years, at school)

In some cases students in HE were provided with a living allowance from their parents and/or their parents were paying their rent. This meant for a small number of them that they did not have to worry too much about living expenses and could use their student loans/parental allowances for hedonistic pursuits such as smoking cannabis and/or going to the pub with their friends.

### Patterns of heavy use

What clearly emerge from our data are patterns of cannabis use that can be described as 'structured' or 'controlled' on the one hand and those that are unstructured/compulsive (or dependent) on the other. A person can be said to be dependent on cannabis when three of the following seven criteria are met:<sup>8</sup>

- tolerance to the effects of cannabis
- withdrawal symptoms on ceasing or reducing use
- cannabis used in larger amounts or for a longer period than intended

- a persistent desire or unsuccessful efforts to cease use
- a disproportionate amount of time spent obtaining, using and recovering from use
- social, recreational or occupational activities reduced or given up as a result of cannabis
- use continued despite knowledge of physical or psychological problems induced by cannabis. (American Psychiatric Association, 1994, cited in Coffey *et al.*, 2002, p. 187; see Swift *et al.*, 1998)

Importantly, patterns of controlled or compulsive use were often (though not always) associated with the social situations in which some participants found themselves. In general, those who were in further or higher education tended to use cannabis in a more controlled way than those who were unemployed and/or on basic training courses.

Oscar (21 years, HE student), for example, a low-heavy user, said he would take breaks from smoking every so often for a couple of days at a time and fully intended to stop smoking altogether when he finished university. When he was re-interviewed after he had finished his course and returned to live with his parents he had not smoked for the previous three months. Similarly, Nigel, also a university student (21 years), regularly took 'breaks' from using cannabis. He felt:

*It's never really seemed to affect me too much, hasn't got in the way of my studies at all, it's about moderation I would have thought, as long as you don't go crazy with it. It's the same as*

*anything, like if you drink you don't go out and get drunk every single day. Just moderation.*

Nigel was classified as a low-heavy user and his pattern of use seemed to be structured and controlled:

*I'd rather smoke it during the night to be honest so that it doesn't carry on to the next day and then I can have the next day off as opposed to having a little bit left and then you're likely to want some more.*

On the other hand Tyron (18 years, basic training scheme), a high-heavy user, said:

*I smoke one when I go to bed, it's part of the routine. I have to smoke that one before I go to bed, I dunno, just as like religion, do you know what I mean?*

Mehmet (16 years, FE student), also a high-heavy user, said:

*'I dominate my life round it [sic]. It's not that my life is dominated round it it's that I've dominated my life around it.*

Another young man (17 years, basic training scheme) told us he smoked a bong first thing in the morning and continued to smoke them throughout the day, sometimes smoking as many as 20 in one day. A key point here, therefore, is that compulsive or controlled use appears to be associated with the context in which cannabis is used.

Sixty-three participants provided information on the number of joints they might smoke in one day and while just over a quarter (4) of those who were in HE or FE smoked over five joints per day, almost two-thirds (8) of those who were unemployed did so. This compared to

a third (2) of those who were working and just over a third (8) of those who were on training schemes.

The implications of the patterns of use identified here will be revisited and explored further in Chapter 4 when we examine the impacts of regular cannabis use in these participants' lives.

## Summary

This chapter has shown that:

- Skunk was widely available in the areas in which the fieldwork was conducted and most young people smoked it in joints (i.e. cannabis mixed with cigarettes/tobacco).
- Most preferred the 'buzz' from skunk, finding it stronger than the buzz they get from cannabis resin.
- Three-quarters of those who gave precise spending figures or weights were spending less than £100 per week and some tended to buy on a daily basis.
- The high-heavy users tend to be experiencing the most severe social and personal problems.
- Whether they think of themselves as heavy users or not depends on the reference group with which they tend to compare their own consumption.
- Some struggled to quantify heavy use but tended to define it in terms of its social and/or personal impacts.

## The impact of heavy cannabis use on young people

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- There is variability in definitions of heavy use but some consensus that it involves some or all of the following: daily use; feeling the effects of not having it; spending all one's money on it; neglecting other areas of life because of cannabis; doing nothing else except smoking cannabis.
  - Controlled or compulsive use is often associated with the social contexts in which the drug is used.
- Cannabis use was often compared to Class A drug use and thus rendered unproblematic.
  - Some participants were ambivalent about defining themselves as heavy users.
  - Young people devised various ways of financing their cannabis use, including selling or pawning personal possessions, selling to friends, using the student loan system and for a small number involvement in criminal activity (mostly street crime).

# 3 When, why and how young people begin to use cannabis

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## Introduction

This chapter describes the ages at which these young people had begun to use cannabis, why they said they had begun to use it and the situations or circumstances in which they had begun to use it. It notes that the transition to secondary school seems to be a significant step for many in terms of initiating cannabis use and that the concept of 'peer pressure' is inadequate for capturing the dynamics involved. Rather, the chapter shows that the notions of 'peer acceptance' and/or 'peer belonging' are important to understanding this process.

## When did these young people begin to use cannabis?

Across the group, the average age of starting to use cannabis was 13.7 years. This corresponds with findings from a survey of 200 young drug users in London in which McCambridge and Strang (2004) found the average age of first cannabis use was 13.9 years. Amongst our participants, the average age for boys beginning to use cannabis was 13.9 years while for girls it was 13.2 years. There was, however, wide variation in the ages at which they had begun to use cannabis – two participants, one male and one female, had started using cannabis when they were nine years old while seven, six male and one female, began to use it when they were 18 years old.

Just over half (54) of our participants had begun to use cannabis under the age of 13 which broadly corresponds with the transition to secondary school and entry into Key Stage 3. The transition to secondary school therefore

seems crucial in terms of onset of cannabis use. When we turn the spotlight of gender onto the question of when participants had begun to use cannabis, we find almost two-thirds (16) of females had started when they were 13 or younger compared to a little over half (38) of males.

That these young women had, in general, initiated cannabis use before their male peers may well be an artefact of the sample: that is, the research accessed a particularly troubled, vulnerable and/or criminogenic population of young women. Certainly, that a greater proportion of girls than boys lived in hostels, had been excluded from school, had been involved in offending and had been looked after at some point would suggest that this is the case.

It has been argued that young women often initiate drug use to cope with 'very real pressures and underlying tensions' in their lives while young men tend to use them 'to deal with external pressures and to feel disinhibited' (McCallum, 1998, p. 10; cf. Ettore, 1992; Taylor, 1993; Malloch, 2004). Further, it has been suggested that in response to stress, young women may 'self-destruct with quietly disturbed behaviours' rather than 'act out' as boys do (Shultz, 1990, cited in Turner *et al.*, 1995, p. 30, cited in McCallum, 1998, p. 25). Dionne (20 years old, single parent) illustrates this point well. She had started smoking cannabis when she was 13. She was asked if there was anything else going on in her life at that time that she thought was significant to her beginning to use cannabis. She said:

*Erm, my two little sisters were born. My mum had them with my step-dad. I started high school. I went into high school as well.*

Until the birth of her sisters Dionne felt she had

*... all my mum's attention. I dunno, myself and my sisters just felt, I dunno, pushed back a little bit and we did rebel, all of us I think, sort of like, you know, trying to attract attention.*

Dionne had progressed from cannabis use to Class A drug use and had served time in prison for street robbery. When we met she was on a methadone programme.

While over half our participants had begun to use cannabis before they were 13, just under a third (30) began to smoke cannabis between the ages of 14 and 16 while just over a tenth (13) started using it when they were 17 (6) or 18 (7) years of age. That such a high proportion of our participants had begun to use cannabis at very young ages is deeply concerning in the light of evidence suggesting that the earlier the onset of cannabis use, the greater is the likelihood that users will go on to develop problems with other illicit substances (McKeganey *et al.*, 2004; Hall and Lynskey, 2005) and the greater is the likelihood that they will exhibit signs of dependency on the drug (Swift *et al.*, 1998).

Indeed, Gillian, an unemployed 20 year old who had been looked after, excluded from school and involved in offending, and had spent time in prison for assaulting a police officer, illustrated clearly how such problematic patterns of drug use can develop. Gillian had started smoking cannabis when she was 11<sup>1</sup> and

*When I got to 13 I started gas [i.e. aerosols]; after gas I tried pills, ecstasy, then I did speed, then I done base [pure form of amphetamine].*

The early-onset users, however, were not always the high-heavy users. They tended to be distributed across the medium-heavy and high-heavy categories. Some of these early-onset users had used at a high-heavy level for some time but had since reduced their use and were thus classified as medium-heavy users in this study.

### Why did these young people start using cannabis?

When we asked about why they had begun to use cannabis, the greatest proportion said it was because all their friends were already using it (acceptance seekers) or because they were curious about the effects and wanted to try it<sup>2</sup> (thrill seekers). When we look at gender in relation to this question, however, approximately half (12) of the young women who answered and just under a third (18) of young men said they had begun smoking cannabis because all their friends were already using it. The next most frequently cited response to this question was because they were curious about the effects and wanted to see what it was like and/or because they wanted 'a buzz'. Boys were more likely than girls to give this as a reason for beginning to use cannabis: while a third of boys gave this reply, just under one-fifth of girls did so. This suggests that while girls are more likely to initiate cannabis use to feel part of a group, boys are more likely to do so in order to take risks and experiment.

Differences between acceptance seekers' and thrill seekers' reasons for initiating cannabis use are clearly illustrated by Beverley (acceptance seeker), Mehmet (acceptance seeker), Grant (acceptance seeker), Rashid (thrill seeker), Helen (thrill seeker) and Paul (thrill seeker).

**When asked to tell us a little bit about her background, Beverley (acceptance seeker) said:**

B: *I started smoking cigarettes at the age of ten because I used to hang around with people a lot older than me. Then it was started onto drink, then smoking spliff and so on.*

MM: *So when you started smoking cannabis, roughly how old would you have been?*

B: *I was 13.*

MM: *And were you smoking it regularly then or what?*

B: *Yeah, it was. We'd meet up, a group of friends, and we'd put our money together and buy some and just pass it around and that was it. And then it was every night, we had nothing better to do and it was get a draw.*

(Beverley, 20 years old, single mother, ex-heroin and crack user, currently on a methadone programme)

**When Mehmet (acceptance seeker) was asked about when and how he started he said:**

M: *About three years ago.*

PT: *Right, so you started about three years ago. So you would have been about 13 then?*

M: *13, 14.*

PT: *Yeah, and how did it begin? How did it start?*

M: *I guess, erm, one of my friends started smoking and a few others of my friends started smoking. So I thought to myself,*

*'well, everyone's smoking, I might as well try it', so I tried it.*

(Mehmet, 16 years, FE student)

**Grant (acceptance seeker) told us about when he started using cannabis:**

MM: *What made you decide to start? What made you decide to try it, do you know?*

G: *My friends. They were all doing it. I didn't want to be any different from them.*

(Grant, 19 years, HE student)

**On the other hand, Rashid (thrill seeker) said:**

*What prompted me? I mean friends I used to hang around with, they've been doing it for a little while now. They started around the same age. At first I was inclined to reject the offer of the boys who smoke at school, I don't like cigarettes, I think they're disgusting things. But cannabis, I thought, 'Hmm, I'll give it a try'. One day my friends offered me one and I thought, 'Why not give it a try?'*

(Rashid, 21 years, FE student)

**Similarly, Helen (thrill seeker) said:**

*We were just experimenting I think and it was there. I think it was just fun.*

(Helen, 24 years, part-time worker)

**And Paul (thrill seeker) told us:**

*Well I was curious, but most of the people I was around hadn't done it before, so there wasn't any sort of peer pressure to do it. It was mainly we were all curious, so we were like, 'yeah, why not?'*

(Paul, 16 years, final-year high school student)

A smaller proportion of our participants were classified as ‘thrill and acceptance’ seekers – that is, they said they began to use cannabis because all their friends were doing it *and* they were curious about the effects. This is illustrated by Jay and Tim when they explained why they had started using cannabis:

MM: *When you started smoking cannabis, you were in your final year at school then, just before your GCSEs?*

J: *Yeah, just before my GCSEs.*

MM: *And how did you start using it?*

J: *Out of curiosity more than anything. A lot of people were doing it at school, I watched a lot of films like *and bits and pieces*, just basic curiosity. I just wanted to see what it was like.*

(Jay, 24 years, employed, ex-heroin and crack user currently on a methadone programme)

**Tim (thrill and acceptance seeker) said:**

*I think there was an element of curiosity and peers as well. At parties everyone was doing it, so you had to, to fit in. I never felt particularly pressured but I wanted to give it a go.*

(Tim, 21 years, HE student)

A small number of young people (6) were classified as ‘oblivion seekers’. That is, they said they had begun to smoke cannabis because they were trying to ‘escape’ from other problems in their lives. A young woman who had been raped when she was 13 said she had begun to use cannabis and other drugs at that time because she ‘couldn’t handle it’. Dale (25 years, unemployed) said he smoked cannabis ‘to make myself feel better or take the pain

away’.<sup>3</sup> Noel (21 years, unemployed) said he smoked cannabis, ‘basically to forget, to forget things. Like escape sometimes’, while Joel (20 years, part-time worker) said cannabis helped him ‘to escape from reality’. Neil, (17 years, basic training scheme) felt he had started using cannabis in response to problems between his mother and father because he ‘just wanted to get out of the house’ and cannabis was ‘the only thing that calmed me down’.

### **Cannabis use and peer group acceptance/ belonging**

In popular discourse young people’s drug use is often attributed to ‘peer pressure’ with the assumption being that the young person is ‘corrupted’ or coerced by peer influences. In fact, just two of our participants suggested that they had been pressured into using cannabis. One young man said that he had been ‘dared’ by his friends to try it so he had accepted the challenge while Ellie (17 years, basic training scheme) said she had been ‘bullied’ into trying it:

*I first started when I was 12, I got bullied into it, I was bullied into it. We was in the park and they were going, ‘If you don’t have a bit, I’m going to punch you, kick you’, violence basically, so I thought I would. My so-called friends.*

Despite saying that she had been bullied into trying cannabis, Ellie had continued to use it: ‘when I was 15 I used to have a joint a day’. At the time of the interview, she said she only used cannabis to socialise and did not buy it herself.

Evidence demonstrating that young people often initiate drug use out of curiosity, and will tend to seek out drug-using peers, is more widespread than evidence that cannabis use

begins as a result of 'peer pressure' (Melrose, 2000; McIntosh *et al.*, 2003). Research also suggests that as young people age, the decision to try or use drugs is more a matter of personal choice than peer pressure (McIntosh *et al.*, 2006).

The data generated in this study would support this finding as well as the conclusion that 'the belief that drug use is largely the product of peer pressure acting upon passive and compliant adolescents is almost certainly wrong' (McIntosh *et al.*, 2003, p. 156). Our data suggest that many actively make the decision to try or use cannabis and while there may be some *peer influence* involved, to describe this as *peer pressure* would be misleading. Rosie (17 years, training scheme), Martin (24 years, HE student) and Rashid (21 years, FE student) express this clearly in their accounts of how they began to use cannabis.

**Rosie told us:**

*I smelt it, it had a funny smell. They [her friends] said, 'It don't smell like the taste', so I asked them like, could I have some. It weren't peer pressure or nothing like that. I did it on my behalf.*

**Similarly, Martin told us:**

*Erm, I suppose I really started smoking cannabis when I started college. I came out of school in about 1997, 98 maybe. And err, I needed to find some new friends or whatever and the group that I started talking to at lunchtimes were going out into the car park and we'd have a few smokes and it led on from there really. It wasn't that they were forcing me to smoke it. It wasn't, it wasn't peer pressure. It's just, we went out, the others were smoking, umm, they weren't egging me on to do it or anything, you know,*

*'Go on Martin, have a smoke'. I just did it. I just smoked it really.*

**In the same vein, Rashid said:**

*I mean I suppose, I suppose when I had the first one ... I wouldn't say it's peer pressure, I mean cos I'm not the sort of person to fall into that peer pressure, I dunno, curiosity, and if I didn't like it, I wouldn't have done it again. Like I tried cocaine, I didn't like cocaine, I didn't do it again.*

Evidence within our data also supports the contention that peer groups may play a positive part in regulating drug use (cf. Harris, 2005). For example:

*My best friend, not my very best, well I used to be at school very best friends with her. Cos she doesn't really like the smell of it, she was like, 'Can you not smoke it around me today?' I was like, 'Yeah, sure'.*

(Sophie, 18 years, basic training scheme)

*In my actual group I am actually the heaviest smoker I know. Everyone says it when they see me. They say I smoke too much draw, they tell me I smoke too much draw. [Laughs]*

(Charlie, 16 years, FE student)

### **Parental drug use**

In a number of cases, young people had grown up around parents, siblings and/or extended family members using cannabis and/or other drugs (especially heroin and/or crack). For these participants, drug use (involving cannabis and other drugs) was a 'normal' part of their environment. A body of evidence suggests that children and young people exposed to parental/familial drug use are vulnerable to early substance misuse and a range of other negative

outcomes (Brook *et al.*, 2001; ACMD, 2003; McIntosh *et al.*, 2003; Bahr *et al.*, 2005). Parental drug use combined with factors such as 'marital discord, low supervision of children and family break up has been shown to be associated with an increased likelihood of young people initiating illegal drug use' (McKeganey *et al.*, 2004, p. 319).

Sophie (18 years, basic training scheme) had first tried cannabis when she was 12 and started using it regularly when she was 13. She now saw her cannabis use as 'just normal, a daily thing' but didn't regard it as problematic because 'It's not as bad as what my mum did'. Sophie had grown up with her mother and had not known her father until she was 11. Both her parents used to use heroin. Sophie had used a range of other drugs, including, 'E, coke, base, ketamine and crack'. She thought she would still be using cannabis in two years' time but was not so sure that she would be using it in five years' time because 'it depends what I'm doing'.

Teri (20 years, unemployed) had been exposed to her mother's drug use from a very young age. She said:

*Erm, there's always been a lot of drugs around me from as long as I can remember. My mum and her friends, people that used to baby-sit us, everywhere you look there was always drugs.*

Teri had started smoking cannabis when she was 13 by 'stealing my mum's puff'. When we met she said she was smoking 'about an eighth a day' but this represented a reduction on the amounts she had been smoking a year before. Teri also used 'base' (amphetamine) 'and pills' (ecstasy) regularly.

For Sophie and Teri, their early exposure

to parental/familial drug use had left them vulnerable to initiating illicit drug use themselves at an early age and to seeing their drug use as fairly 'normal'. The data also suggest their parents' drug use and the circumstances in which they had grown up had rendered them vulnerable to developing more problematic types and levels of drug use. However, this was not the case for all participants who had been exposed to parental/familial drug use.

Ellie (17 years, basic training scheme), for example, had experienced family break-up and had begun to smoke cannabis when she was 12. She said, 'The family went wrong and then I started smoking', but she also claimed, as described earlier, that initially she had been 'bullied' into trying cannabis. She had also been exposed to her parents' drug use as she grew up:

*My mum and dad know [that she smokes cannabis], but my dad, he also smokes cannabis, he says it's for health reasons, it helps numb the pain in his knee ... my mum just smokes it, not for no reason [sic], she just smokes it ... that's not the only thing my mum uses ... she's on heavy drugs, yeah.*

However, when she was interviewed, Ellie claimed she only smoked 'about one and a half joints a week, because I only do it socialising. I don't actually sit there rolling a joint up myself'. Ellie was classified as a light-heavy cannabis user and had not used other drugs even though they were available if she wanted them. She said, 'I haven't wanted to try anything else'.

Eddie (18 years, unemployed) had also experienced family problems and parental drug use. He told us:

*I had quite a bit of problems at home, my mum and dad split up and my dad also got into drugs because of what had happened. He was on crack for a while. My mum and dad were both cheating on each other, they had problems in the past and so they split up. My dad left home, I was upset about it, me and my dad, well, my dad got on crack.*

Eddie had started smoking cannabis when he was '14 or 15' but at the time of the interview said he did not buy it himself any more; instead he tended to smoke when his friends had some. He said:

*Well it's spliffs sometimes but mostly it's like bongos but I don't usually smoke it that much any more because I'm more of an alcohol drinker.*

Ellie and Eddie show that although their early exposure to drug use may have made them vulnerable to initiating illicit drug use when they were young, this did not necessarily leave them vulnerable to developing more problematic types or levels of illicit drug use.

### Summary

- Amongst this group the average age of initiating cannabis use was 13.7 years and on average the young women began to use cannabis before the young men.
- The transition to secondary school coincides with initiating cannabis use for many young people, particularly for those at the most disadvantaged end of the social spectrum.
- Beginning cannabis use at a young age renders some young people vulnerable to developing problematic patterns or levels of illicit drug use and the data provide examples of where this was the case for a small number of participants.
- Most young people in this group began to use cannabis because all their friends were already using it and/or because they were curious about the effects. Generally, being part of a group appeared to be more important to the girls while getting a 'buzz' seemed to be more important to the boys.
- 'Peer pressure' is inadequate to explain why young people begin and continue to use cannabis but peer acceptance and peer belonging are important to understanding this phenomenon.
- A small number of young people had been exposed to parental/familial drug use as well as marital discord and family breakdown. Although this may have rendered them vulnerable to initiating cannabis use at an early age it did not necessarily mean they were vulnerable to developing problematic patterns/levels of drug use.
- While young people often said they had started using cannabis because all their friends were and/or because they were curious about the effects, when the circumstances in which they had begun to use were probed more deeply this revealed that there were often underlying traumas associated with their cannabis use, particularly amongst those who were most severely disadvantaged. This suggests their cannabis use was symptomatic of other problems rather than the cause of them.

# 4 Heavy cannabis use and youth transitions

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## Introduction

In this chapter the discussion examines how participants perceived the benefits and costs of using cannabis and explores what they said about the personal and social impacts of cannabis use. It demonstrates that young people may begin and continue using cannabis for different reasons. The chapter notes the complexity of the relationship between cannabis use and youth transitions and suggests that those experiencing the most severe difficulties (homelessness/hostel living, unemployment, lack of educational achievement, difficult family relationships and so on) often lack opportunities to make the transition to higher status adult roles and thus may become 'stuck' in transition. In these circumstances their cannabis use may escalate, which in turn impacts negatively on their ability to make the transition to higher status roles. Thus, in relation to this group in particular, the relationship between youth transitions and heavy cannabis use appears to be cyclical.

## Positive functions of cannabis use

Previous studies of young people's drug use have clearly demonstrated that, amongst those who use them, drugs are perceived to fulfil a range of positive functions (Parker *et al.*, 1998; Boys *et al.*, 1999, 2001, 2002; Green *et al.*, 2003). In Boys and colleagues' (2001) study of poly-drug users, the most popular function described was 'to relax'. In Parker and colleagues' study (1998), cannabis was considered to be the 'ideal' drug to relax with and 'relaxation' was the most commonly reported effect in naturalistic

studies of cannabis users (Green *et al.*, 2003, p. 453). Likewise in this study, when asked about what they thought were the benefits of using cannabis, the most frequently cited single benefit was 'relaxation'. High-heavy users cited this benefit more frequently than others, perhaps suggesting this group have forgotten (or perhaps never knew) how to relax without smoking cannabis.

While relaxation was reported as the single most positive benefit of cannabis use, 28 of our participants thought there were multiple benefits from smoking cannabis and these were described as a combination of relaxing, socialising with friends and getting high.

Interview data clearly demonstrate that smoking cannabis is perceived to perform a number of positive functions for these participants. Amongst those most frequently cited are:

- acting as a social lubricant, facilitating peer bonding and providing a sense of identity/belonging to particular groups
- forgetting worries/relieving stress and relaxing
- managing anger/avoiding 'other' sorts of trouble
- relieving boredom/enhancing everyday activities by getting 'high'.

## Cannabis as a social lubricant

That cannabis functions as a social lubricant facilitating peer bonding is evidenced in the following extracts:

*When I go out there's nothing to do so I have a smoke to socialise. It has got to do with more socialisation.*

(Rashid, 21 years, FE student)

*I didn't have a social life outside of my home and like, for a very long time I was at home and just playing computer games and not doing anything and that was a very boring, lonely, unsociable life. And, err, so I decided that I would smoke it purely so that I could carry on hanging around with these mates so that I have got a social life, so that I do have things to do, things to go out for, and having a laugh at the same time.*

(Tony, 18 years, training scheme)

*It's a really social thing. It's good fun to sit down with your mates and get a spliff on the go because it makes you talk more and it's just a lot of fun. It's the same as you might sit down with a friend and have a pint in a pub, it's just the same thing.*

(Paul, 16 years, in transition to FE)

**Rees (17 years, FE student) and Jodie (16 years, at school) demonstrate how, as well as functioning as a social lubricant, using cannabis can become a ritualised part of peer interaction:**

*Three, three, three, that's a game you play. Like the person who bought it, they would spark it and whoever is in the room would just go 'three, three, three', you go [inhales quickly three times to demonstrate] and then pass it and the other person would take three and it would go round and round and you would take three and it would go round till the zoot's dead. And that's it, that is how you pass it round.*

*I was making a spliff with my friends the other day and they were going to play 'killer'. Do you know what that is? It's like you take, it's like*

*'two burn killer', you take two burns and you hold it in and it gets passed round the circle and everyone takes their two burns and when the spliff gets back to you, you can let it out, and like everyone used to say, everyone played that like, you can do as many burns as you want, but I done it once, just me and this boy and it was like 28 burns and I nearly died man! [Laughs]*

### **Cannabis, relief of stress and relaxation**

**As well as facilitating peer bonding, using cannabis functions as a form of self-medication and allows many of these participants to relax and forget about their worries and 'stress' as is evidenced in the extracts below:**

*It keeps me relaxed, doesn't make me get stressed or worried about things, it just makes you forget all your problems. Although some problems you shouldn't really try to forget about but some things you do need to forget about, like the past.*

(Troy, 24 years, unemployed)

*I find smoking a bit of puff helps relieve some of the stress, anxiety and things that I get put under on a day to day basis. Sometimes it doesn't relieve all the stress and depression and stuff but it does help you to forget about it for those split seconds if you know what I mean.*

(Karen, 24 years, unemployed)

*It just makes me less stressed and I don't have to think about anything like worrying.*

(Craig, 16 years, basic training scheme)

*The one thing I find with cannabis is it relaxes my mind a lot from daily stress. Even a little bit, it will help take that stress away.*

(Rashid, 21 years, FE student)

*It makes me calm. It makes me more chilled out. I don't get as stressed.*

(Eva, 17 years, training scheme)

That many participants tend to use cannabis to relax, to relieve stress and/or take their mind off other concerns and worries resonates with findings from a study currently under way in Manchester with 'heavy-end' cannabis users (Daly, 2006) and with survey work conducted with secondary schoolchildren in Canada. The latter study concluded that:

*Focussing on cannabis use per se fails to recognise that adolescents using cannabis, especially those using at problem levels, are trying to cope with serious issues in their lives. Cannabis use may be merely one expression of this struggle.*

(Cited in Daly, 2006, pp. 11–13)

It has also been suggested that when young people use cannabis to cope with or relieve emotional distress, they are 'more likely to have problems with the drug' (Daly, 2006, p. 10).

### **Cannabis and anger management**

Some participants said they used cannabis to manage their anger and claimed that when they smoke cannabis it stops them from getting into other forms of trouble (especially fighting and violence). For example:

*It calms me down to be honest, makes me a lot less aggressive. It makes me a nicer person to be quite honest. It makes me get on with people better. I mean like more sociable.*

(Charlie, 16 years, FE student)

*I used to get really, really, really angry and I used to snap but if I had a joint then I just didn't.*

(Sophie, 18 years, basic training scheme)

Hayden and Greg also thought cannabis enabled them to manage anger and avoid other sorts of trouble. Hayden said:

*I have anger management problems, I should have mentioned that. And, erm, it helps me in that sense as well cos it helps me keep my nose down if you know what I mean.*

(Hayden, 19 years, training scheme)

Greg thought:

*It keeps me calm instead of going out there causing trouble. It keeps me relaxed. I stay out of trouble. So that's why I smoke it, to keep me relaxed. It keeps me calm. I'm doing it to keep myself calm so I don't get into trouble.*

(Greg, 17 years, training scheme)

On the other hand, a small number mentioned they tend to feel angrier or more aggressive when they have smoked cannabis and that it can lead them into arguments with friends and/or siblings/parents. Eddie (18 years, unemployed), for example, said:

*I'd, it was the cannabis that made me do this, I'd been smoking the morning before I done it and my brother was winding me up. My mum told me to get out and I punched the window through, smashed the window.*

### **Cannabis, relief of boredom and getting high**

Cannabis use also functions to relieve boredom and to enhance otherwise mundane, everyday activities. Boys *et al.* (2001) found this to be the third most popular function of drug use. As Beverley said:

*I think it's boredom, being bored. Sitting at home all day by myself, my daughter was living with my mum. There was nothing else to do really.*

*It's all down to boredom I think. Having nothing to do, no-one there.*

(Beverley, 20 years, unemployed single parent)

**Katie echoed these sentiments:**

*I think a lot of the reason people smoke is because there's nothing else for them to do. They smoke because there's nothing else to do.*  
(Katie, 16 years, training scheme)

**As did Rees:**

*It's mostly, we do it mostly because there is nothing else to do, cos there is nothing else. You can go to the park and when all of you and your mates are out in the park, there is nothing to do. Just sit there and get smashed. There is nothing that young people can do, that is how all this happens because there's nothing you can do. I mean, get stoned, it's constantly, when you are stoned you always have something to do. You can go and get rizla, go and get fags, go and get it, and like, it's, go and find somewhere to skin up, it's just, you always have something to do.*  
(Rees, 17 years, FE student)

**Rees appears not only to be relieving boredom by smoking cannabis but through engaging in the activities that surround the actual smoking of it, he seems to be finding an 'effective resolution to de-routinised time structures' (Pearson, 1987, p. 87).**

**For Chantelle, however, being 'high' was important for enhancing everyday activities:**

*When I'm with my mates we will all sit there for about three hours, have a giggle, talk about stuff, listen to music, the usual really. But smoking makes it better, makes what we are doing feel better, and I enjoy it more because I'm stoned.*  
(Chantelle, 17 years, training scheme)

The above demonstrates that our participants perceive their cannabis use to have a number of positive functions and that their reasons for continuing to use cannabis differ from their reasons for starting to use it. When professionals were asked to agree or disagree with the statement that 'when young people use cannabis regularly it has a positive impact on their lives', one-tenth (3) agreed while over half (17) disagreed and just over a quarter (8) said they did not know. This would suggest that professionals working with young people do not necessarily recognise the benefits young people attribute to their cannabis use. They may need greater understanding of their reasons for using it and the benefits they derive from it so as to point young people to alternative means of deriving similar benefits (Boys *et al.*, 1999).

Interestingly, 13 participants said there were no benefits to smoking cannabis (11 male, 2 female), which rather begs the question of why they continue to do it and might suggest that their cannabis use is more habitual than considered (Maycock, 2005) and/or that it is 'endemic' rather than part of a pleasurable or self-gratifying lifestyle. The following exchange illustrates this well:

MM: *What do you think are the most positive aspects of using it regularly?*

B: *I don't know if there is any.*

MM: *Perhaps there aren't but presumably if you carry on using it there is something you're getting out of it?*

B: *It's not that it takes your problems away, but it makes you think more about the problems you've got. It starts going through your mind and you start getting*

*paranoid. I cut off all my friends, I had no friends. My money, I had problems with money, and erm, I don't think there was any good points to be honest. But there was a certain, I don't know, it must be the buzz, but I'm not sure. It's not the buzz like when you first start using it.*

(Beverley, 20 years, unemployed single parent)

The older age group was more likely than the younger age group to say there were no benefits to using cannabis, suggesting perhaps that it is an activity to which they have become habituated rather than a pleasure-seeking pursuit. As Rashid (21 years, FE student) says:

*Once the occasional effect has gone and you have it on a more regular basis it's when it becomes common, it's nothing really exciting.*

When Martin (24 years, HE student) was asked what he thought were the most positive aspects of smoking cannabis, he said:

*Erm, there probably aren't any. It's like going out for a drink with your mates, if you've got friends who smoke it's just like going down the pub for a pint. I'll go next door and have a smoke with the neighbour. It's as simple as that. It's just a way of socialising I suppose, umm, that's about it.*

This suggests that for those young people who report getting 'nothing' from using cannabis they may instead be getting a lot from being part of a group where cannabis is used. That is, for some of these young people it may not necessarily be the cannabis use per se that is important but the sense of 'belonging' to the group who use it. This raises questions about young people's emotional dependency needs and what they have to do to get them met.

### The negative impacts of cannabis use

When participants were asked directly about the negative impacts cannabis might have in their lives, many had difficulty in identifying them. Young people on the whole did not really seem to consider their cannabis use in any reflexive way – it was just something they did. Even when they were more reflexive about their use, they seemed reluctant to assign negative impacts to cannabis. When we discussed with professionals our finding that young people seemed to minimise or not be aware of the negative impacts of their cannabis use they tended to agree with this. In the professionals' experience, young people generally do not regard cannabis use as a problem and would not therefore dwell on any potential negative impacts because they tend to 'live for the present and not think about tomorrow'.

Nevertheless, when young people talked more generally about their life experiences and their use of cannabis, it was evident that for many participants (particularly those who were experiencing other social problems such as homelessness and unemployment) there were a range of negative impacts, whether they recognised them or not.

The social costs that resulted directly or indirectly from cannabis use related particularly to the following areas:

- school/educational achievement
- difficulties in relationships with parents
- accommodation (e.g. leaving or being 'thrown out' of home)
- police/legal system (acquiring a criminal conviction).

The personal costs, on the other hand, related primarily to 'demotivation' and the impact on health (both physical and mental).

### The social costs of regular cannabis use

#### Educational achievement

A 25-year longitudinal study in New Zealand that examined the impact of cannabis use on educational achievement concluded that:

*Cannabis may act to decrease educational achievement in young people. It is likely that this reflects the effects of the social context within which cannabis is used rather than any direct effect of cannabis on cognitive ability or motivation.*

(Fergusson *et al.*, 2003, p. 1681)

Similarly, Lynskey and Hall's (2000, p. 1628) review of the evidence on cannabis use and educational achievement concluded that the effects on educational achievement depend on 'the milieu in which the cannabis is consumed' and that the effects 'are not uniform across different sub-populations'. These findings are borne out by the findings of this study for while almost half our participants had been excluded from school at some point, a fifth were in HE or FE and did not appear to be experiencing any particular difficulties that they could attribute to their cannabis use in keeping up with the work (in fact one student has since been awarded a first-class degree and has continued in postgraduate study while still smoking cannabis at the level he was as an undergraduate).

In 2004/05 in one county in which this research was conducted, there were 51 exclusions from school for drug-related behaviour ('dealing drugs in school', 'possession

of drugs in school' or other 'drug-related behaviour'). Of these, 46 were temporary exclusions. This compares to 32 exclusions for smoking cigarettes and eight for alcohol-related behaviour in the same period.<sup>1</sup>

In 2004 the Department for Education and Skills issued new guidance on how to deal with drug-related incidents in schools. The guidance requires that all schools develop a drug policy and recommends that all schools develop a variety of means for dealing with drug incidents. It also recommends that exclusions should not be imposed without careful examination of the incident and suggests that in some cases exclusion for a fixed period is more appropriate than permanent exclusion (DfES, 2004).

When participants in this study were excluded from school, this was usually on a temporary basis and in questionnaires 13 participants said they had been excluded as a result of their cannabis use. When probed, it became clear that these young people had not usually been excluded from school as a *direct* result of their cannabis use; rather, their cannabis use had contributed to a range of problematic behaviours that had culminated in exclusion. So, although the young person *perceived* their cannabis use to be the reason for their exclusion, their cannabis use was indirectly related to their exclusion from school.

In interviews participants rarely spoke about being excluded because of their cannabis use although Sudip (18 years, FE student) told us he had been 'suspended' from college because he had been caught smoking cannabis in the car park. Rachel (17 years, at college) had also been suspended from school:

## The impact of heavy cannabis use on young people

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MM: *Did you say before that you had been excluded from school because of smoking [cannabis]?*

R: *I got suspended.*

MM: *Suspended, so it was only a temporary ...*

R: *Temporary, yeah. I think I got kicked out of school for about three weeks. They caught me with a joint.*

On the other hand, Ricky (16 years, basic training scheme) said he had been 'kicked out' of school in Year 9 because 'I got done for selling drugs' and when he attended a referral centre, 'I got kicked out after a day and a half cos they thought I was selling drugs'. Ironically of course, exclusion from school creates many more opportunities to smoke cannabis as there is little else to do everyday except 'hang about'.

For many of our participants the link between school exclusion and cannabis use is indirect but for those who already had relatively weak bonds with the school, exclusion had tended to loosen those bonds by disrupting their education and also getting them a bad reputation. This has major implications for their future achievement and opportunities as school is of course an institution which is central to future social inclusion.

In interviews participants tended to talk about truancy, i.e. excluding themselves from school rather than being excluded and preferring to go with their friends to smoke cannabis than to attend school, and a number acknowledged that their cannabis use had contributed to poor school performance. For example:

*Well I suppose from smoking, I didn't do so well in my GCSEs. My main priority would have been to do A levels but due to me smoking I haven't done so well in school. I'm at college, I'm not saying there's anything wrong with college, I'd rather be doing my A levels rather than doing a GNVQ intermediate course.*

(Mehmet, 16 years, FE student)

*I used to smoke in school in breaks and I'd be stoned when I went into class, which meant I weren't doing my work quick enough, or finishing by deadlines.*

(Kim, 18 years, unemployed)

*Well it changed my grades, I should have been getting better. Cos like I haven't been paying attention to all my work or anything.*

(Greg, 17 years, basic training scheme)

A number of our participants echoed the sentiments expressed above. Many (particularly those at the most disadvantaged end of the social spectrum and/or those now attending basic training schemes) thought they had not done as well at school as they might have done and attributed this to their cannabis use. Obviously we have no way of knowing whether they might have performed better at school if they had not been using cannabis and these young people may be using their cannabis use as a rationalisation for their lack of achievement. However, it seems reasonable to assume that if young people are 'stoned' in lessons they might not be learning as much as they might if they were not 'stoned'. This has important implications for their future opportunities because if cannabis use impacts negatively on the educational performance of the most socially disadvantaged of our participants then

this limits their opportunities to move out of deprivation in the future.

It may of course be that other factors in their lives (difficult family relationships, marital discord and so on) in conjunction with their cannabis use led to them experiencing difficulty in school and thus not achieving as well as they thought they could or should.

While some participants spoke about not being able to concentrate on their learning when they were using cannabis, others, particularly those in higher education, found that using cannabis helped them to concentrate, but there was an 'optimal point' beyond which cannabis hindered concentration. As Oscar (21 years, HE student) said:

*The work I've been doing over the past couple of months, I've been smoking when I've been doing it, and to an extent it sort of helps relax you and gets you into the frame of mind for doing it, cos I've been working on the computer to do it and er, it's been quite nice. But there's a limit and you reach that and everything just gets far too confusing.*

Martin (24 years, HE student) also found that smoking cannabis helped him with his work:

MM: *So you don't think it's had any kind of negative impacts on say you doing your degree?*

M: *I don't think so, no, cos I'm doing computing. How I justify it to myself is, I love programming on the computer and I like to think I'm quite good at it, and when I've had a few spliffs I can do it much quicker, it just rattles off, I can just type, type, type and it's done.*

MM: *So do you think it enables you to concentrate more when you're stoned?*

M: *I think so, yeah. Certainly in a problem-solving respect, or logic thinking, I can do things quicker or more efficiently, well perhaps not more efficiently but certainly the likes of programming, that's a brilliant example, I can do it quicker and I enjoy it more as well. I don't understand that but smoking definitely helps me when I'm doing that.*

### **Family relationships and being 'thrown out' of the family home**

In a number of cases cannabis use also directly or indirectly led to difficulties in relationships with parents (arguments and so forth) and in some instances was a contributing factor to the young person either leaving or being asked to leave home. Other studies have also found that drug use can be a contributory factor in the experience of homelessness (Neale, 2006).

Rachel, who lived in a hostel when we met, said she would argue with her mum all the time because of 'the way it made me look, like my eyes and that. And she'd be like, "You're stoned", just argue with her'. Eventually this had led to her leaving home. Ricky said he 'didn't have a relationship with my family' when he was on cannabis all the time and eventually he 'got kicked out of my house for a couple of months'. When Noel was asked to tell us a little about his background, he said:

N: *My name's Noel. I'm 21, nearly 22 and I've lived all over the place basically. I've moved around a bit.*

MM: *And how did that happen?*

N: *I got kicked out of my mum's at an early age.*

MM: *Do you want to say why that was?*

N: *Smoking drugs, just coming back drunk every night.*

MM: *So how old were you when you left your mum's?*

N: *Err, 14.*

### Legal problems

In addition to these problems, a small number of participants had been in trouble with the police although this was not always directly attributable to their cannabis use. However, Chantelle (17 years) told us:

*Well I got caught a couple of weeks back, skinning up, and the police arrested me,<sup>[2]</sup> with my mate, and that is how my dad found out. He knows I smoke it, he's not happy about it, and he has stopped, well he hasn't stopped altogether, but it is difficult to get money off him now, because he knows what I am going to do with it.*

Rachel (17 years) had also been arrested because she was smoking a joint in a public place for which she received a caution. Sudip (18 years) and his friends had been caught rolling a joint in a public place and although they were not arrested, the police confiscated their cannabis. This indicates that there is some variability in police responses to young people's cannabis use and enforcement practices may vary from area to area (May *et al.*, 2002).

When we spoke to professionals about the negative social impacts cannabis use might have in participants' lives, they suggested it was the

consequences of being caught using cannabis (e.g. suspension/exclusion from school, eviction from home or hostel accommodation, possible criminal record) that were potentially more serious than the actual use of the drug itself (see Lenton *et al.*, 2000). This is in contrast to the views of young people, many of whom recognised that cannabis had caused problems in relation to school performance and relationships with parents. This highlights a discrepancy between the difficulties young people perceive their cannabis use might create compared to the difficulties professionals perceive.

### The personal costs of regular cannabis use

As described above, as well as negative social impacts, regular cannabis use also had negative personal impacts in some of our participants' lives. As well as the financial cost many said it made them 'lazy' and/or that they 'couldn't be bothered to do anything'. Others spoke about becoming paranoid; two participants spoke of mental health problems their friend had experienced and a young woman spoke about mental health problems her boyfriend had experienced. A young man spoke about mental health problems he had experienced. He did not, however, attribute his problems to cannabis use but to poly-drug use. Others recognised that smoking generally was not good for their physical health, with observations such as 'obviously it's not good for your lungs', but didn't necessarily think that smoking cannabis mixed with tobacco was any more harmful than smoking tobacco on its own.

### Demotivation

A number of participants spoke about cannabis making them feel lazy or 'not bothered' to do anything or said that it 'demotivates' them. For example, Troy (and many others) told us:

*It kind of makes you lazy; you want to relax all the time. You're just smoking it so much and regularly, all the time, you don't want to do things, just wanna relax and not move basically.*

Joe (20 years, part-time training) said:

*Err, it just does, makes me more demotivated, doesn't really want me to do anything [sic] it doesn't make me care about anyone or anything, even myself. I won't be bothered about anything I'll just wanna sit there and smoke.*

Saul said:

*Smoking it, I can't be bothered to do anything. It just, I'd go out, I'd get home from school have an essay to write, or have £10 in my pocket to go and get stoned and mostly chose to go and get stoned.*

This sentiment was echoed by some students in HE and FE who said that even when they knew they had assignments to complete, the temptation to 'get stoned' sometimes won out over their determination to get on with their work.

Over the years, there has been a great deal of debate about cannabis and the so-called 'amotivational syndrome'. However, there is no clear evidence that such a condition is caused by use of cannabis and most recently evidence suggests that daily use of cannabis does not impair motivation (Barnwell *et al.*, 2006). In the case of some of the participants cited above, it may be that they had little to be motivated

about in the first place and thus a lack of motivation may be less to do with their cannabis use and more to do with a perceived absence of opportunity.

### Mental health

In interviews, young people were asked to tell us what they thought were the most negative aspects of using cannabis regularly and in addition to talking about being 'lazy' participants frequently spoke about 'paranoia'.

Tasha said smoking skunk made her feel

*... more paranoid, so you are thinking more, and you know, you think more and it brings you down, and you get depressed, and it's like you are having a breakdown.*

Rachel said:

*You go on a para. It makes you really paranoid. So you find little things just set you off kind of thing. I had panic attacks too.*

Kim said:

K: *I get paranoid and think people are talking and it changes how people look at me. And confidence, it took away a lot of that.*

MM: *Why do you think that is?*

K: *Again paranoia, just too paranoid.*

It is interesting that in terms of the benefits of cannabis use many said it helped them to relax but on the other hand it could induce paranoia. The juxtaposition of relaxation and cannabis-induced paranoia raises questions about the seeming ability of cannabis to perform contradictory functions – enabling relaxation on the one hand but inducing paranoia on the other. It also raises questions about

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whether smoking cannabis can be an enjoyable experience if it induces paranoia.

Two participants spoke about their concerns in relation to potential mental health impacts as a result of the experience of one of their friends. Tim talked about feeling ‘depressed’ on occasions and felt that smoking cannabis at those times did not help because ‘you’re not facing your problems, you’re smoking through them and then adding more problems on top’. He went on to say:

*I had a friend as well who was institutionalised for a couple of months during the summer last year solely because of his cannabis use. This is a guy who had no concept of moderation, despite all of our attempts to try to get him to cut down.*

Tim believed it was his friend’s lack of moderation that had led to him experiencing these problems and was confident he would not experience such problems himself as a result of his cannabis use. Mark (21 years, HE student), a friend of Tim’s, said that during his first and second year at university he had been smoking ‘a lot all the time’. Then,

*One of my friends went into rehab over the summer, he went a bit crazy, which I totally dismissed, I didn’t think it was possible cos I thought it was totally harmless.*

However, this experience made Mark stop smoking cannabis ‘for about eight months and now I just smoke every other day or something like that. Nothing like I used to’.

Eva (17 years, basic training scheme) spoke about mental health problems her boyfriend had experienced in between the first and second interviews. Her boyfriend was 22 years old. When she was asked what sort of things had

happened to her since we last saw her, she said, ‘My boyfriend went mad. Drug induced psychosis, by smoking cannabis’. She said:

*He just started going, talking riddles and, well making no sense and stuff like that and just weird stuff and he got sectioned.*

According to Eva her boyfriend had been smoking ‘£30 a day’ and had been smoking cannabis since he was 15. Despite this incident, Eva continued to smoke cannabis herself.

On the other hand, Lewis, who had started smoking cannabis at 14 and was 18 when interviewed, had experienced mental health problems himself as a result of taking ‘ecstasy, crack, skunk’ and some prescription medication his friend had for ‘a mental disorder’.

*We must have overdosed on about five of them in the night. Smoked crack, smoked skunk, sniffed gas, sniffed paint all at the same time.*  
[Laughs]

When he got home his mother phoned an ambulance because his heart rate was very high. After this episode:

*I was still smoking ganja but then ganja got too much for my mind, because I was like that, it got too much for my mind – every time I’d smoke ganja I’d have a panic attack.*

After a major panic attack while staying with his father in Devon, ‘I never touched any more drugs’. Lewis had been drug free ‘and only smoking ganja now and again’ for almost a year when he was interviewed.

### Cause and effect of heavy cannabis use

The data presented above demonstrate that despite the positive benefits participants derive from smoking cannabis, some also experience a number of negative impacts. However, these impacts crucially seemed to be related to the degree of pre-existing social or personal problems and the current social situations the young people found themselves in, for example homelessness, unemployment and/or problems with family relationships. Students in higher education, for example, tended to report that apart from making them 'lazy' there had been no other negative impacts, that their cannabis use did not get in the way of their studies and that they did not think about potential problems it might cause in the future (for example, getting caught by the police and acquiring a criminal record for possession) because they intended to stop smoking it when they finished university (in fact one was considering joining the police force).

While our low-heavy and medium-heavy users sometimes spoke of a tendency to 'procrastinate' when they had been smoking or to delay getting on with assignments in favour of 'getting stoned', our high-heavy users might delay job hunting in favour of getting stoned. Kenny (18 years), for example, was classified in our high-heavy user band. He was unemployed and living in a hostel when we met. He was also an ex-crack user and had spent some time in prison. When he was asked if he thought smoking cannabis affected other areas of his life he said:

*Yeah, yeah, it does. I'm not going to lie, it does. I mean it makes you, it makes you lazy, you can't be bothered really to get up and go and look for*

*a job when you know every day you should be getting up looking for a job if you haven't got a job.*

**Kenny went on to say:**

K: *Once I get a job I'm not going to smoke this much. And cos I smoke so much I'm not getting as stoned as I used to. It's like immune to me [sic] sort of thing, so I have to buy more and more to get stoned so this is why I need to get motivated and get a job. So then I can get a job, cut down, buy a bulk for a week, come home, smoke a couple of joints, go to bed, wake up the next day, get in a routine like that I suppose. Do you know what I mean? I don't have to have a joint every day if I'm working. It's just the fact that there's no job at the minute, and that's it really I suppose.*

MM: *And do you think being stoned every day, does that stop you getting a job?*

K: *Yeah, it does stop me like getting motivated, but even when I'm stoned I would go and look for a job. It all depends. I can't explain it really. I want to get a job really soon. It's doing my head in this lot. I've been doing this for too long now. I'm not stupid or nothing, I know what to do, it's just sometimes I can't be bothered [laughs] to be truthful with you. Like when you go and get a job and you hand in your CV you get a letter back saying 'Sorry, no, sorry, blah, blah' and that disheartens you and you can't be bothered after you get so many of them, do you know what I mean? Once you get so many 'No's' it's like, 'fuck you, I can't*

*be bothered to get a job' and just get stoned.*

As we saw in Chapter 2, the high-heavy users tended on the whole to be experiencing the greatest number of pre-existing social or personal problems, for example homelessness/ hostel dwelling, low educational achievement, unemployment, criminality and, for a small number, former Class A drug use. It was therefore often difficult to disentangle the negative impacts of cannabis use from these other problems. However, it appeared that difficult life situations and circumstances did impact negatively on cannabis use and cannabis use in turn impacted negatively on these life situations and circumstances. Thus the relationship appeared to be reciprocal or circular. While the lack of ability to make the transition to higher status roles might lead young people to high-heavy levels of cannabis use, high-heavy levels of cannabis use tended to impede their transitions to these higher status roles. This circularity is also demonstrated by Josh, Ian and Mickey, all of whom were high-heavy users.

Josh was 19 years old, unemployed and living in a hostel when we met. He had started smoking cannabis at 13. He left home at 15 'because of family troubles between me and my mother'. At 15 he was 'staying round some other like, doss houses'. At the time of the interview his cannabis consumption varied from 'a £10 bag a day, then there'll be other times when it's like a £20 bag for a couple of days and maybe a £10 bag. And then there'll be times when there's like quarters, everyday there's quarters. Those are the luxury days; that's what we call them'. When he was asked if he was spending a lot of money on cannabis he said:

*Yeah, I do, I do. Normally I'd sell a few things to [a pawnbroker], like what I've got, a TV or whatever, but it's on a 28-day buy-back so like the next week when I've got money I'll buy that back so you have an investment for next time.*

**Josh thought that:**

*When I get a job and everything I'm not going to be smoking 24/7 still. I'll probably have a nice little bulk here and every now and again I'll smoke a few zoots [joints] but, right now, cos there is nothing else to do, all there is to do is smoke, just smoke.*

**The trouble was that Josh spent so much of his time smoking cannabis and getting stoned that he did not spend very much time pursuing jobs or going for interviews. As he said:**

*Sometimes when I have to get up and do something and I have a blaze [smoke] on a zoot I just feel lazy and I think, 'I don't want to do that'. I'm just chung [stoned]. So I don't end up doing something sometimes. I procrastinate a lot, it's like that really. And sometimes I'd rather buy weed or skunk, yeah, than get something that I need, if you know what I mean, than buy something that I really need. I think, 'I can't do that, a lovely quarter will do'. [Laughs]*

**Josh did sometimes look for work but this was usually unsuccessful, so:**

*I give up for a couple of weeks at a time and I just smoke and then I think, 'ah, I have to go and do something', and I might go out and do something and then nothing will happen so I just go back and start blazing [smoking] again.*

**Ian, who was also a hostel resident, had a similar tale to tell. Ian was 20 years old and had been brought up living between his mother and**

father since he was four years old. He didn't get on with his stepfather and had consequently left his mother's and gone to live with his father when he was nearly 16. This coincided with when he began to smoke cannabis. His father's wife did not like him staying with them so he had to leave there as well. He stayed with a friend for a while and ended up in a hostel when he was 17 years old. He was unemployed at the time of the interview and, along with other friends from the hostel was smoking a 'ten [pounds] bag' everyday. Ian went on to say:

*Me and my friend were smoking an eighth [£20] a day. The only reason we smoke so much is because we have nothing else to do, and it's, once you get into that rut of not working it's hard to get out of it. So if you're not working, you just smoke and you don't want to take a job where they don't pay you much. But all the normal jobs, sort of like for our age, are erm, you need a driving licence. Job centre won't give you any money or any sort of grants or loans to get a driving licence so you're stuck in a vicious circle.*

For Ian, then, the solution to his unemployment is to get a driving licence but he cannot get financial help to pay for driving lessons and spends most of his money on cannabis rather than saving what money he has to pay for his own driving lessons.

Mickey also demonstrates how adverse life situations can contribute to high levels of cannabis use and how these in turn contribute to adverse life situations. He was 24 and unemployed when we met. Mickey came from a violent background and attributed his decision to start using cannabis at the age of ten to his father's violence. He said his decision to use cannabis was 'mostly down to background

stuff'. Since the age of 18 Mickey had been in and out of prison and had 'a couple' of convictions for possession of cannabis. Mickey was a high-heavy user and said he smoked about a half an ounce every two or three days. He and his brother had previously dealt in cannabis. When he was asked how he felt using cannabis had affected other aspects of his life, he said:

*It's a lot really because most of the time when you're stoned you can't motivate yourself to do stuff. So you're losing out on a lot of stuff. Jobs mostly, you ain't going to get a job when you're smoking because you're going to be too stoned and then you ain't going to be arsed to get up and do stuff, just get stoned.*

The light-heavy user group, on the other hand, consisted primarily of those at college (FE/HE) or on training schemes but approximately a fifth were unemployed. However, this group seemed on the whole to be on track to make transitions into higher status roles. For many in this group their cannabis use was something they regarded as just a 'phase' in their lives which they would leave behind when they made the transition into the labour market and career structures. For the majority of this group their cannabis use did not appear to impede their ability to make this transition.

While there is not a necessary correlation between the amounts of cannabis used and the experience of problems, it was those young people who were not in education, work or training who seemed, generally, to be most committed to cannabis use and most immersed in 'cannabis culture'. This echoes findings from other studies that have found that non-problematic drug users tend to be integrated

in key societal structures (Neale, 2006) while patterns of problematic drug use tend to develop amongst those who have experienced severe disruption in their lives (Buchanan, 2004) and/or amongst the most 'deprived and socially excluded communities' (SEU, 2004, p. 11).

Young people who are more securely situated seem able to use cannabis (and other drugs) recreationally to 'take time out' from normal role demands (Parker *et al.*, 1998). Those who are socially excluded, however, have very little else to 'take time out' from and their cannabis use therefore assumes a different meaning in their lives (cf. Collison, 1996; Melrose, 2000).

In particular we found that amongst some of the participants who lived in hostels, their cannabis use had increased (and in one or two cases started) since moving into the hostel environment. In this sense it might be argued that while bringing similarly situated and disadvantaged young people together in hostels is an adequate response to the problem of homelessness the unintended consequence is to amplify their deviant activities. This results from the fact that in such environments they were mixing with other young cannabis users and often had nothing to do all day except 'hang around'. They tended to form close associations with other hostel residents and would club together to buy cannabis and then smoke it collectively – usually in a park as they would be evicted from the hostel if they were caught using it on the premises.

We discussed this issue with the professionals who pointed out that while someone who was raging drunk would be given a warning but not evicted from the hostel, someone smoking a joint would be

evicted straight away.<sup>3</sup> They agreed that this was not a satisfactory state of affairs and in light of the reclassification of cannabis hostels might need to rethink their policies in terms of the treatment of young people who might be found in possession of cannabis on hostel premises. Professionals also agreed that because these young people would have to go to a park or similar venue to smoke their cannabis, this made them more vulnerable to being apprehended by the police and/or being preyed on by others.

It was those for whom cannabis use was the central focus of their lives who tended to talk about the negative effects of not having any cannabis, for example being 'moody' and 'ratty' and experiencing 'withdrawal' effects. This immersion in cannabis culture and compulsive or dependent use of cannabis in turn tends to reinforce, and possibly further entrench, the social exclusion these young people experience and may potentially lead them to develop more problematic types and patterns of drug use. However, when we come to look at data from follow-up interviews further on in this report, we will see that it is possible for these young people to change such patterns of behaviour when their social circumstances improve.

### Summary

- Our data have revealed a complex relationship between heavy cannabis use and youth transitions.
- Young people attributed a range of positive functions to their cannabis use. In particular cannabis functioned as a social lubricant and facilitated peer bonding and a sense of

belonging to the group. It helped to relieve stress and boredom and enabled relaxation. For some it enabled them to manage/control anger.

- A range of negative social and personal impacts were attributed to cannabis use. Some thought cannabis use had impacted negatively on their school performance, had led to difficulties in relationships with parents and/or with accommodation and in some cases had led to problems with the police.
  - Some believed cannabis impacted negatively on their health/mental health and led them to be lazy and/or demotivated.
- The high-heavy users, who on the whole tended to be experiencing a range of other problems, were unable to make transitions into employment, autonomous living and so on and this tended to impact negatively on their cannabis use. At the same time their cannabis use impacted negatively on their ability to make such transitions.
  - For light-heavy users regular cannabis use did not on the whole appear to impede their ability to make the transition to higher status roles.
  - Practitioners need to understand the benefits young people attribute to cannabis use as well as the difficulties they experience as a result of that use in order to work effectively with them.

# 5 Anomalies and complexities in young people's attitudes to and beliefs about cannabis use

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## Introduction

This chapter explores complexities and anomalies that emerged in relation to some young people's views and attitudes towards cannabis and their views on legislation. It demonstrates that some young people are ambivalent about their cannabis use and hold restrictive views about cannabis despite the fact that they are regular users themselves. It also shows that some are confused about the legal status of cannabis. The data in this chapter demonstrate that young people's attitudes towards and beliefs about cannabis are complex and sometimes contradictory. The views expressed by young people are compared and contrasted with those of the practitioners working with them on the 'front line'.

## Ambivalence about cannabis use

As we have seen, all participants tended to use cannabis on a daily basis, and approximately half defined themselves as heavy users. Many nevertheless expressed ambivalence about their cannabis use when they were asked if they wished they could stop or had never started using it. Such ambivalence is illustrated in the following extracts:

MM: *Do you ever wish you had never started smoking cannabis?*

T: *Yeah, all the time. All the time. Like I said, always having drugs around me from a young age, I never wanted that lifestyle for myself. And I let myself down.*

(Teri, 20 years, unemployed)

Replying to the same question, Martin (24 years, HE student) said:

M: *Erm, I would wish I could stop, definitely. I wouldn't say I wished I'd never started. I've had some good times, some very funny incidents and I've met some very interesting and genuinely nice people through smoking, so I wouldn't wish I'd never started but certainly I wish I could stop.*

MM: *And do you think you might still be using it in two years' time?*

M: *Maybe and maybe not. I would love to say definitely 'no' but I couldn't guarantee it. Two years ago I would have told you, 'Oh, definitely not, I won't be smoking in two years', but here I am still smoking. So I'll say no now but in the back of my mind I imagine I'll still have the odd sly one.*

In fact Martin was still smoking at the same level, 'perhaps using a little more', at the follow-up stage.

Generally speaking it was those who were most confident that they would stop use when they moved on to other things (particularly amongst the low-heavy using group) who expressed least ambivalence about having begun to smoke in the first place. This was because these participants appreciated the experiences they had enjoyed while using cannabis but were confident that this had been a phase in their lives that they would eventually leave behind and their cannabis use was not the central focus of their lives.

### Seeking help in relation to cannabis use

In spite of their ambivalence about their cannabis use, we found that young people expressed reluctance to seek help for their cannabis use from outside agencies. Many felt that they could stop using cannabis when and if they were ready to by using their own 'willpower' (although some indicated that they had no intention to stop). Their reluctance to use agencies to support them in ceasing to use cannabis resulted from different things. Most thought their cannabis use was not a problem and so would not consider seeking help for it. Others thought there was little point in seeking help as there was nothing that agencies could do to support them (i.e. 'they don't do patches like they do cigarettes'). Others thought that services to support drug users were primarily targeted at 'junkies' and 'crackheads'. These participants therefore thought that such services would be irrelevant to them. When participants were asked what services they were aware of if they did feel they needed to access support, many had heard of Talk to FRANK but were less familiar with services that might be available locally.

The reluctance of participants to access support for their cannabis use was discussed with professionals who agreed that young people tend not to see their cannabis use as a problem and therefore not something they would consider they need support for. Most practitioners were of the view that young cannabis users, particularly those who were vulnerable and insecurely situated, needed support with other areas of their lives in which they were encountering difficulties, for example accessing benefits or employment,

homelessness, a lack of supportive networks and so on. Practitioners suggested that if young people could be better supported with these difficulties, the difficulties their cannabis use might give rise to would also diminish.

Additionally, practitioners identified gaps in drug service provision for young cannabis users (particularly those who are over 18 years of age), acknowledging that drug services had historically been developed to respond to the needs of (male) opiate users. While those up to the age of 16 might be able to access services for their cannabis use (but rarely did so), those aged over 18 would tend to slip through the net of provision.

### Should cannabis be legalised?

Both young people and professionals were asked whether they thought cannabis should be legalised. Amongst the young people, almost three-quarters thought it should be. The older age group and those who were self-defined heavy users were more likely to suggest that it should be legalised. Those classified in the high-heavy user band were more likely than low-heavy or medium-heavy users to agree that it should be legalised. The low-heavy users were in fact most likely to say they were not sure if it should be legalised.

Amongst professionals, just over half thought it should be legalised while just under half thought it should not. This demonstrates that, on this issue, professional opinions are more divided than those of young people.

While a majority of young people thought it should be legalised, many suggested it should be legalised with certain restrictions. It was not infrequently suggested that it should

only be available to those over a particular age (usually older than that at which the young person had begun to use it themselves) or only for medicinal purposes. Joel, who had started smoking when he was 11, thought:

*I think truthfully cannabis should become legal but only in, I don't know actually. It's kind of hard cos I heard the other day on the news that so much per cent of kids in school are actually getting it in school, from 13–15 year olds are getting it in school. I think they should stop cannabis but prescribe it if they're allowed it to help people with arthritis.*

**John (18 years, unemployed) thought:**

*I think it should be legal for MS people. But for normal people if it was legal people would get more messed up than they already are from smoking it when it's illegal basically.*

**Some thought it should be regulated as in the Dutch model and/or that legalising it would make it safer. Charlie, for example, said:**

*I think that cannabis should be legalised because, I think they should legalise it and make a more safer form of it because obviously with the wrong people making it, it's not going to be as safe as it could be.*

**While Saul thought:**

*Well, if they were to legalise it, it's part of the fun being taken out of it. But I dunno, it would be alright, like in Amsterdam, I think that would be wicked, just to be able to sit in a café, sit here and smoke. Smoking cigarettes is legal, drinking is legal, why shouldn't cannabis be?*

**Those who did not think it should be legalised gave a variety of reasons for this. Some**

thought it would encourage more people to use it or that it would 'get out of hand' if it were legalised while Lewis (18 years, unemployed) thought 'the world would be chaos if you was to legalise it'.

These views demonstrate that some participants still hold quite restrictive attitudes towards cannabis (Shiner and Newburn, 1999; Pearson and Shiner, 2002) while simultaneously regarding it as a relatively 'harmless' drug and using it more or less on a daily basis.

A couple of young people mentioned that if it were to be legalised it would be taxed and thus would be more expensive than it already is, while others thought it would be 'boring' if it were legalised. Sophie thought if it were legalised the strength would be reduced and this would make it 'boring' while Kim thought:

K: *I don't think it should be legalised.*

MM: *You think just leave it as it is?*

K: *Yeah, cos if it's legalised, people are going to get bored of that. They want drugs that the law don't agree with cos it makes it more fun and exciting, so people will move to other things.*

### **Do young people understand the legal status of cannabis?**

Professionals were asked whether they thought young people understood the legal position and the penalties for possessing and/or supplying cannabis. Most thought that young people were very confused and, indeed, some of the young people we spoke to (but only a small minority) did seem to think that it was legal to smoke in the privacy of the home environment.

Professionals believed that young people's confusion was partly due to inconsistent enforcement practices in different areas (see May *et al.*, 2002) and/or contradictory media messages.

For many participants the legal status was regarded as an irrelevance as they would continue to use it whatever its legal status or classification. Most did not seem to concern themselves with the potential risk of being caught in possession or supplying cannabis to friends; it was not something they thought about and considered the police had much more important things to worry about than 'a few kids smoking puff'. This tended to be the case regardless of the young person's social situation.

### **Anomalous attitudes and beliefs about cannabis**

Complex attitudes towards cannabis emerged when young people were asked if they had any advice for other young people who might be thinking of starting to use it. Some made it clear that they did not necessarily think it was a 'good thing' for other young people to do, while at the same time extolling the virtues of using it themselves.

Further anomalies emerged among a number of young people's attitudes to cannabis recorded in the questionnaires. Gillian (20 years, unemployed), for example, thought cannabis should be legalised but also agreed that smoking it every day was likely to lead to mental health problems and that it was easy to become addicted to cannabis. Mickey (24 years, unemployed) had been using cannabis since he was ten and had been introduced to it by an older sibling. He had split up from the

mother of his baby and attributed this to his drug use 'and the arguing we was doing all the time'. He thought the most negative aspects of using cannabis were 'addiction, withdrawal symptoms when you aint got anything. And cos you're going out to commit crimes to go out and get it'. He thought cannabis should be legalised but also agreed that smoking it every day was likely to lead to mental health problems, that using it regularly was likely to lead you on to harder drugs and that it was easy to become addicted to cannabis.

Troy (24 years, unemployed) also thought cannabis should be legalised while at the same time agreeing that smoking it every day was likely to lead to mental health problems and that it is easy to become addicted to cannabis. Similar views were expressed by a number of other young people.

This raises questions about why young people might think that cannabis should be legalised if it is likely to lead to mental health problems, that it might lead to harder drugs and/or that it is addictive. These complex views may suggest that young people are misinformed and/or confused as to the actual impact and potential harms of regular cannabis use. On the other hand these views may suggest that these young people feel impervious to these potential harms and/or that they may have a tendency to ignore or minimise the risks that might be associated with cannabis use.

### **Professionals' and young people's attitudes to cannabis**

In Table 2 we compare professionals' attitudes and beliefs about cannabis with those expressed by the young people and we see that those

## The impact of heavy cannabis use on young people

of the professionals are in many ways no less complex than those expressed by the young people. In one questionnaire professionals were asked exactly the same questions as those asked of young people in the questionnaires administered to them. The responses of each group to these questions are summarised in Table 2 and expressed as percentages for ease of comparison across the groups.

The data below show that, when compared with the professionals' views, a greater proportion of young people believe that smoking cannabis every day is likely to lead to mental health problems, that smoking cannabis regularly is likely to lead to harder drugs, that it is easy to become addicted to cannabis and that cannabis is less harmful than alcohol. On

the other hand, similar proportions of young people and professionals believe that cannabis is more harmful than cigarettes. Overall, however, professionals appear to see cannabis as less harmful than the young people do. This may well be because, as a result of their age, culture and class, professionals have direct or indirect experience of relatively harmless cannabis use. The young people in this study, by comparison, may have absorbed media scares around skunk and schizophrenia. These young people are using high volumes of cannabis and, as we have seen, most of them are using skunk which is allegedly more potent than forms that were previously available. This may mean that young people see the potential problems of regular cannabis use more clearly than the professionals

**Table 2 Comparison of young people's and professionals' views about cannabis**

Statement	Agree (%)	Disagree (%)	Don't know (%)
Smoking cannabis every day is likely to lead to mental health problems			
Professionals ( <i>n</i> = 30)	29	54	18
Young people ( <i>n</i> = 97)	61	20	18
Smoking cannabis regularly is likely to lead to harder drugs			
Professionals ( <i>n</i> = 30)	10	77	13
Young people ( <i>n</i> = 97)	31	61	8
It is easy to become addicted to cannabis			
Professionals ( <i>n</i> = 30)	30	57	13
Young people ( <i>n</i> = 97)	55	35	10
Smoking cannabis is less harmful than drinking alcohol			
Professionals ( <i>n</i> = 30)	40	30	30
Young people ( <i>n</i> = 97)	69	20	11
Smoking cannabis is more harmful than smoking cigarettes			
Professionals ( <i>n</i> = 30)	30	50	20
Young people ( <i>n</i> = 97)	34	52	14

working with them and raises a key point about whether professionals might be out of touch with the potential dangers of excessive cannabis use.

### Summary

- A number of young people express ambivalence about their cannabis use.
- Young people are reluctant to seek help in relation to their cannabis use, believing that if and when they should decide to stop using it they would do so as a result of their own willpower.
- Practitioners noted a gap in service provision for those aged over 18 who may want or need support in relation to cannabis use.
- A majority of participants thought cannabis should be legalised but low-heavy users were least sure about whether it should be legalised or not.
- Some participants who thought it should be legalised nevertheless seemed to hold restrictive views about legalising it, arguing, for example, that it should only be legal for people over a certain age or for people with particular medical conditions. Many considered its legal status an irrelevance.
- Practitioners considered that young people were very confused about the legal status of cannabis and attributed this to inconsistent media messages and/or variations in enforcement practices.
- Young people's attitudes towards, and beliefs about, cannabis are complex and sometimes contradictory.
- Professionals may underestimate the potential harms associated with excessive cannabis use.

## 6 Changes in cannabis use and social situations over time

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### Introduction

This chapter examines changes in young people's cannabis use and social situations in the time between the first and second interviews. It presents data to show that when young people's social situations change or improve their cannabis use tends to decrease, while deterioration in social/personal circumstances may presage increased cannabis use and/or a move into more problematic patterns or types of drug use.

### The follow-up sample

Fifty-two young people took part in follow-up interviews approximately four months after they had been interviewed for the first time. The contours of this sample broadly reflect those of the initial sample, that is, three-quarters (39) were male, almost two-thirds (33) were in the 16–18 age group and just over three-quarters (43) were white. In this group just over a third (20) were on basic training schemes or unemployed; a quarter (13) were living in hostels; approximately a fifth (11) were FE students; just under a tenth (4) had completed HE studies and the same proportion (4) were young people who had moved on from hostel accommodation in between the first and second interview.

Just over half (18) of our light-heavy users, almost two-thirds (18) of our medium-heavy users and just under half (11) of our high-heavy users were included in the follow-up sample.<sup>1</sup>

### Changes in cannabis use and social situations over time

The data from our follow-up interviews strongly suggest that when young people's social circumstances change for the better and/or they mature and/or their reference group changes their cannabis use tends to decrease.

In our 52 follow-up interviews we found that by this stage just over half (28) were using cannabis at about the same level as they had previously. On the other hand, a quarter (13) had reduced their use and eight participants said they had stopped using. One said they sometimes used more and sometimes used less while just two had increased their use. Of the eight participants who had stopped using cannabis by the time of the second interview, five were classified as light-heavy users at the first interview, two were classified as medium-heavy and one was classified as a high-heavy user. All those who had stopped using by the time of the second interview were male. One was a student in further education, three had completed higher education and four were on basic training programmes or unemployed. Five of those who had stopped were in the 16–18 age group.

Of the 13 participants who had reduced their use by the time of the second interview, the majority (8) were male and ten were in the 16–18 age group. Amongst this group, seven participants were on basic training programmes, four were in further education, one was a former hostel resident and one was working. At the time of the first interview, six of this group were classified in our light-heavy user band, five were in our medium-heavy user band and two were in our high-heavy user band.

Those who had stopped or reduced their use had mainly done so without the help of outside agencies and while some had found it difficult to reduce or stop others had not. When she was re-interviewed, Sophie was still attending her training course and living independently in rented accommodation. Her relationship with her mother had improved and she had reduced her cannabis consumption. She had previously been using about 14 grams per week. She said:

S: *Like everything with my mum and that, I'm talking with my mum fine now. I'm still smoking.*

PT: *But your relationship with your mum has improved?*

S: *Yeah. Just cos like I've stopped smoking loads and loads but I still smoke. I only smoke half the amount that I done a couple of months ago. It's too much money for one and with that money that I didn't spend on skunk before I got more stuff for my flat.*

PT: *So was it easy or hard to cut down?*

S: *Ermm, I'm not really sure. It was quite hard I suppose but once I'd spent the money on other things and I'd got other things I didn't really think about it. So I just think it was just like, don't know. I think my pride took over. Like my house being nice.*

Sophie's case demonstrates that a change in her financial priorities led to a reduction in her cannabis use but it is difficult to say whether the improved relationships with her family resulted from a reduction in her cannabis use or vice versa.

Craig had also reduced his consumption. Previously he had been smoking six or seven joints a day (four of which he would smoke himself). When he was asked how much he was using now, he said:

*I don't actually really do that any more. I don't buy it, I don't smoke it any more really. I've stopped that. It's not getting me anywhere, it gets me in moods and makes me like really tired and makes me a different aggressive person. So I've stopped it and I just thought there's no point in wasting money and wasting my life really. I've stopped that.*

Craig had left his training scheme and was working and, because he was working, 'I haven't got time to do it really'. When he was asked whether he had found it difficult to stop, he said:

*Yeah, with the cigarettes I used some patches for a couple of weeks and then for like the cannabis I just thought of different things and ways I could still get a buzz but not doing that. So like football, I really like playing football and scoring goals and things like that. Kept my mind off the whole smoking and doing me good at the same time.*

Craig demonstrates that a positive change (from training course to employment) and a concomitant change in peer and reference groups can positively influence a reduction in cannabis use.

Four HE students were re-interviewed and had completed their degrees. Three had returned home to live with parents. Although not all of them were working, they had drastically reduced or practically stopped their cannabis use in the intervening period (as most

had announced an intention to do at the first interview). For this group, cannabis use seemed to be something associated with university life and the return to the parental home tended to prompt a change in their cannabis use. This group on the whole regarded cannabis use as a youthful indulgence which they 'grew out of' as they graduated into the 'adult' world of work and careers. As Oscar said, 'I see it [smoking cannabis] as just something involved with Uni'. When Mark was asked what meaning smoking cannabis had for him now, he said, 'It has no meaning any more. It's just boring to be honest with you. I'm now more motivated and hate being lazy'. On the other hand, Martin had been awarded a first-class degree and moved into postgraduate study. He continued to smoke at the level he had previously 'or perhaps a bit more'.

As Sophie and Craig (above) demonstrate, however, young people in less socially secure situations tended to grow out of, reduce or stop their cannabis use as their priorities and circumstances changed and/or they matured to more adult roles. Karen provides further evidence of this.

Karen had moved out of the hostel in which she lived and had been housed by the local authority in her own flat by the time of the second interview. She was concerned to decorate her flat and create a comfortable living environment for herself and her daughter with whom she had re-established contact and who she hoped might reside with her again (she was currently residing with the father). Since she had been rehoused the young women tended not to see the friends with whom she had lived in the hostel. These friends were also the group with whom she smoked cannabis. Because

she now had her flat to maintain she could no longer afford to buy cannabis and therefore tended to smoke it only if a friend brought some round to share with her.

While it is difficult to know whether these positive changes in cannabis use would be sustained over time it did appear that, for those in the least secure situations particularly, changed patterns of use were the result of positive changes in the young person's social/personal circumstances and/or their environment and/or maturation, with concomitant changes in peer associations and reference groups. This therefore raises questions about how we accelerate processes of maturation so that young people might grow out of their use sooner rather than later.

For one or two participants who said they had stopped using cannabis at the second interview, this was because they had progressed to more problematic patterns and types of drug use and/or were in transition to other types of drug use. Will (17 years), for example, said he had stopped using cannabis but was instead smoking heroin. At the time of the first interview, Will was unemployed and living in a hostel. At this time he said he was spending about £40 per week on skunk. At the second interview, he was working casually as a labourer but still living in the hostel. When asked what other changes had occurred in the meantime, he said:

W: *Split up with my girlfriend. Picked up some bad habits as well. Heroin, I started smoking that.*

MM: *You started smoking heroin?*

W: *Yeah, that's been for the last three months.*

- MM: *Why did you start using heroin?*
- W: *Dunno, sort of felt like someone else was taking over me. But it's me, but it just felt like someone else was taking over and I couldn't say no.*
- MM: *Are you using it every day?*
- W: *On a regular basis. Maybe four times a week.*
- MM: *So would you say you've moved away from cannabis towards heroin? If you've got money would you prefer to buy heroin rather than cannabis?*
- W: *Yeah, that's the way it's going.*
- MM: *So do you prefer the effect of heroin to the effect of skunk?*
- W: *Yeah, yeah I do. Heroin's much more of a mellow out. Much, much more. Just go into a different world.*
- MM: *And do you think that because you were smoking skunk, did it make it easier to start smoking heroin or what do you think?*
- W: *I don't know, I've smoked that [skunk] for ages, it's boring. I know that's no excuse to move on to heroin, I know that.*
- MM: *What was boring about it?*
- W: *Just the buzz of the skunk. It does the same thing. So does brown, so does heroin, but that's a new drug.*

Similarly, Kim said she 'sometimes smoked more, sometimes less' than when we had first met. She was still unemployed, living independently and thinking of starting a college

course. However, in the intervening period she had been in trouble with the police for 'breach of peace and assault on a police officer' while she was drunk and had also tried crack. She said she had tried crack because she 'just wanted to know what it was like, what effects, why people get so addicted to it'. When she was asked if she thought she might use it again in the future she said:

*I know I'll be tempted to do it again but I've just got to keep my head screwed on. I've got a lot of willpower. I see a lot of people on that and it scares me.*

As well as participants who had reduced, stopped or switched to other drugs, a small number had increased their cannabis use between the first and second interviews. Charlie, for example, was studying for a BTEC National Diploma at the first meeting. He had dropped out of college and been in trouble with the police in the intervening period and was on a six-month supervision order at the time of the second meeting. His mother and stepfather had reported him to the police for possession but he was still living at home with them. At the first interview he had been spending between £50 and £100 per week (and was therefore classified as a medium-heavy user) but was now spending about £20 per day. He said his use tended to go up and down: 'I go up and I go down all the time'. When he was asked why he thought that was, he said:

*I don't know. Different situations. Sometimes you just don't need to. I mean the happier I am the less I smoke really.*

Greg's use had also increased since the first interview. In the intervening period he had left

his parental home to move in with a girlfriend who had a child. He had finished his training scheme but as yet had not been able to secure formal employment and worked casually when he could, doing 'a little bit of gardening work on the side' for which he was paid £40 a day. At the first interview he said he had been spending 'something like £130, £140 a week' (therefore a high-heavy user) whereas at the second interview he was spending 'something like £270'.

Both Greg and Charlie thought that rather than fitting cannabis into their lives, their lives tended to 'fit around cannabis'. By the time of the repeat interview, both these young men would have been classified in the high-heavy using band with Greg moving further up the spending/consumption scale in that band.

The data generated from second interviews reveal a number of things. Amongst them:

- Young people can reduce or stop using cannabis, even when they have been using on a daily basis, when their circumstances improve and priorities change. Usually they do this without the assistance of outside intervention.
- Their priorities change as a result of changing circumstances, for example getting a job, deciding they want to do something else with their lives, or having other interests (such as their accommodation to maintain).
- Some young people 'grow out' of cannabis use and tend to associate it with youthful indulgence that they leave behind as they make the transition to more adult-orientated roles. This seems

to be easier for those who are more securely situated than for those who are insecurely situated, disadvantaged and/or vulnerable.

- Where young people do not make the transition to higher status roles (e.g. work, independent living, forming relationships) they may be likely to develop more problematic patterns and levels of drug use and/or become further entrenched in cannabis use.

That transitions to higher status roles were important in terms of reducing or stopping cannabis use was further evidenced in young people's responses when they were asked whether they thought they might still be using cannabis in two or five years' time or whether they ever wished that they could stop using it. Many thought they would stop at some imaginary future point and often these future points were highly gendered. Girls, for example, tended to say they thought they would stop if they got pregnant or had a baby. Boys, on the other hand, thought they would stop when they had a good job and/or had 'settled down' with a family of their own.

When Josh (19 years, ex-hostel resident) was asked if he ever wished he could stop using cannabis, he said:

*Erm, I could stop using it, but not at the moment cos there's nothing else to do really, so I wouldn't think about stopping. But, as I said, if I had a job, a full-time job or something, then, I wouldn't stop then but I wouldn't smoke really heavy or nothing. Just after work I might have a zoot and go to sleep.*

For some of those in the most socially insecure positions, the possibility of achieving these higher status roles often seemed objectively remote, suggesting that their patterns of drug use might become further entrenched in the meantime and thus harder to break (Melrose, 2000). This would then further impede their ability to make the transition to higher status roles. While many thought they might stop using cannabis at some point in the future, some of those who seemed to be most committed to ‘cannabis culture’ (and amongst the high-heavy using band) had no intention of stopping. One young man told us he would still be smoking cannabis ‘when I’m a granddad with my pipe and slippers’.

### Summary

- Positive changes to the young person’s social situation and/or maturation often presaged a decrease or complete cessation in cannabis use – even amongst some of those who were most socially disadvantaged.
- Where young people had stopped or reduced their cannabis use this was usually without the intervention of outside agencies.
- A small number of participants had stopped or reduced their cannabis use but had progressed to more problematic types of drug use (Class A drugs) by the time of the second interview.
- A small number had increased their cannabis use by the time of the second interview but for the majority their cannabis use had remained at about the same level.
- Many saw themselves stopping using cannabis in the future when they had ‘settled down’ but some, especially amongst the medium-heavy and high-heavy using groups, said they had no intention of stopping.

# 7 Summary and recommendations

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## Summary

Most of the young people who took part in this study expressed a preference for skunk and skunk appeared to be widely available in the areas where this research was conducted. Some young people bought cannabis on a daily basis. Where cannabis was purchased in this manner it was usually bought and consumed collectively in friendship groups on the same day. The skunk tended to be available in £10 and £20 'bags' and young people could calculate how many joints they could expect from different levels of expenditure. The most common method of consuming cannabis was through joints (the cannabis was mixed with tobacco) although a small number of participants also smoked pipes and bongs (home-made water pipes) and some mentioned smoking blunts (a specially purchased, flavoured cigar paper) on special occasions.

There were difficulties in establishing from young people the amount they might spend per week on cannabis or how much they thought might make them a heavy user. A wide range of weekly expenditure was cited by participants.

Those in the high-heavy using band appeared to be experiencing the greatest degree of social dislocation and social disadvantage although many of those in the medium-heavy user band shared some of the problems of those in the high-heavy user band (low educational achievement, unemployment and/or homelessness or hostel dwelling). However, it is important not to overlook the fact that inasmuch as heavy cannabis use might exacerbate the young person's difficulties, it was often closely associated with pre-existing problems in the areas of family relationships, education and

crime and disorder. This was particularly true of the girls in our study who tended to be using more heavily than their male peers.

There is no consensus amongst regular users about what might constitute heavy use, and how participants evaluate their use depends on the particular reference group with which they compare their own consumption. Approximately a third of those who were classified as light-heavy users considered themselves to be heavy users while two-thirds of the medium-heavy using group thought they were heavy users, as did just under two-thirds of those in the high-heavy using group.

The idea of heavy use emerges from this study as situational, relational and normative depending upon the comparators against which participants measure their own use. Participants sometimes struggled to define quantitatively what constituted heavy use and tended instead to define heavy use in terms of its social and personal impacts. Across the light-heavy, medium-heavy and high-heavy using bands there was a tendency for participants to contrast their cannabis use with Class A drug use, enabling them to construct their own drug use as relatively unproblematic or 'harmless'.

For those who are most socially insecure, the transition to regular cannabis use often seemed to be underpinned by other, more traumatic, experiences, such as the loss of a parent through separation/divorce and/or being uprooted and moved to a new area. In more extreme cases, the death of a close relative or friend was a factor accompanying the onset of cannabis use. The data also demonstrate, however, that when their circumstances change for the better, with a consequent change in priorities, opportunities and/or peer and reference groups, young

people are able to stop or reduce their cannabis use, usually without outside intervention.

In our high-heavy using band a great deal of cannabis use appears to be compulsive and/or unstructured and the relationship between transitions to higher status roles and cannabis use appears to be cyclical. For these participants in particular, heavy or regular cannabis use appears to have contributed to, or been associated with, problems of transition; cannabis use sometimes preceded educational difficulties, truancy and school exclusion and/or leaving, or being 'thrown out' of, home without a place to go. This sometimes led to these young people living in hostels where, in almost all cases, their cannabis use escalated. This in turn impeded their ability to make transitions into the labour market and to achieve autonomous living.

Inasmuch as cannabis use was a factor preventing a young person making a successful life transition, our data suggest that in some cases heavy or regular cannabis use is just as likely to be *symptomatic* of problematic transitions as it is to be their cause. Where young people do not have the capacity or the opportunity to make the transition to higher status, 'adult' roles, they may become 'stuck' in peer groups where cannabis use becomes the central focus, giving meaning and purpose to their lives. This then prevents them from making transitions to these higher status roles. It is young people caught in this spiral who appear to be most at risk of developing more problematic levels and patterns of drug use.

The light-heavy user band, on the other hand, is primarily composed of students from HE and FE whose cannabis use appears on the whole to be more controlled or structured and does not appear to impede their transitions

within the education system, to the labour market or to autonomous living.

A majority of our participants had started to use cannabis when they were relatively young. Many spoke about smoking in school and/or smoking on the way to school in the morning so that they were 'stoned' when they got to school, and some acknowledged that their cannabis use had impacted negatively on their school performance. Nevertheless, it seemed that teachers were frequently not picking up on the fact that these young people were sometimes 'stoned' while in the classroom. Our data also suggest there is a discrepancy between the difficulties that young people might attribute to their cannabis use and those the professionals working with them perceive. Professionals, for example, tended to think that the consequences of being caught with cannabis were potentially worse than the effect of the drug itself while some young people acknowledged that their use had impacted negatively on their educational performance and/or had led to difficulties in relationships with parents.

Our data also show that young people tend to attribute a range of positive functions to their cannabis use but a small number were unable to say what the benefits of using it were. This suggests that for this particular subgroup cannabis use may be more habitual than a component of a pleasure-seeking lifestyle. It might also suggest that cannabis use is sometimes instrumental, enabling access to drug-using groups in a situation where peer group membership is problematic. Even in cases where participants reported positive effects from cannabis use, membership of their drug-using group often appeared very important to them – particularly amongst those who were

most immersed in cannabis culture.

Some young people feel ambivalent about their cannabis use (particularly about the idea that they may be heavy users) and many expressed complex attitudes towards and beliefs about cannabis. Despite their ambivalence, however, many did not necessarily intend to give up using it in the immediate or near future. Most young people in this study thought that if they did want to stop using cannabis they could do so through their own 'willpower' and would not need (or necessarily want) interventions from outside agencies. Many did think they would probably stop smoking cannabis at some time in the future although a few (particularly amongst the medium-heavy and high-heavy user bands) felt they would never stop using it.

Some participants are uncertain about the drug's legal status and don't fully understand the penalties for possession and/or supply but are not particularly bothered by these in any event. There seems to be a great deal of misinformation passed by word of mouth among young people and this is not helped by the confusing messages given by dissimilar enforcement practices by different police forces.

There remains a great deal of confusion around the potentially harmful effects of regular cannabis use and an ongoing debate about its link to mental health problems, particularly schizophrenia. It is imperative therefore that we find out more about the potential harms associated with different types of cannabis use. For this we need more research into young people's cannabis use and these studies might usefully be supplemented by studies of adults who have used cannabis for a number of years and/or retrospective studies of regular users who have ceased their use. This would provide

a more rounded picture of the potential harms of long-term cannabis use.

Some of the findings from this study have important implications for policy and practice and these are explored below.

### **The policy and practice implications**

Our study indicates that there are some young people who regularly use cannabis who nonetheless manage the transition from school to work, college or university with few, if any, cannabis-induced difficulties. For example, a number of young people were studying in further or higher education with little or no apparent difficulty. These young people tended to be most securely situated with few if any pre-existing problems (in terms of family relationships, educational achievement, housing situation and so on). They also tended to be at the light-heavy end of the spectrum of regular cannabis use.

For others, on the other hand, these transitions are problematic and cannabis is implicated, as much a symptom as a cause. Indeed, we argue that the success or otherwise of these transitions can determine the intensity and impact of drug use while the intensity and impact of cannabis use can also determine the success or otherwise of these transitions.

This being the case it would suggest a dual strategy which is both opportunity and problem oriented. That is, this strategy should focus on supporting vulnerable young people through their transitions by providing them with opportunities to make transitions into higher status adult roles while simultaneously focusing on the potential problems their cannabis use might present by preventing them from making

such transitions. Our evidence suggests a need for a 'joined-up' 'young person-centred approach' which offers a holistic response, which is gender sensitive and which is able to locate the young person's cannabis use in its social, educational and familial context. Service responses should then be calibrated according to the level of use and the young person's social and personal context.

Most importantly service responses need to exercise caution to ensure that they do not render already vulnerable young people more at risk than they already are, for example through exclusion from school or eviction from a hostel. In light of the reclassification of cannabis, there may be a case for revisiting Section 8 of the Misuse of Drugs Act 1971 so that hostels, in particular, would be able to introduce measures short of eviction (such as confiscation and/or formal warnings) for those residents found to be in possession of, or using, cannabis on the premises to comply with the law. Similarly, schools should comply with DfES guidance (2004) and only exclude pupils for possession of cannabis where the safety of other pupils is put in jeopardy. These policies should be developed in consultation with the local police and/or drug action teams in any given area in an attempt to minimise the negative impacts that result from exclusion from school and/or eviction from hostel premises. Rather than being excluded from school or evicted from hostels, young people should be referred to services where their other talents and interests can be nurtured and developed.

Furthermore, cannabis is policed in different ways in different places and this undoubtedly adds to confusion amongst young people and practitioners about its legality or illegality. It

would therefore be appropriate for the police to develop a more homogeneous response so that wherever they are, if a young person is found to be in possession of cannabis, they can expect the same outcome.

On the face of it, the new Children's Trusts, or their equivalent structures, offer an ideal vehicle for the provision of such a holistic service while the 'lead professionals' proposed in the *Youth Matters Green Paper* (DfES, 2005) would appear to be tailor-made to provide what is required. These lead professionals would be responsible for co-ordinating suitable provision for the young person depending on the circumstances of their lives and the nature and context of their drug use. The DfES Green Paper (2005, p. 1) describes a lead professional as someone who:

*Acts as a single point of contact that the child or young person and their family can trust, and who is able to support them in making choices and navigating their way through the system.*

*[The lead professional] ensures that they get appropriate interventions when needed, which are well planned, regularly reviewed and effectively delivered. [Moreover, they] reduce overlap and inconsistency from other practitioners.*

The development of the lead professional role should ensure the more effective delivery of integrated, joined-up services and provide a better experience for young people on the ground. Such service delivery might then help to reduce their drug use, prevent the development of more problematic patterns and levels of drug use and accelerate their maturation to new roles that would provide opportunities to grow out of cannabis use

sooner than they might if left to their own devices.

These policy and practice developments are in their early stages but, given the extent of cannabis use amongst young people, the debate about how this new workforce is to be linked together and trained should include a consideration of how practitioners in careers services, residential care, foyers, health care, the youth and social services and workers in specialist drugs agencies might target young people at these key stages of transition between school, home and college to create attractive and rewarding bridges.

One reason that transitions become problematic for young people is because they do not wish to make them. Practitioners working with young people need to take account of the pros and cons of the transitions in which the young people may be involved and whether they are perceived by the young person in positive or negative terms. For example, the transition from school to low-paid, unrewarding work or a training scheme with no feasible prospects of employment at the end of it might well be seen by a young person as a 'step down', whereas the transition to university, and the subsequent career opportunities it affords, might be considered a 'step up'.

It is therefore essential for those young people who fail to make the transition to higher status adult roles, or who become 'stuck' because of limited opportunity, that professionals devise interventions designed to improve their life chances, and part of this could involve a focus upon expanding the repertoire of social roles available to them, using this work

to foster and accelerate their maturation. The data presented in this report demonstrate that as young people mature into new social and occupational roles, cannabis use becomes less important to them and many will simply grow out of cannabis use if they have alternatives that engage their interest.

Where there is ambivalence about cannabis use and/or contradictory beliefs, this could create opportunities to deliver preventative messages. It is important that any such messages do not exaggerate or distort the potential negative impacts of cannabis use as young people are likely to discount the entire message if they know part of it is untrue (Bennetto, 2000). In delivering preventative messages it is also clear from our data that practitioners need to understand more fully the benefits that young people believe they derive from using cannabis. While acknowledging these, practitioners also need to listen carefully to what young people say about the difficulties their cannabis use creates for them. Our data suggest something of a gulf in understanding between older professionals and young users in relation to both the potential harms and the benefits of regular cannabis use. If professionals are able to ascertain that young people are not using 'hard' (Class A) drugs, they may not take a young person's cannabis use seriously. This study, however, has demonstrated that in particular contexts heavy cannabis use can be damaging but that young people may be unaware of this. This suggests therefore that professionals need to probe young people's cannabis use in more depth in order to establish what may or may not be damaging about it.

# Notes

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## Chapter 1

- 1 Very early on in the research process a decision was made to undertake one-to-one interviews rather than conduct focus groups. An explanation of the reasons for this can be found in the Appendix.
- 2 The advantages and disadvantages of using agencies to contact participants are considered in the Appendix.
- 3 Six participants were accessed from this agency of whom four were on treatment programmes (methadone) for heroin and/or crack use, one was referred as a result of alcohol use and one had self-referred as a result of cannabis use.
- 4 Only 25 of the 28 young women returned questionnaires, therefore the statistical data presented refer to 25 young women.

## Chapter 2

- 1 In both areas skunk appeared to be more widely available than cannabis resin and some young people described a kind of 'pizza delivery' system whereby they would phone their order and the skunk would be delivered at a prearranged time and place. It was clear that cannabis, especially skunk, was widely available and the young people did not appear to have any difficulty acquiring it (see Measham, 2004). This indicates something about cannabis supply and market conditions in the areas in which this study was conducted. During the fieldwork, the local press reported the police discovering 'cannabis factories' (one in each area).

- 2 It may be that because it is cheaper this is what they tend to buy when they start using but resin then acts as a 'gateway' to skunk.
- 3 The names of all the young people have been changed so as to protect their identities.
- 4 In the study discussed here, most participants were using cigarettes before cannabis.
- 5 One young man said he consumed 98 grams per week but as this seemed to be much higher than amounts cited by other participants we have omitted it from these calculations.
- 6 IDMU conducts annual surveys using questionnaires distributed at festivals throughout the UK and on the internet.
- 7 The data for this section are somewhat limited as young people were not asked directly about how they obtained the money for their cannabis; rather some volunteered information about this in the course of an interview.
- 8 There is, however, some debate about how many criteria a person should fulfil in order to be classed as 'dependent' (Swift *et al.*, 1998).

## Chapter 3

- 1 Gillian claimed to have started smoking cigarettes when she was five years old.
- 2 Using classifications developed in an earlier study, we have described these as 'acceptance seekers' (wanting to do it because all their friends are) and 'thrill seekers' (wanting to do it because they were curious and/or wanted 'a buzz') (see Melrose, 2000).

- 3 Dale had been through a painful separation from his partner and their children had been removed and placed for adoption against his wishes.

### Chapter 4

- 1 In this area exclusions for drug- and alcohol-related issues (including cigarettes) represent 6.4 per cent of all fixed-term exclusions and 4 per cent of permanent exclusions for 2004/05.
- 2 Under the provisions of the Crime and Disorder Act 1998 the police have to arrest people of 16 years or younger if they are in possession of cannabis whereas those who are over 16 may be issued with a caution or warning.

- 3 Under the Misuse of Drugs Act 1971 it is an offence for the management of establishments such as hostels to allow the premises to be used for the smoking of cannabis or opium and the preparation of opium.

### Chapter 6

- 1 In total 86 participants were classified in these bands as the remainder did not provide data that were precise enough on which to base the classification.

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# Appendix

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## Project methodology

### Introduction

This document provides a more detailed account of how the research team proceeded to conduct the study of the impact of heavy cannabis use on young people and reflects on some of the methodological and ethical issues the project presented. A critical review of the potential limitations of the study can be found in the report.

This account of the methodology employed begins by describing the research aims, research design and research methodology. It then goes on to explain how participants for the study were accessed and reflects on the advantages, as well as the potential limitations, of using agencies to access participants. Following this we consider some of the ethical issues the project confronted. These include a consideration of what the concept of ‘informed consent’ might entail, the question of confidentiality, issues raised by offering financial incentives to participate in research and the potential impact of taking part in the research process. Finally the discussion reflects on the challenges posed by studies that rely on self-report data. It suggests that by comparing participants’ accounts with each other and, where possible, triangulating these with data available from other sources, it is possible to confirm participants’ accounts and thus to have confidence in the validity of the data generated.

### Research aims

The primary goal of this project was to garner information from young people (aged 16–25)

who defined themselves as heavy cannabis users<sup>1</sup> about what they considered ‘heavy’ use to be, how much they used themselves and how they considered their cannabis use impacted on other areas of their social and personal lives. The primary goal of the research was thus to understand, from the point of view of young, regular cannabis users, what using cannabis meant to them and what they regarded as positive and/or negative about using it regularly.

A supplementary element of the research undertook data collection from a total of 30 practitioners, from a variety of agencies,<sup>2</sup> who had first-hand experience in a professional capacity of working with young people involved in cannabis use. The aim of this element of the research was to examine the extent to which our participants’ accounts of their cannabis use were consistent with professionals’ experience of young people’s cannabis use and thus to enable us to triangulate our findings from research with young people with what the professionals know.

### Research design

The research was primarily qualitative in approach. A limited longitudinal element was built into it to enable the project to capture any changes in the young person’s social/personal situation and/or their cannabis use in the period between first meeting them and the re-encounter some four to six months after the initial meeting. In relation to young people’s drug use, it has been argued that longitudinal research is preferable to one-off ‘snapshot’

approaches (Parker *et al.*, 1998) because their drug use tends to be 'fluid' and fluctuates over time (Measham *et al.*, 1998; Melrose, 2000). A longitudinal approach would accordingly enable us to locate and describe patterns of change over time (Ruspini, 2000) (albeit a limited length of time) in relation to the young person's cannabis use and/or their social situation.

The research with young people and professionals was conducted across two geographical areas (both shire counties) whose locations remain anonymous in the interests of protecting the confidentiality and identities of our participants.

Stigmatised groups generally, and drug users in particular, present a variety of methodological challenges to those who wish to understand more about their lives (Atkinson and Flint, 2001). While the study remained primarily qualitative in approach, a pragmatic decision (Onwuegbuzie and Leech, 2005) was taken to supplement qualitative methods (in-depth semi-structured interviews) with quantitative methods (questionnaires). This enabled the study to maximise the potential for data acquisition from a potentially 'difficult to reach' population (Lee, 1993). Additionally, this approach allowed for some of the data generated through interviews to be cross-checked against those generated through questionnaires. Where young people gave permission for interviews to be taped (the majority of cases), all interviews were fully transcribed. Conventional content coding of interview data was complemented at the analysis stage with SPSS analysis of questionnaire data.

### **Focus groups**

The study had originally intended to run a series of focus groups in which it was hoped that between 80 and 100 young people might participate across our two geographical areas. In this study, it was considered that using focus groups might be advantageous because group discussions would potentially generate several views on the same subject and allow access to shared meanings and understandings (Morgan, 1997) of heavy cannabis use and its impacts. Using focus groups would also enable access to the views of a large number of young people in a relatively short space of time. In theory then focus groups appeared to offer an appropriate method to explore the views of young people in relation to heavy cannabis use.

After participating in a focus group, young people would be asked to complete a questionnaire, and follow-up appointments to conduct one-to-one in-depth interviews with a subsection of original participants would then be arranged with those who agreed to participate further in the research (their willingness to do so was indicated on questionnaires).

While, compared with other methods, focus groups may enable researchers to obtain a great deal of information in a short space of time, they are not without their limitations. Practically they can be difficult to organise and convene and when they involve discussion of a sensitive issue such as drug use, some people may not want to take part because of concerns about sharing this type of information with other members of the group. Furthermore, those participating in group discussions cannot be guaranteed confidentiality or anonymity as the information is shared in the group (Gibbs, 1997).

In the event, we encountered practical difficulties in trying to organise focus groups because young people were returning flyers individually and it was often difficult to arrange for a certain number of them to be in one place at a particular time. Moreover, we found them a very limited medium through which to explore in any depth young people's views about the impacts of regular cannabis use in their lives. In the group situation, for example, it was possible to explore with young people what their views on heavy cannabis use were but less easy to explore what they considered to be the personal impacts of heavy cannabis use or their own particular reasons for using it regularly.

There were also difficulties in trying to keep young people focused on the issues they were asked to address as they tended to prefer to reminisce with each other about their experiences of getting 'stoned' (or 'mashed up' as some of them described it) and/or to joke with each other about times when one or another of them had felt sick or faint as a result of their cannabis use.<sup>3</sup> This was particularly the case when focus groups comprised pre-existing friendship groups.

After running four focus groups (involving 20 young people), and encountering at first hand the difficulties involved, the researchers quickly abandoned them in favour of in-depth one-to-one interviews, and the data generated through these were qualitatively different from those generated in group discussions (Arksey, 1996). In interviews researchers were able to probe the personal costs and benefits of using cannabis regularly and reasons for continuing to use it in much greater depth than the medium of the focus group allowed.

### Questionnaires

While focus groups were quickly abandoned in favour of one-to-one interviews, the idea of asking young people to complete a questionnaire at the end of an interview was retained. The questionnaires were intended mainly to cross-check what young people had told us in interviews as well as to test further young people's attitudes towards, and beliefs about, cannabis use through the use of Likert scale-type questions. For example, young people were asked to say whether they agreed or disagreed with propositions such as 'using cannabis everyday is likely to lead to mental health problems' or 'using cannabis regularly is likely to lead to the use of harder drugs'.

In retrospect, it may have been preferable to administer the questionnaires before the interviews rather than after them so that any answers given and any apparent anomalies or contradictions that arose might have been probed in greater depth during interviews. For example, in questionnaires, young people were asked whether they had ever been excluded from school, involved in offending or looked after by a local authority and, if so, whether this was a result of their cannabis use. In questionnaires some young people said that they had been excluded, looked after or involved in offending as a result of cannabis use. These issues were not directly addressed in interviews but young people were asked to talk about any difficulties that using cannabis might have created for them. In these discussions it often became apparent that cannabis use was *indirectly* rather than *directly* related to experiences of exclusion, involvement in offending and/or being looked after – that is, the cannabis use was part of a package of

problematic behaviour that led to involvement in these processes. If the young people's questionnaire responses had been taken at face value, therefore, the picture painted in terms of the relationship between these experiences and cannabis use may have been misleading in suggesting a direct causal link rather than an indirect association or correlation.

On the other hand, by administering the questionnaires after an interview, it was possible that the young person's mind might be more focused on the questions they were asked to address. After having spoken openly and honestly during the interview (for between 40 minutes and one hour), they might give more considered and/or honest answers in the questionnaire than they might otherwise have done.

The study was, however, primarily qualitative in focus and questionnaires were intended principally to supplement and enhance data generated through interviews. In the event, these combined methods have generated a great deal of rich data which has enabled us to 'survey and mine' (McCracken, 1988) the territory of cannabis use amongst this particular group of young people.

### Accessing participants

Accessing 'hard to reach' populations involved in clandestine or illicit activities such as drug use inevitably poses challenges for researchers (Adler, 1993; Lee, 1993; Taylor, 1993; Bourgois, 1996; Melrose, 1996, 1999, 2002). This study was advertised by means of flyers and prepaid envelopes distributed to a range of agencies that were likely to be in touch with young people who might be involved in cannabis use. In

total the research contacted 100 young people (20 through focus groups and 80 in one-to-one in-depth interviews) who took part in the first round of the research. Of these, 97 participants completed questionnaires. A total of 52 young people took part in follow-up interviews.

The flyers briefly explained what the research was about and assured participants that everything they said would be treated in confidence. If they wished to participate in the research, young people would return the flyer, providing a phone number on which they could be contacted by a researcher. Thus participants were contacted on a 'negative consent' basis and the sample on which the study is based is self-selected.

On making contact, the researcher would explain what was involved in participating in the study, assure participants that anything they said would be treated in confidence and explain that they would not be identified in any written reports or articles that might be produced from the research. If, after having the project explained to them, the young person still expressed a desire to take part, a meeting would be arranged at a mutually convenient time and place.

Despite having returned flyers some young people proved difficult (and a small number impossible) to contact – for example, their mobile phones seemed permanently to be set on 'voicemail' and/or the mobile phone numbers they had given had been disconnected in between them completing and returning the flyer and the researcher making contact with them. With persistence in phone calls and/or visits to projects from where they had picked up the flyer, most, but not all, of these young people were 'retrieved' for the project.

In some instances, and where it was appropriate (for example, at colleges or training schemes), the researcher met young people in groups to explain what the project was about, assure them that it was confidential in nature and distribute flyers and envelopes to all the young people present in the room. This enabled the researchers to establish some rapport and increased the young person's confidence in taking part when they felt they could trust the researcher.

### **Using agencies to access research populations**

Using agencies to contact desired research populations can of course be a double-edged sword (Melrose, 2002). On the one hand it can facilitate connections with groups who might otherwise be difficult to reach, reduce the potential for ethical conflicts to emerge in the course of the research and enable issues of trust and mistrust to be overcome relatively easily (Atkinson and Flint, 2001). It can also ensure that that research does not include only participants with pre-existing interrelationships, as might be the case with snowball sampling techniques, where there might be a risk of over-emphasising 'cohesiveness in social networks' (Griffiths *et al.*, 1993, cited in Atkinson and Flint, 2001, p. 2; see Morrison, 1986; Dean and Melrose, 1996). On the other hand, using agencies means that only participants in touch with them are included, therefore excluding cannabis-using young people who are not in touch with agencies.

While there are advantages and disadvantages to relying on agency populations (Melrose, 2002), we considered that in this project the advantages outweighed the potential disadvantages for the following practical and ethical reasons:

- It minimised the risk at the level of personal safety to both researchers and participants.
- It reduced the possibility of conflict arising between the researchers' guarantees of confidentiality and their duty to inform where young people were considered to be at risk of significant harm (because research subjects would already be in touch with relevant agencies).
- It enabled issues of trust or mistrust to be overcome (agency workers were able to vouch for the trustworthiness of the researchers) and thus facilitated access to an otherwise 'hidden' and 'unknown' group.

While, for these practical and ethical reasons, we considered that accessing participants through agencies was the best way to proceed with this project, it is without doubt that this method has imposed certain limitations on the data generated and thus the claims we can make from it. (These limitations are discussed more fully in Chapter 1 of the main report.)

It is possible that self-selection through particular agencies weighted our sample in favour of young people who were socially excluded and/or towards those who were least concerned or most confident about admitting their cannabis use to strangers (Dean and Melrose, 1996; MacLeod *et al.*, 2004). A skew of this nature would clearly limit any claims that can be made from the data generated. However, since the composition of the entire population of young, heavy cannabis users is unknown we would have no means of establishing if

this were the case, and the study did manage to access young people across a range of social situations – for example, some were at school, some at college, some at university, some were on training schemes, some were working part-time and studying and a small number were working full-time. Some of the young people lived at home with parents, several lived in hostels, a few lived in their own flats, and others shared privately rented accommodation and/or lived in student halls of residence.

So, while our data may not enable us to talk about the impact of heavy cannabis use in relation to young people in general, it has enabled us to provide highly valid insights into the impact of heavy cannabis use on this particular group of young people. Thus while the reliability of our findings may be limited, their validity is certainly not.

### **Repeat interviews**

While many young people agreed that researchers could contact them again for a follow-up interview, actually re-contacting some participants proved to be a frustrating process. This was often because they had moved address and/or changed their original contact telephone number. In one or two instances young people had moved away from the area completely and/or they were no longer in contact with the project where they had initially been met. Project workers had on some occasions thus lost track of them or did not know where or how to contact them again.

Overall some young people proved easier to re-contact than others and those in HE/FE and/or training programmes often proved easier to re-contact than those living in hostels and/or those who were unemployed. However,

there were some exceptions to this and on a few occasions students from FE and those on training programmes would arrange dates and times to meet for a second interview and then not turn up. They would be re-contacted to arrange another date and time and usually claimed that they had forgotten about the meeting having been arranged. However, when a further meeting was scheduled they would sometimes not turn up again (sometimes on three occasions). This raised questions about whether in fact our participants might perceive that we were ‘pestering’ or even coercing them into taking part in a second interview and about how many times we might legitimately contact them to try to arrange a second interview without actually breaching the principles of voluntary participation and informed consent. It seemed to us that those who chose not to turn up on two or more occasions were ‘voting with their feet’ and exercising their right not to remain involved in the project. A decision was therefore taken that if participants did not turn up for an arranged meeting on the third occasion there would be no further attempt to contact them.

### **Ethical issues**

Research into sensitive issues inevitably raises ethical questions and here we reflect on some of those raised by this project. We consider the topic of informed consent and then take into account matters of confidentiality and anonymity as these are considered to be essential in ethical research (Grinyer, 2002; Social Research Association, 2003). The question of providing financial incentives to take part in research and the potential impact of

participating in the research process on research subjects are then considered.

### **Informed consent**

Participants' initial agreement to take part in the study was sought on a negative consent basis by means of flyers distributed to projects which young people could complete and return using prepaid envelopes. They were additionally given the option of phoning or emailing a researcher directly if they preferred. Using flyers in this manner meant that if young people did not wish to reveal their cannabis use to agency workers/practitioners then they did not have to do so – they could pick up a flyer and complete and return it in privacy if they so wished. But we did not assume that returning the flyer meant that young people were automatically giving their informed consent to participate. When they returned the flyer young people were contacted by phone and their informed consent to participate in the project was sought.

'Informed consent' involves more than merely securing agreement to take part in an interview (Sieber, 1993, p. 18): it means that, as far as possible, the participant is aware of what they might be letting themselves in for when they agree to take part in research. This involves:

- explaining in advance what the researcher will want to discuss and how long it might take
- providing an opportunity to decline to take part
- assuring the participant that they can refuse to answer any question they are not happy with

- obtaining ongoing consent during the interview that they are happy to discuss particular themes and topics
- explaining what will happen with the information collected during the study (in terms of dissemination, secure storage of data and destruction of any tape recordings). (Melrose, 2002)

In this study consent to tape-record the interview was sought when researchers met with the young person and on some occasions the young person declined to be taped.

The choice of interview location was determined by the young person so as to allow them some control over the research process and to enable them to feel relaxed and comfortable in the environment in which the interview took place (Herzog, 2005). This approach appeared to enable issues of trust or mistrust to be overcome because, to some extent, by determining the location the young person could be sure that they were not walking into any kind of 'trap'. In the majority of cases young people chose to meet the researcher in the locations where they had originally encountered the flyer and space to conduct interviews was provided at these locations.

### **Confidentiality**

The flyer, and the researcher upon initial contact, assured the young people that everything they said would be treated in confidence and offered them the opportunity to remain anonymous if they so wished. When the researcher met with them for interview young people were reminded that whatever they said would remain confidential and that they would not be identified in any publications or reports

that resulted from the research.

When interviews were conducted in the premises in which young people had found the flyers, however, most practitioners were aware of the researchers' reasons for being on the premises and were usually aware of which young people were visiting the researchers. The young person was therefore inevitably exposed as a cannabis user and thus their confidentiality was compromised within the agency. In one or two locations private space to conduct interviews could not be provided and interviews were conducted in cafeterias or foyers where the researcher and participant were surrounded by other people (but they did not necessarily know the topic of conversation).

However, some of the young people did not seem to be concerned that other people might know that they were being interviewed about their cannabis use with one or two asserting that 'Everybody knows I smoke'. Certainly in some agencies practitioners were usually already aware of those young people who used cannabis and those who did not. Nonetheless, the fact that some young people might be publicly exposing themselves as cannabis users when practitioners (or other young people) were not already aware of this did raise some cause for concern amongst the researchers.

### **Paying participants in research**

A small incentive (a payment of £10) to participate in the project was offered to young people. This demonstrated our appreciation to them for giving their time to the project and in some cases covered the costs of their expenses for travelling to be interviewed. The incentive was advertised on the flyers left at projects.

While the debate continues in relation to

paying research subjects (e.g. Homan, 1991), it is becoming an increasingly common practice, particularly in areas of sensitive research (Melrose, 1996, 1999, 2002), despite assertions that financial incentives are seldom used in qualitative research (Thompson, 1996).

Payments to research participants have previously been criticised because they are said to exert 'undue influence' (e.g. Homan, 1991). This issue might be especially pertinent when the research is conducted amongst vulnerable and socially excluded groups where financial inducements might be particularly difficult to resist.

It has also been claimed that paying research subjects may introduce bias into the sample or even contaminate the data generated (Thompson, 1996).

On the other hand, it has been argued that payment to research participants provides a positive benefit of reducing power differentials between researcher and researched (Thompson, 1996). In other instances it may assuage any guilt a researcher might feel about 'exploiting' her research subjects to further academic understanding and/or her own career (Melrose, 1999).

Initially this project planned to pay £10 for the first interview and £10 for the follow-up interview, but given that some of the young people were very difficult to contact to re-interview, this was increased to £20 after discussion with the Advisory Group about the risk of attrition in longitudinal studies and the difficulties of keeping track of some of the most vulnerable and disadvantaged members of our study.

The issue of paying with vouchers instead of cash was discussed by the research team

but some of these young people were indeed struggling on poverty-level incomes, thus a decision was taken not to pay with vouchers as this might be construed as patronising. Of course by paying in cash there was a risk that some young people might use it to buy cannabis. However, if they had been compensated with vouchers it was equally possible that they might sell them and convert them to cash in order to purchase cannabis and/or that they might have been able to swap vouchers directly for cannabis. In the event very few participants indicated that they intended to use the money for cannabis – rather it would contribute towards meeting more essential needs such as food, travel, toiletries and perhaps clothes.

In previous studies it has been shown that subjects who had given their consent to be interviewed were sometimes not aware they would receive a payment until they actually met with the researcher (Melrose, 1996). In another study where payments were introduced halfway through the study, there was no discernible difference between the data generated by interviewees who had been paid and the data generated by those who had not (Melrose, 1999). In this study researchers suspected that participants had agreed to take part purely for the financial reward in only two of the interviews and the data elicited from these were treated with scepticism in the final analysis.

### **The impact of the research process on research participants**

All participants agree to take part in research ‘for their own reasons’ (Arendell, 1997, p. 344) and it is of course difficult to determine the

influence that payment might have on inducing subjects to participate or the data collected or whether it might have made a difference to those data if incentives had not been provided. This author’s experience of researching various disadvantaged groups, however, suggests that what usually motivates people to take part in research is *not* the financial inducement. Rather, people who agree to take part in research are frequently motivated by a desire to explain their activities in such a way as to banish misconceptions others might hold about people who engage in the particular activity being investigated (Melrose, 1996). Alternatively, people may agree to participate in research in order to further understanding of their reasons for engaging in a particular activity in the hope that by doing so they might improve the situation for others in similar circumstances (Melrose, 1996, 1999, 2002; O’Neill, 2001). Thus their reasons for participating are sometimes altruistic.

This study was no exception. One young man, for example, was keen to explain that young people who smoke cannabis are not ‘young thugs’ and they do not conform to what he considered to be media stereotypes that portray them as ‘antisocial’ or ‘deviant’. He was at pains to emphasise that he and his friends who used cannabis were ‘not out there causing trouble’ but were ‘quiet, considerate and thoughtful’ young people.

A small number of participants said they had found the experience of participating in an interview valuable because it had made them think more about their cannabis use and in one or two cases at repeat interview they claimed that this had prompted them to reduce their consumption of cannabis. While

it is possible that participation in the research process may lead some people to re-evaluate their behaviour it is also possible that asking people to discuss an activity that they have largely ceased to engage in will trigger pleasant memories and thus lead the participant back to that activity. This was certainly the case with one young woman in this study who, having almost stopped her cannabis use, told her key worker that after the interview she had to go and get some cannabis. Her key worker asked her why that was and she replied that it was 'just because of talking about it and thinking about it again'. This certainly raises some ethical questions in terms of interviewing people who may be liable to relapse into drug use and/or other detrimental activities and draws attention to the need for some participants to be 'debriefed' after an interview.

On the other hand several young people had found that participation in the research process had been a more positive experience because it had enabled them to get a perspective on their problems and/or they had just enjoyed being able to talk to someone about their lives (especially when they were encountering problems and difficulties). For these young people, participating in the research process appeared to be a beneficial experience, and they got something from us just as we got something from them (Renzetti and Lee, 1993).

### **Verifying participants' accounts of their cannabis use**

Studies that rely on self-report data – whether in relation to cannabis use or other issues – raise important questions about how confident we can be about the data we generate and how we

might be able to verify the accounts research subjects might provide us with. This section reflects on some of the challenges posed by relying on self-report data and suggests ways in which we might enhance the data we generate through such studies.

In self-report studies, especially of drug use, there is always a danger that research subjects may, for a variety of reasons, under- or overestimate the extent of their drug use (Parker *et al.*, 1998; MacLeod *et al.*, 2004; Harris, 2005). Those who underestimate may do so because of fear of the consequences of disclosure while those who overestimate may do so because they think it enhances their 'street credibility' (Harris, 2005).

In previous studies it has been demonstrated that the validity of self-report studies varies according to 'the type of population studied, the type and pattern of drug use and measurement procedures and conditions' (Magura *et al.*, 1987, p. 734; see Fendrich and Xu, 1994). It has also been suggested that the validity of self-reports is determined by the interaction between the participant and the researcher and the context of the interview (Madanik, 1988, p. 1019). In studies that rely on voluntary participation, therefore, it would seem churlish to suggest that, having agreed to take part, participants would then deliberately falsify, or provide inaccurate accounts of, their drug use and we would need to ask what the incentive might be to do that (Baldwin, 2000).

In only one or two cases in this study did researchers suspect that accounts of cannabis use were being grossly exaggerated and these were in those cases where there was suspicion that the reason for taking part was the financial reward. Nevertheless, when there are no means

of objectively verifying the accounts participants give, researchers can be left with a problem in terms of the degree of confidence they might hold in relation to the descriptions they elicit.

One way of testing the credibility of participants' accounts is by using a large sampling frame (MacLeod *et al.*, 2004) and cross-referencing what participants say (Adler, 1993). Although in this study the sampling frame was not especially large (100 participants) we were able to cross-reference what participants said and to triangulate our findings from the research with young people with the accounts of practitioners working at first hand with our research subjects.

Through checking participants' accounts against each other the study was able to determine that the majority of participants fell within a particular range of weekly spending patterns and/or amounts of consumption and these were then classified as 'light-heavy', 'medium-heavy' and 'high-heavy' users of cannabis. That many accounts tended to cohere around certain levels of consumption and/or certain amounts of money spent per week meant that we were quite easily able to spot the one or two participants whose level of consumption and/or spending appeared to fall quite wide of the mark (i.e. much higher than the range cited by the majority). This said, the complexities of trying to elicit measures of heavy cannabis use from our participants should not be underestimated and these are discussed in more detail in the body of the report.

In order to triangulate our data, professionals who took part in the study were asked to say whether they thought our figures for amounts consumed and/or spent

on cannabis were corroborated by their own experience of working with these young people. On most issues professionals thought our findings did accord with their own experience although some, especially those with experience of working with young people in hostels, felt that young people might be overestimating the amount of cannabis they used in a week but at the same time underestimating the amount of crime they might be involved in to finance their cannabis use. As there are no official data against which we might compare the levels of spending and/or consumption of our participants, however, we have no way of determining whether the perceptions of these professionals are correct or not, and this highlights a major limitation of self-report studies whether concerned with drug use or other activities.

In order to enhance our confidence in data produced through self-report studies in relation to drug use and other activities the data generated through interviews might ideally be supplemented by using ethnographic methods. This of course would make the research endeavour more expensive and raises its own ethical issues. Where it is not possible to use ethnographic methods to supplement other forms of data collection the accounts elicited should be triangulated as far as possible by using already published data (drawing perhaps on both academic and autobiographical sources) and/or supplementary research with professionals or other groups who might have first-hand experience of the activities research participants are being asked to discuss.

### Conclusions

This discussion has argued that research with hard-to-reach groups involved in clandestine or illegal activities can pose a number of methodological and ethical challenges. It has shown, however, that, with forethought, attention to methodological detail and pragmatism, many of these can be overcome to allow access to a rich pool of data in relation to activities we know relatively little about. It has suggested that in attempting to study these activities researchers should consider carefully their choice of research instruments and be flexible enough to change them if these prove not to be the most appropriate for the particular task at hand.

The discussion has further shown that how we access research populations is important in terms of the claims we can make for the data we produce from that research. It suggests that while relying on agency populations may offer several advantages, such an approach is not without its disadvantages.

This examination of the methodology employed in this project has argued that financial incentives are, for most participants, not the primary motivation for taking part in research but that it is difficult to determine what influence the offer of incentives might have on the data produced. It has considered the potential impact of participation in research on research subjects and suggested that this can be both positive and negative. It has also explored some of the difficulties encountered with self-report data but suggests that the validity of data produced through this method can be verified by checking participants' accounts against each other, by triangulating with data

from other sources where this is available and ideally by further supplementing such data by ethnographic studies.

### Notes

- 1 For the purpose of inclusion in the study, heavy cannabis use was defined as 'using cannabis more or less on a daily basis and using for at least six months'.
- 2 The details of the agencies from which practitioners came are provided in the main body of the report.
- 3 Young people referred to this as 'going on a whitey' – i.e. 'whiting out'.

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