'Pharmacological routes to everyday exceptionality'

In a modern era of speed, uncertainty, pleasure and anguish, the boundaries between pharmacologically healing and enhancing the mind are being redefined (Pieters and Snelders 2009). Whether smoking cigarettes, drinking alcohol and coffee, or taking illicit drugs, some degree of intoxication is an everyday practice for many (Bancroft 2009). Despite this 'normalization' of even illicit drug taking, normative political and managerial literatures both homogenize and demonize drug taking, discursively constituting an undifferentiated 'drug user' who is presumed unable to take drugs and work effectively. This paper suggests an alternate articulation of the relationship between drugs, work and everyday life. Analysing interviews with self-identifying drug using creative and knowledge workers, as well as reportage on prescription drug 'misuse' we argue that some drug use is increasingly being positioned within, rather than against, a managerialist performative ethos concerned with the enhancement of both the physical and cognitive aspects of everyday working lives.

Keywords: drugs, work, everyday, management, exceptionality, performance.

Introduction: Drugs and the Everyday

Historical evidence suggests that 'intoxicants have always been a part of our long-standing attempt to manage the relationship between the self and elemental worlds, including that of the self and work' (Bancroft 2009, 1). Studies of contemporary drug use in the UK and US show that, for at least a significant proportion of the population, the regular use of even illegal intoxicants is a 'normal' part of everyday life, portrayed on the cinema and television screen, in music and novels, and experienced in pubs, clubs, homes, universities and workplaces (Harris 2004; Measham et al. 2001; Parker et al. 2011; Pearson 2001; South 1999; 2004). Despite this, comparatively little research has examined how drug users understand the relationship between their work performance and drug taking. Managerialist literatures assume an incompatibility between intoxication and work (CMI 2003; Ghodse 2005). Scientific studies attempt to establish correlations between productivity, earnings and drug use (Register and Williams 1992). Policy orientated documents highlight the

relationship between unemployment and drug use, even recommending work as a form of treatment for habitual drug use (South et al. 2001).

In management and organization studies, most of the discussion around drugs and work has focused on the rights and wrongs of drug testing. For example, researchers have questioned management's right to test employees for traces of illegal narcotics, even when actual drug use may have taken place outside of work (Comer 1994; Gilliom 1996; Warren and Wray-Bliss 2009). Others have explored the symbolic aspects of work, organization and drug use, positing intoxication as a symbolically unruly other to the ideal of sober rationality that legitimates management as both a practice and a social group (Acevedo et al. 2009; Cavanaugh and Prasad 1994). Almost no attention has been given, however, to how employees themselves understand and articulate the relationship between their work and drug use, or the strategies that 'normal' users, rather than those with a drug-related criminal record or clinical treatment history, employ to manage the interface between drugs and work (Warren and Wray-Bliss 2009).

In this paper we examine the culturally embedded understandings of the relationship between drugs and work through an analysis of interviews with professionals, creatives and knowledge workers in the UK, and media reportage on prescription drug use. Recognizing that the concept of a 'drug' is itself culturally and historically variable, we define 'drugs' as chemical substances, whether legal or illegal, that are intentionally taken to achieve a desired neuro-physiological effect (Iversen 2001). This definition thus includes 'performance enhancers' and neuro-active pharmaceuticals¹ that may be used to improve work related performances. We include alcohol in the mix, in order to incorporate the widest possible concept of 'drugs' as an integral part of everyday life and to avoid unintentionally reproducing the bias in dominant discourses that focus on illegal narcotics as classified in the *Misuse of Drugs Act* (1971). Our decision to incorporate alcohol as a 'drug', moreover, fits

with the definition that it modifies neurophysiological functioning and such modification is a primary purpose of consumption. Other than legislation, there is thus no extra-legal or physiological rationale to exclude alcohol from the category 'drug'. Indeed, scientific evidence suggests that alcohol may well be more dangerous than some illegal Class A drugs (Nutt 2007; 2009).

The first part of the paper reviews the literature on drug use and work, contrasting managerialist and critical perspectives, and setting these alongside broader sociological analyses that suggest drug use in the UK today is a culturally normalized activity. This normalization of drug use raises questions over how users understand and manage the interactions between drug use and working life, in a managerial context that suggests the two are incompatible. The evidence suggests that 'the majority of university students, up to 60 per cent, have some drug experience,' (Parker, et al. 2002, 946), in which case a significant proportion of graduates working in the professions, knowledge work and creative industries will have some experience of drug use. The second part of the paper discusses the methodology we used to analyse how some of these workers understand the relationship between their drug use and working practices. This combined semi-structured interviews with self-identifying drug using knowledge workers in a large UK city with an analysis of media reports on the misuse of prescription drugs as 'cognitive enhancers' (Sahakian and Morein-Zamir 2007). Parts three and four then discuss the two main themes emerging from our study.

In the third section we consider the idea that drugs may be able to improve work performances, rather than hinder them. Several of our interviewees spoke about using drugs as a workplace performance enhancer. In this section we also include media reportage in our analysis to suggest that some types of drug, particularly prescription pharmaceuticals like Modafinil (a drug used to help people with sleep apnoea, narcolepsy or 'shift work sleep disorder' to stay awake) and Ritalin (used to treat ADHD - Attention Deficit Hyperactivity

Disorder) are increasingly being understood as 'cognitive enhancers' that can improve performance of intellectual labour and knowledge work (Sahakian and Morein-Zamir 2007). This analysis suggests that as work and organizational boundaries continue to break down (Gregg 2011; Land and Taylor 2010), and as performance becomes both more pressured and less measurable (McKenzie 2001), the relationship between drugs and work seems set to become ever more complex.

Part four examines interviewees' explanations of the strategies they use to manage the interfaces between intoxication and work. Whilst some participants described an intentional strategy of drug enhanced performance at work, others focussed on monitoring and managing drug use outside of work in order to minimize any negative impact on their work.

Both of these perspectives locate drug use within a managerialist ethos in which the use of drugs is subordinated to the imperatives of work and performativity. Our analysis suggests that orientations to the management of drug use are subjectively internalized though organizationally and culturally specific ethics of professionalism. The paper concludes by suggesting that research on drugs and work should be refocused on issues of professional and organizational culture and identity, rather than technologies of drug testing, to provide a more nuanced understanding of this relationship and how it is changing in a world in which drugs are both 'normal' and, at least for some, hold the potential to enhance professional and workplace performance.

Drugs, Work, and Everyday Life

The consigning of drugs and drug users to symbolic 'zones of danger and exclusion' is a phenomenon of the last century in Western societies (South 1999). One drug that is marked by such shifts in prohibitionary behaviour is cocaine. Cocaine was used widely as an all-purpose stimulant in Europe from the mid 1850s to the 1920s, largely as a by-product of

medical research. It was not until the 1920s that British political pressure and media attitudes began changing when rumours abounded that German made cocaine was being sold to British troops (Berridge 1984). As a result of being sourced from the opposition, the drug became firmly associated in the popular imaginary with depravity and became added to the list of narcotics to be outlawed by the passing of the *Dangerous Drug Act* of 1920 (Home Office 1920). By way of contrast, during the Second World War, the use of amphetamines was prevalent in both the Japanese and German military, as well as in the US military during the Korean War (Bloomfield and Dale 2013).

In the UK the most significant piece of drugs legislation shaping the current context is the *Misuse of Drugs Act* of 1971 (Home Office 1971). In both pieces of legislation, and in subsequent policy from 1995 to 2010, all types of drug taking are homogenized and demonized. Although drugs are formally classified from A to C, policy documents often fail to clearly distinguish between hard drugs like heroin or crack cocaine and softer drugs such as cannabis (Smith 2012). Policy documents refer to an undifferentiated subject – 'the drug user' – who is presumed to have a problematic relationship with drugs that renders them incapable of working effectively and efficiently.

Paralleling these governmental discourses, managerialist literatures suggest employee drug taking negatively impacts both employee and employer (Harris 2004). For the employee, reported effects include depression, over-confidence, irritability, confusion and aggression (CMI 2002; London Drug Policy Forum 2007; Osborne 2003). Suggested outcomes for the organization include increased sickness, accidents, lateness, absenteeism, premature death, reduced work rate, erratic performance, extended coffee breaks, excessive time on the phone, inappropriate dress, unkempt appearance, reduced hand-eye coordination, reduced response times, poorer memory, slower reaction times, inaccurate time keeping, safety concerns, a lack of discipline, financial irregularities, loss of clients, lower profit

margins, theft and poor team morale (Ghodse 2005). In light of these effects, drug testing is recommended both for reasons of workplace performativity and a paternalistic concern for employee wellbeing, for example, as part of an Employee Assistance Programme, or EAP (Hansen 2004). These programmes target 'troubled employees' with counselling or treatment to resolve problems that are presumed to originate outside of work (Sonnenstuhl and Trice 1990).

In both discourses the 'drug user' is constituted as a disorganized and problematic other, against whom the good order of the organization must be protected. Drug taking is framed as something occurring outside the workplace in employees' private lives. Only rarely is there an explicit acknowledgement that factors in employment, such as long hours, might lead to drug taking (Burke and Fiksenbalm 2009; Sparks et al. 2001). Despite scientific evidence that recreational drug use might help employees to deal with stress and even increase their productivity by providing a safety valve and off-switch to escape the pressures of work (Harris 2004; Register and Williams 1992), the only subject position available to the drug user within policy and managerialist discourses is that of a deviant engaged in an act of resistance (Warren and Wray-Bliss 2009).

This idea of drug taking as a form of deviance or resistance is well established in sociological literature. Early studies of drug users focussed on sub-cultures like jazz musicians who worked and lived on the margins of mainstream society (Becker [1963] 1991). In *Escape Attempts*, Cohen and Taylor ([1976] 1992) framed drug taking as a means of escape from the crushing tedium of workaday existence. One tension they identified in such escapes was that once practices like smoking a joint became normalized, they lost their efficacy as a mode of resistance and became a mundane part of everyday life. The other tension was that these escapes could even end up being functional for the maintenance of the routine they sought to escape. In a more recent study, focusing on working professionals,

Measham (2004) similarly concludes that by providing a break from the routine of work, and indeed other aspects of life, recreational drug use could function as a safety valve, releasing pent-up frustration and thereby enabling the employee to face work again after a weekend's binge and get through the week looking forward to the next escape

A more disruptive reading of drugs at work can be found in some accounts of work and organization. In Fleming's (2009) study of cultural control and resistance in a call centre illegal drug use makes visible the boundaries of acceptable behaviour in a seemingly liberal regime of control characterized by fun, play and authenticity. Whilst employees in his case company - Sunray - are told to 'just be yourself' at work, when a worker brings home-baked 'cannabis cookies' into work to share with his colleagues, he is sacked immediately. In this example, illegal drug use is framed as a limit to the extent to which private lives can be brought into work, positioning drug use as an act of resistance that reveals the iron fist in the velvet glove of apparently tolerant forms of management.

Whilst Fleming's account of 'cannabis cookies' can be read as a fairly straightforward case of organizational misbehaviour and resistance, if we define drugs as any substance taken intentionally to achieve a desired neurophysiological effect, then there are many more stories of organizational drug use that unsettle this apparently straightforward dialectic of control and resistance. Rather than a dichotomy between disorderly drugs and sober organization, the cultural order particularly of creative work is often produced through, or alongside intoxication. Insofar as it is concerned with reproducing social relationships - for example through building team relations within an organization or networking within a profession or to sell services to other organizations - work increasingly spills over beyond the formal boundaries of the workplace (Land and Taylor 2010). In Nixon and Crewe's (2004) study of London based advertisers and magazine publishers, for example, 'booze and drugs' were regular features in both industries. Nixon and Crewe's account focuses mainly on the forms

of masculinity and homosocial reproduction that hard-drinking, pub-based cultures reproduce. In these working cultures, 'drink and drugs were central to the daily practices of editors' (2004, 139). Men's magazines like *Loaded* even went so far as to pay their writers drinking expenses, arguing that drinking was a central component in researching a story in the Gonzo tradition of journalism first laid down by Hunter S. Thompson (ibid.).

Another example is Van Maanen's (1992) account of drinking in the London Metropolitan police force, in which alcohol fulfils two main functions. First it enabled the maintenance of social relations and the socialization of new recruits. Officers would drink together when off duty in the evenings. As in Nixon and Crewe's study, the pub was a place where the masculine culture of the organization could be reproduced. In Van Maanen's (1992) account drinking was central to this cultural reproduction as it provided an excuse for social mistakes. New members could participate in the culture but put any social blunders down to being drunk, thereby learning to perform the culturally accepted social identity of a policeman. Alcohol also functioned to delineate the boundaries of work in the police, with drinking as a 'time out' from the daily routine, to celebrate a retirement for example. In these cases the police would return to work after having a drink, with the expectation that they would be able to continue to perform their role normally. In such work, the consumption of intoxicating substances supports a context where the boundaries of work and life overlap, and private or social lives are enrolled in the professional performance of work. This commingling of work and life creates difficulties for the management of drugs through prohibition, as well as for a critique of drug policy based on a defence of the private sphere against managerial intrusion. These difficulties are exacerbated by evidence that drug use is increasingly seen as a normal part of everyday life for many people, and particularly for those with a university education, and is ever more common in spaces where work-related socializing is likely to occur.

Recent decades have seen a shift from drug taking being represented as a subcultural practice to a more everyday, normalized, social phenomenon (South 1999). 'Normalization' does not mean all young people are now drug users but rather that it is now non-acquaintance with 'recreational' drugs and/or users that is a 'deviation from the norm' (South 2004, 525). To this end, evidence from the British Crime Survey (2010/11) estimates that around one in three adults aged 16 to 59 (36.3%) in England and Wales have taken illicit drugs in their lifetime (almost 12 million people) and around 8.8 per cent (circa 2.9 million adults) took these drugs in the last year (Smith and Flatley 2011). Pertaining specifically to drug takers as employees, it has recently been suggested that at least one in thirty UK employees has drugs in their system at work at any point in time (Concanteno 2012). As a consequence drug use has lost much of its sense of exceptionality and has become integrated into everyday life as a routine and accepted activity by a significant proportion of the population (Pearson 2001).

Many normalization studies have focused upon the routinization of drug use in leisure time, for example Measham's (2004) study of hedonistic clubbers taking ecstasy to blow off a little steam at the weekend. Almost no studies have explicitly addressed drug use in relation to work. One notable exception has been the work of Nigel South (2004), who has examined the ways in which individuals manage drug use in relation to their working lives.

Investigating drug users' management of 'the borderline' between work and hedonism, South found a number of financial and time-budget strategies that individuals use to manage the interface between employment and heavy recreational drug use, to the extent that securing a well-respected job could push some to stop using drugs altogether (South 2004). Strategies adopted by participants included carefully selecting drugs in order to minimize negative effects on their body, only buying drugs from reputable sources, and not taking drugs that would disrupt their working lives. South's work therefore goes some way to addressing the

lack of research into the 'sensible' recreational drug user, identified by Warren and Wray-Bliss as:

... the one who: makes rational, informed, consumerist choices with regard to their drug consumption...; eschews drugs that are likely to lead to addiction or chaotic behaviour; whose behaviour on drugs is generally socially benign; and whose drug consumption choices are cognizant of the demands of studying or working (2009, 173).

South (2004, 527, citing Murphy et al. 1990, 321) concludes that drug use can coexist 'comfortably with ... conventional roles and activities' and provides an important basis for analysing the strategies of the 'sensible recreational drug user.' By locating drug use clearly in the sphere of 'leisure', however, South neglects the ways in which work and life are increasingly overlapping and even blurring.

Other than South's work, there has been relatively little research into either the practicalities of managing the relationship between drug use and work, or how individuals make sense of this relationship, and none looking specifically at professional knowledge workers and creatives. Following a brief discussion of methodology, the rest of this paper addresses this research gap by examining the reasons and motives for taking drugs in connection with contemporary work performance, and by explaining some of the everyday strategies that drug users employ to manage the relationship between their consumption and work.

Methodology

To explore the relationship between drug use and work, our empirical work draws upon two sources of data. First we conducted 14 semi-structured interviews with knowledge workers, professionals and creatives in a large UK city. We chose to focus on knowledge workers due to the high participation of university educated people who have used drugs (Parker et al., 2002) and because of evidence that the boundaries between work and life are more permeable

in these industries (Grey, 1994; Arvidsson et al., 2010). Critiques of drug testing have questioned the intrusion of managerial surveillance into employees' private lives (Warren and Wray-Bliss 2009) but other research suggests that for creatives and professionals the boundary between work and life is highly porous, with personal and social relationships inextricably tied to career and work performance, and therefore effectively a part of 'work' (Gregg 2010; Grey 1994). The boundary between work and leisure breaks down almost completely in some professions. For example, Lewis's (2003) study of professional accountants suggests that for some people work is not experienced as an imposition on life, but is actively chosen as the preferred way to spend their spare time, rather than with family or on more conventional leisure activities. Our main focus is on the UK, which can be seen as a special case for the study of drugs and work as it has a higher level of recreational drug use than other European countries (EMCDA 2008; United Nations Office on Drugs and Crime 2010). The interviews were between one and two hours and included artists, actors, venture capitalists, lawyers, academics and IT consultants. Eight respondents were male, six female.

To supplement these interviews we reviewed a range of media reports on the use of drugs in the workplace. Here we focus on reportage relating to 'smart drugs' or 'cognitive enhancers' (nootropics)² for two main reasons. First, one of the main themes that came out of our search for literature on drugs and work related to performance enhancing drugs. In 2007, Sahakian and Morein-Zamir published a short article in *Nature* entitled 'Professor's little helper', which put the ethics of cognitive performance enhancing drugs clearly on the political and scientific agenda. Three years later, reviewing the evidence for the efficacy of cognitive enhancers, Repantis and colleagues (2010) concluded that there was clear evidence that Modafinil worked but that regulation and the ethics of such use needed to be understood in a wider context:

The demand for a drug like modafinil has to be understood against the backdrop of a growing pressure on people in modern societies to live and work, often continuously disregarding their biological rhythms. (Repantis et al., 2010: 205)

The issue achieved an even wider popularity with the 2011 release of the movie *Limitless*, in which a fictional drug, NZT, enables an unemployed writer to complete his book and turn his life around, ending the movie as a rich, famous, presidential candidate (Burger 2011). One year later, the Academy of Medical Sciences (AMS), British Academy, Royal Academy of Engineering and the Royal Society published a joint report entitled 'Human Enhancement and the Future of Work'. Whilst addressing a range of different human enhancement technologies, the report concluded that 'cognition-enhancing drugs present the greatest immediate challenge for regulators and other policy-makers' (AMS 2012, 54).

As well as becoming a significant ethical and public policy concern, primarily framed in terms that draw upon debates over 'doping' in sport, the use of both legal and illegal drugs to enhance performance at work, and to cope with the pressures of work, arose in our empirical work through the interviews. Whilst the dominant discourse in studies of management, work and organization represents drugs and work as basically incompatible, drawing upon popular and scientific texts on the (mis)use of prescription drugs as cognitive enhancers allowed us to access this growing phenomenon more widely than our more limited interview set did. As such, we focus on reportage on smart drugs used to improve performance, for example by students who believe they enable them to improve their grades. These reports were used to analyse the broader cultural context within which the relationship between drugs and work and the ways in which 'cognitive enhancers' or 'smart drugs' are reconfiguring this relationship.

When recruiting interview participants, we were acutely aware of the ethical responsibilities incumbent upon us. As some of our interviewees would be discussing the use of illegal drugs, and identification could have possible implications for their careers and other

aspects of their lives, we had to ensure anonymity. This responsibility also had implications for recruiting participants. Since the research topic had the potential to undermine the reputation of both participants and the organizations they work for, approaching organizations directly was not viable. The need to secure high-level, senior management sponsorship for the research would have compromised the position of employees further down the hierarchy, who could possibly be identified as having participated in the research. An alternative approach often adopted in research with drugs users (e.g. Hammersley 1999) is snowballing, whereby initial participants are asked to suggest other possible participants for the research. Despite this often being used successfully to recruit participants in sociological research, the University of Essex Ethics Committee forbade us from using such an approach, following concerns that this recruitment strategy might present a threat to participants' confidentiality and anonymity. Our recruitment strategy was thus restricted to participants responding to an advertisement published in a city-specific newspaper with a relatively high readership from the city's population of knowledge workers and professionals³. All interviews were conducted at a time and place convenient for the participant, whilst maximizing both parties' safety. Most took place in public places such as cafes and coffee shops, far enough from a participant's workplace that they would be unlikely to meet colleagues there. All those who took part in the project were asked to complete an informed consent form outlining their rights and responsibilities.

Participants were also informed that the police could potentially gain access to this 'sensitive personal data' in accordance with the *Data Protection Act* (1998). The legal duty of the researchers to pass on information regarding individuals' drug taking if requested to do so for the purpose of the police conducting legal proceedings clearly raised additional ethical issues for us. One solution was to never record any personal information along with the interview transcripts, thereby preventing the identification of individual participants and

ensuring that only the researcher conducting the interviews would be able to make any such connection. In this paper, and all other publications, we have adopted a 'blanket anonymization' strategy referring to participants using a pseudonym and ensuring that no identifying traits are included. We maintain only essential and high-level information, such as the sector a respondent works in, when this is necessary to understanding the context of their work and drug use and where this could not lead to identification. We have been careful not to identify specific events, logos, company phrases, or places which might in any way lead to the identification or specific geographical areas of the city where participants worked.

Given the impact of these constraints, the challenge of identifying participants, and a desire to include the broader cultural context of drug use in our study we supplemented our primary interviews, as aforementioned, with excerpts from electronic news reportage on performance enhancing 'smart drugs' taken by knowledge workers, mainly college students and academics. Whilst there are a number of techniques of media analysis (e.g. Fairclough 1995), we focussed on interview excerpts with drug users that were quoted in the published articles. Whilst there is an additional layer of interpretation in these sources, because they have been selected for inclusion in an article with a non-academic intent, we have analysed these texts through the same methodological lens used for the interviews, focussing on the orientation toward drugs and work that they articulate.

Before discussing this approach it is worth noting that the articles had a more restricted focus than our primary interviews. They discussed the use of non-prescribed prescription drugs designed to treat narcolepsy and ADHD, including substances like Modafinil and Provigil that are reported to increase focus, stamina and 'executive functioning' (Mehlman 2004) and are thus directly concerned with performance enhancement and intellectual labour (Greely et al. 2008). After identifying these chemicals as relevant to our research interests, both through preliminary literature reviews and through interviews, a

corpus of articles published since 2000 was systematically identified via Google using a variety of terms typically associated with these types of legal substances, including 'nootropics', 'smart drugs', 'cognitive enhancers', 'memory enhancers' and 'prescription drug abuse' in connection with 'work', 'knowledge work', 'study' and 'school'.

Throughout our analysis of both datasets we have focussed on analysing drug users' reflexive articulations of their drug use and its relationship to work. By combining interviews and reportage, we were able to explore in some depth the reported practices and meanings associated with drug use and work. The use of interviews enabled us to locate users' rationales, justifications and reported drug management strategies within wider cultural contexts of work and life. As all human behaviour is meaningful, shaped by cultural processes of sense making, and related to on-going identity work, this research strategy enabled us to access the socially and culturally embedded meanings that individuals attach to their experiences regarding drugs and work (Rhodes and Brown 2005). Whilst participant observation would have enabled more direct access to the lived practices of drug use and work, practical and ethical considerations made such an approach unrealistic. Interviews also have the advantage of enabling a long-term, retrospective review of a career of drug use and employment, enabling the investigation of shifts in practices and patterns over several years or even decades. In vivo observations allow a different level of access but restrict this to much shorter episodes. In both cases the presence of the researcher is likely to have an impact on the research, either by impacting directly on practices, via their physical presence, or through the staging of, and relationship developed during, the interview itself.

Given that drug taking remains a contentious practice, the fact that most of our respondents described their drug taking as manageable and largely under their control cannot simply be read as an accurate representation of their drug-taking practices. Rather their accounts should be read as indexing the tensions they felt around the ambivalent status of

drug use: normalized but also, in most cases, illegal or at least subject to some social disapproval. This is not to say that respondents' accounts are false but rather that, in the absence of direct, long term ethnographic shadowing or similar verifiable research techniques, these accounts cannot be directly mapped to their everyday material practices of drug consumption. As such our concern is with drug users' self-reflexive accounts of their drug consumption and how these can be understood as articulating a subject position that is quite distinct from that mapped out by governmental and managerialist discourses and policy documents. The accounts that participants give of their drug use and work provides access to underlying meaning systems and the cultural significance they attribute to drug use.

Pharmacological Work Enhancement

One of the reasons our participants reported for taking drugs was to enhance their performance at work, primarily by increasing mental stamina and functioning. Elliot, for example, explained how he felt that using cocaine and alcohol aided his performance at work, allowing him to work 'better, quicker, more efficient [and] longer'. Elliot did not describe his drug consumption in a recreational frame but directly connected it to work and performance. This performative framing informed Elliot's choice of drugs, with a clear preference for those he felt facilitated working, rather than those that provided an escape or distraction from work:

I didn't like heroin, I tried it twice in my life and I don't like that, so I am very specific and I need to, well my belief was that [cocaine and alcohol] would make my brain go better, quicker, more efficient, longer. It was all about performance (Elliot, venture capitalist).

Elliot claimed to have successfully set up three of his own companies and invested in several others, fuelled most of the time on a cocktail of cocaine and whisky. In a very different context, Amy, a self-employed artist and tutor, told a similar tale about using cocaine to work long hours, through the night, in order to maintain a high level of focus and creativity in her

art work. When concerned with more intellectual forms of work, such as writing essays for a

postgraduate qualification, she changed her preference to Modafinil:

Amy: Well, [Modafinil] kept me awake enough to write the most pretentious

presentation I had ever delivered in my life and um my tutors loved it... [A friend] read

it; he wasn't that... he was like "mmmm de de deh", but I loved it, and they didn't ask

whether or not I had actually read Kristeva's account, you know what I mean because

why I got the drugs I thought "at last I will read...I will read these textbooks".

CS: So it actually makes you sort of focus?

Amy: Well, no, but the first time I did it, I didn't focus and what I did was, I multi tasked

madly for the whole day.

CS: Ah ok that's interesting.

Amy: I filed everything.

CS: Suddenly a big interest in filing?

Amy: Yeah, so I think you have to focus it on whatever it is you are doing, focus in that

mind-set of thinking "I will do this now". What I realized was that it does not make you

more focused... It doesn't make you more academic; you have to want to do that anyway,

and then it just helps you keep going.

As we also see in Amy's account, this understanding that mental focus and stamina could be

improved through drug use was not restricted to intellectual work as it might more narrowly

be understood, or even creative artistic work. Frank, an actor, told us how he consumed a

variety of drugs that he thought allowed him to manage and improve his physical

performance in front of the camera but also to manage his emotions whilst acting:

You might have a shootout, like I had in [name of film], you know, it's all guns and

blazes, you know I'm the geezer who is getting shot and hit, so I need to be a bit more

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physical and active, so I need a dab of coke, to feel not bothered about it and relax...and then I'm like "I've had a dab, I'm ready and let's roll boys".... Listen, if you are playing a music video, and you're doing erm, or you're playing a roughneck, a bit of drugs or drink can actually enhance the part.

In all three of these examples, our respondents understood drugs as capable of improving performance at work, overturning the dominant discursive articulation of a single, antithetical relationship between work and drugs. Respondents framed their consumption in relation to drugs' potential to extend their physical, mental and emotional stamina beyond normal capacity, enabling them to cope with the demands of work. For this potential to be realized, however, skill and application were still required. This point is made particularly clear in Amy's comment that '[Modafinil] doesn't make you more academic... it just helps you keep going'. In this sense drugs were not understood as an immediate shortcut to superior performance but as a means to enhance performance in often highly pressured and competitive environments. To explore this further we turn now to examining how prescription drugs have been framed in media reports as illicit 'cognitive enhancers' that enable knowledge workers and students to meet ever-increasing pressures to perform in contemporary higher education and work contexts.

Studying with 'Smart drugs'

The idea that there is a pressure to make even everyday, normal performances exceptional, and that this exceptionality can be achieved through the correctly managed consumption of drugs, is not restricted to our sample of knowledge workers and creatives. It is echoed in reportage on students, often at elite universities, using pharmaceuticals like Ritalin or Modafinil to improve their academic performance. These examples focus primarily on individuals describing activities like memorizing graphs and data, or remaining alert after travelling, emphasizing the technical aspects of intellectual work, or the physical stamina

necessary to perform this work. Laurance (2009) quotes a finance student from the University of Florida as saying that: 'It's a miracle drug [Modafinil]; it is unbelievable how my concentration boosts when I use it'. In an article in *The Daily Mail*, another student was quoted as saying:

I find I can memorize a graph after drawing it once instead of several times. I would say it makes [me] 40-to-50 per cent more productive in a day, but it does not make me any cleverer. Whilst revising for my last set of exams, I was taking 100mg of Modafinil for six or seven days a week for three weeks. Around half-term I stepped it up to 150mg to 200mg and in the last two or three weeks up to the exams I took 200mg to 300mg a day and worked 18 hours a day (Boggan and Stewart 2010, 1).

In this quote, the student is attributing an increase both in the length of their working day, and the intensity of their work during this time, to taking the drug. With the aid of Modafinil, they claim that they can work more than twice the normal 8 hour working day and be more productive during those hours.

The use of these drugs as an aid to improve the performance of intellectual labour is not restricted to students. An article in *The Telegraph* describes an academic who uses cognitive enhancers to deal with international travel between the United States and Europe to give a presentation. By reducing tiredness and maintaining focus, they claim that the drugs enable a performance that would otherwise be impossible:

From Atlanta, I can get to Europe by 6am and give a 9am presentation. It lets you go and come back in the same day (quoted in Blake 2010, 1).

These drugs are very different, in terms of popular perception, neurophysiological functioning, and legal classification, from cocaine and alcohol, which our respondents also reported using, but in all cases they were understood as providing a means to improve performance at work, rather than to escape from work. And taking drugs to enhance

performance in this way differs markedly from the motivations attributed to drug use in governmental policy documents or Human Resource Management guidelines. As Sonnestuhl and Trice (1990) note in relation to Employee Assistance Programmes (EAPs) and Human Relations inspired discourse, the assumption is that drug takers are 'troubled' by factors outside of work and require managerial support to recover and become fit for work. In contrast, the interpretations given by our respondents and in media reportage around the 'abuse' of prescription drugs as cognitive enhancers suggest a different understanding of how this 'fitness' is achieved. Rather than workers needing managerial support to overcome a drug dependency that is adversely affecting their performance, these workers are managing their own drug use in order to maximize their performance at work. Through their managed approach to drug taking, respondents' regimes may well have similarities to more critical accounts of health promotion that suggest such practices are adopted to represent a means of expressing one's own identity at work through increased performance (Cederstrom 2011).

In this sense it is perhaps significant that our focus on knowledge workers, creatives and students has disproportionately included workers with neither a conventional, stable employment position in an organization, nor the hierarchical management and supervisory structure that so often accompanies it. By focusing on largely self-managing, often self-employed people, the conventional concerns with management monitoring and restricting drug use were not as prominent as might be found amongst those in more conventional forms of employment. In a situation in which managerial control is replaced by the internalization of performative principles through individualized competition, pressure to achieve, or a professional work ethic, respondents' narratives discussed maximizing performance in the same way that athletes might when using performance enhancing drugs in sport. Respondents also evoked the traits of self-management that Lodrup-Hjorth et al. (2011) suggest are concerned with the investment of unique desires, aspirations and creativity into the work

process and which connect personal desires with organizational interests and accomplishments. The performative orientation that participants emphasized in their narratives therefore reflects a wider recent trend in the management of work and organization away from EAPs that normalize by 'treating' employees' problems, towards active health promotion programmes that encourage employees in the pursuit of strategies of enhanced work performance. Such health promotion programmes represent employees as self-governing people who flexibly adapt their lifestyles to operate in conjunction with the maintenance of their health and professional success (Maravelias 2009), and who do so by governing their own productive capacities both within and outside the workplace (McGillivray 2005). In a similar way the respondents quoted above were active in using drugs to increase their productive capacities.

Managing Performance with Measured and Calculated Drug Taking

In the second of the themes analysed here, our participants understood their drug use as a practice that was regulated in relation to work. Even when respondents did not report taking drugs to enhance work, they claimed to carefully manage their consumption in order to avoid any adverse impact on their work. This disciplined, self-control is about as far from the classical 1950's portrayal of the 'drug user' in *Reefer Madness*⁴ as you can get. As a 'controlled loss of control', this account of drug use was not about performing better at work, but rather extended an organizational logic of discipline and control - of management - into one's private life and drug consumption. Here again, drug consumption is subordinated to a dominant managerialist discourse of performativity.

Similar to the managed approach to drug use documented by South (2004) who detailed how recreational drug takers only took drugs with the minimum negative effect on their bodies, only purchased drugs from reputable sources and who did not take drugs that

would affect their conventional work lives, our respondents also described two distinct strategies to regulating their drug use in relation to work. As in South's (2004) work, one of these related to the quality and quantity of drugs consumed where participants spoke about how they would only take drugs that would not have too many negative impacts on their body. The second of these related to the temporal and spatial separation of drugs from work where, again like South's (2004) respondents, our participants' accounts illustrated how they tried to avoid their drug taking having a negative effect on their work through selecting the times and spaces in which they consume. In both cases respondents made explicit moral judgements about what drug taking should and should not be, for example, by referring to correct or incorrect drug-taking behaviour. Advertiser Yasmin, for example, talked about the inferior quality of some cocaine that her friends used, but which she would not take herself:

My mate brought like coke really cheap, and I was just like "look listen", she had it in her top, and she has taken it out in the toilets and it has gone orange, and I was just like; she still did it, and I was like "look it's turned orange; it doesn't turn orange, it shouldn't turn orange so what the hell are you doing putting it up your nose kind of thing"

Participants also used terms like 'favourite' or 'drug of choice' to frame their drug taking within a consumerist logic and suggest an active and rational decision-making process around consuming drugs. This process of selection and rationalization of drug preference appeared in several interviews. For example Melissa, an academic, discussed how she had stopped taking marijuana because occasional, irregular use was impossible in the light of the strength of contemporary variants like 'skunk':

CS: Ok so what's the range of drugs that you take, or you have taken?

Melissa: [Laughs] Erm marijuana, both solid and skunk (eugh), that's the one thing I never touch any more. I am just like "no", you either have to smoke it all the time, or otherwise you just fall on the floor; it's not, erm, so marijuana, um, I have, ecstasy was

my drug of choice. Ahhhh I loved my ecstasy pills, bring them back......just hoping someone has got a box full somewhere.

As we have seen in Yasmin's account, respondents also reported conscious selectivity within, as well as between, types of drug, buying only from reputable sources who can be guaranteed to provide high quality drugs. She framed this in terms of efficient resource utilization given the limited time and money she was prepared to allocate to drug taking:

I am a bit of a snob when it comes to it [the types of drugs taken] like basically because I was, I was a complete terrorist⁵ when I was younger, basically so over the years I have kind of met people that I trust, and basically, it's to a level where they will tell me if they have something that's worth me doing.

Whilst some participants talked about defining boundaries to manage their drug taking, others explained how they arranged their work spaces and practices to manage consumption at, and around, work. Elliot described arranging his office so that he could take drugs regularly and without being noticed:

I used to make the excuse just because I would be on the phone listening, and I could hear voices, the real thing erm, was because I wanted to do it my way, and my way was a bottle of alcohol in my drawer and erm er, very quickly when I was doing coke at the office, I couldn't go to the loo every half an hour, so I used to have a specific place... in the room, in the middle of some files, go in there for a quick sniff.

Relatedly, and as we have seen earlier, whilst Amy reported using Modafinil when studying for a part-time, postgraduate qualification alongside a portfolio of paid employment and independent, artistic production, this was not her only drug. She also discussed using cocaine when working on creative, artistic projects. To regulate this consumption and not just binge it all in one night, she described a strategy of dividing the drug into small packages and hiding them around the studio and other places where she might use them as a boost to her artistic work:

What I find is, if I get a little wrap of cocaine, I'm very parsimonious with it. People can't believe it. Most people will do it all in one night because it is recreational but I'm sort of quite, pass it out for weeks, take it up to the studio and it would be a little treat if you know what I mean, because I don't drink really, I don't smoke, it's a little treat and I will work through it, it will be lovely but I will do until it's gone.

Managing 'Smart drug' Consumption

Reflecting the position of our respondents, those interviewed in smart drug news reportage also described a controlled and managed approach to their drug usage. Here this manageability was most apparent through limiting drug use to those times when they most needed to boost focus or increase productivity on a particular task. One academic reported this kind of selectivity, answering a question about how often he used these drugs as follows:

Not chronically, but only on days when I decide, "OK, I need to get something done". (quoted in Bannerman 2010, 1).

A similar selectivity is evinced in a report on students using cognitive enhancers at university. For example, one student talks about not taking drugs in the down times between semesters, when he was not studying:

I continued to use these little magic pills sporadically throughout the spring semester, but now that the school year has ended, I have no reason to take them anymore. I may be inclined to use them in college, but I'll probably try to get a prescription next time around (quoted in Sharrett 2012, 1).

What is also interesting here is that this student suggests in the future that they might get a prescription for their Modafinil usage and therefore appears to aspire to acquiring this drug through organized healthcare and within the confines of traditional organizational arrangements, as opposed to obtaining it illicitly during leisure times. This bringing of specific drugs to organizational spheres is similarly represented in Elliott's previous

quotation where we saw that he chose particular drugs in conjunction with the performative spaces of work and therefore did not select different drugs that he considered may be used by others in leisure.

As well as synchronizing their drug taking with the times when they intended to be most active, individuals also recognized potential dangers if they did not effectively regulate and manage their consumption. One student explained that he needed to 'take a break' from consumption in order to let his body recover from the effects of drug use and the intensified working practices they enabled:

I find you can get by on four to six hours of sleep for up to three weeks and then, at the end, the body needs to rest and catch up. I take a whole day off and sleep for 24 hours (quoted in Boggan and Stewart 2010, 1).

This regulated consumption was underscored in some cases by a conscious concern not to become addicted, suggesting that the dominant discourse that drug use is inherently risky, dangerous and addictive, was still present in users' understanding, but called forth more careful management, rather than total abstinence. Trudeau's (2009, 1) interview with a university student reveals the following:

I started to notice my own addictive behaviours...the more you use it, the more you want to use more of it.

In combination, the various strategies reported by our respondents and in media interviews suggest a careful, deliberative management of drug taking in order to maximize benefits and minimize risks. When they managed drug taking so as to directly benefit working practices, this was the most obvious, as the decision to use drugs or not was framed in terms of performative accounting. Particularly evident in accounts of cognitive enhancing drugs are rational cost-benefit analyses and careful, quantified consumption management strategies. In these ways the body of the user is subjected to both neuro-pharmacological modification and

to a kind of accounting discourse of performativity based on maximizing outputs of work. But even where respondents were discussing recreational drug use, a similar logic was applied, where pleasure could be maximized, and potentially deleterious impacts on work could be minimized, by regulating the quantity and quality, as well as the times and spaces, of drug taking.

Framing these articulations of drug use are twin discourses of professional performativity and self-management that extend to the regulation of drug use in both work and in life. This can be seen as a kind of 'managementization' of everyday life (Hancock and Tyler 2009; Maravelias 2011) that extends the performative rationality of professional work and organization into even those activities, like drug use, that in the dominant discourses are diametrically opposed to rationality, good conduct and organization (Acevedo et al. 2009).

Conclusion: New Technologies of Work and Life

Whilst managerial and governmental discourses present a picture of drugs as being incompatible with work, in reality there are a variety of drugs, both legal and illegal, all having different effects on the body. As the use of drugs, and the effects they have, is culturally and contextually mediated, the relationship between drugs and work needs to be studied phenomenologically, with attention to the practices of consumption and to the relationship between consumption and work. In this paper we have contributed to this project by reporting on qualitative interviews with 'sensible recreational drug users' (Warren and Wray-Bliss 2009) who are also successful professionals in either creative or knowledge work and by analyzing news reports on cognitive enhancing drugs and intellectual labour. In both we have identified a counter-discourse that locates drug use not in opposition to rational organization and performativity, but as carefully managed and regulated within a professional performative register in which the central concern is 'the production of a maximum output

for minimum input' (Fournier and Grey 2000, 17). Rather than being interpolated by the dominant governmental discourse of drug control, which homogenizes all drug use and positions the drug user as the irrational 'other' of good order, our respondents, and the users of cognitive enhancers interviewed in media reportage, articulated a subject position outside of this discourse, and yet fully positioned within the professional discourse of self-management and performativity. From this position, some drugs are understood to have the potential to enhance workplace performance and render exceptional performance an everyday event, and the use of other drugs is managed in such a way as to not to impinge on work effectiveness. Underpinning this idea is the implicit acceptance of the dominant management paradigm of performativity (Fournier and Grey 2000). Pushing this idea to its logical conclusion produces a ripe area for further research as exceptional performances may become normalized, requiring employees to work even harder and normalizing the use of performance enhancing drugs.

The emergence of this counter-discourse has its conditions of possibility within the shift from Fordism to Post-Fordism, in which creativity is increasingly at the heart of economic production (Lash and Urry 1999). The rising economic significance of the creative industries has brought the 'bourgeois bohemian' centre stage as a mobilizing and entrepreneurial character for a post-industrial era (Brooks 2000). As well as bringing a bohemian sensibility of drug experimentation into work, this emphasis on creativity has contributed to the erosion of the boundaries between work and life, registered as an increase in working hours as work spills over into life. As this blurring of work and life has come about in a period where drug use is often seen as a normal part of everyday life (Parker et al. 2001; South 2004) the simple incompatibility of 'work' and 'drugs', as put forward in governmental discourses, and codified in HRM policies and managerialist practices of drug testing, appears more out of touch than does a credible and realistic approach to the

management of intoxication and work. As this paper has argued, with a blurring of work and life, work and 'normal' drug use are increasingly likely to overlap. As a result we suggest there may be a much closer relationship between drug use and work under the conditions of late capitalism than either governmental discourse, or critical studies of drug use and testing at work, have hitherto recognized. To fully understand this relationship, however, it will be necessary to undertake more extensive, long-term observational research on drug use and professional work, for example through ethnographic studies of the creative industries that follow workers outside the workplace to trace the overlapping spaces and times of work, and their management through drugs, and of drugs.

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Notes

- 1. Neuro-active refers to the effects of drugs and other substances that act on a human being's Central Nervous System.
- 2. These drugs are defined as improving mental and cognitive functions.
- 3. The broad requirements in the advertisements were that participants had to work in 'knowledge intensive', professional firms or creative based industries, be at least 18 years of age and have some involvement in drug taking in relation to work that they would be willing to discuss.
- 4. An archetypical propaganda anti-drug movie told from the perspective of a high school principal.

 Its plot is about a trio of drug dealers who lead innocent teenagers to become addicted to 'reefer' (marijuana). As a consequence of these teenagers' consumption, their unmanageable behaviour leads to a car accident, a shooting and an innocent bystander being brought to trial.
- 5. Yasmin's use of the word 'terrorist' here appears to be a contemporary variant of the exaggerated use of the designation of 'a terror' in English, since the late 19th century, to describe a naughty child.

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