



Traversing the fantasy of drugs: drugs, consumerism and everyday life

Tammy C. Ayres

To cite this article: Tammy C. Ayres (2023) Traversing the fantasy of drugs: drugs, consumerism and everyday life, *Drugs: Education, Prevention and Policy*, 30:1, 17-30, DOI: [10.1080/09687637.2022.2070056](https://doi.org/10.1080/09687637.2022.2070056)

To link to this article: <https://doi.org/10.1080/09687637.2022.2070056>



© 2022 The Author(s). Published by Informa UK Limited, trading as Taylor & Francis Group.



Published online: 18 May 2022.



Submit your article to this journal [↗](#)



Article views: 2975



View related articles [↗](#)



View Crossmark data [↗](#)



Citing articles: 1 View citing articles [↗](#)

Traversing the fantasy of drugs: drugs, consumerism and everyday life

Tammy C. Ayres

School of Criminology, University of Leicester, Leicester, UK

ABSTRACT

Drug use is a transient rather than a fixed range of practices. Drug markets are constantly evolving as substances, both old and new, move in and out of fashion. If we are to understand this process of evolution, it must be placed against a background of consumer capitalism. Building on the author's previous work, this article seeks to move beyond existing theories to examine the nexus of drug use, pleasure and consumerism. This article draws upon a Žižekian account of the unconscious and the ontology of desire. Drawing on ultra-realism this article responds to the call for new theories of drug use to replace the old and outdated theories of the sixties and seventies. Beginning with the claim that we cannot properly grasp 'real-life developments' unless we examine 'the self-propelling metaphysical dance of Capital that runs the show' this article positions drug use in relation to the key ideological demands of neoliberalism and its subjectivities, including its damaged subjectivities.

ARTICLE HISTORY

Received 22 November 2021

Revised 28 March 2022

Accepted 20 April 2022

KEYWORDS

Drugs; neoliberalism; addiction; normalisation; Žižek; ultra-realism

On a daily basis I consume enough drugs to sedate Manhattan, Long Island, and Queens for a month. I take Quaaludes 10–15 times a day for my 'back pain', Adderall to stay focused, Xanax to take the edge off, pot to mellow me out, cocaine to wake me back up again, and morphine ... Well, because it's awesome.

(Jordan Belfort, *Wolf of Wall Street*)

The above line in the film *Wolf of Wall Street* is immediately suggestive of the role of pleasure and excess in accounts of the neoliberal good life. The film offers a useful account of the libidinal economy of late capitalism. For Jordan Belfort, the film's main character, drugs are a means of coping with pressure, a means of relieving boredom and a reward for ascending to a plain above the social. Belfort is intoxicated by shallow materialism and enthralled to consumerism's sign value system. Disgusted by the humdrum life of the silent majority, he seeks to live a 'better life'. This 'better life' is a life of excess. A life without limits. A life dedicated to the accumulation of wealth and its symbolic effects, and the consumerised experiences that have become so important to accounts of the good life in the neoliberal age. Belfort consumes himself into being (Bauman, 2007) and drugs are just part of that.

The diversification of drugs is tied to the market's globalisation project, as for many, drug use has become another consumer choice. Drugs have diversified to include a range of substances that cross the legal-illegal dichotomy, ranging from traditional legal (alcohol and tobacco) and illegal drugs (cocaine, heroin and cannabis); to psychoactive substances (synthetic cannabinoids); lifestyle drugs (HEDS/PIEDS); dietary supplements; vitamins; herbal remedies; pharmaceuticals;

drinks (coffee, tea and energy drinks); and beauty products (Ayres, 2019, 2020a; Evans-Brown et al., 2012; Hall, 2019). The burgeoning market in substances is about 'new needs' needing 'new commodities' and 'new commodities' needing 'new needs' as the market constantly searches for new ways to make a profit (Dean, 2009) and satisfy people's desires (Bauman, 2007, p. 31) as everyone is invested in project Me (Bröckling, 2007).

Focusing on this array of alcohol and other drugs (AOD) this article acknowledges the recent call for new and contemporary theories in AOD research (Duff, 2014; Malins, 2017; Stevens, 2020). Subsequently, this article draws on continental philosophy and psychoanalysis to proffer a new way of theorising drugs in contemporary society. Building on the author's previous work in this area on substance use (Ayres, 2019, 2020a), drug policy (see Ayres, 2020b), drug testing (see Taylor et al., 2020), and drug-dealing (Ayres and Ancrum, 2022) the ensuing discussion focuses on drug use and 'addiction'.¹ Drawing upon a Žižekian account of the unconscious and the ontology of desire alongside ultra-realism, this article responds to the call for new theories of AOD use to replace the old and outdated theories of the sixties and seventies. Beginning with the claim that we cannot properly grasp 'real-life developments' unless we examine 'the self-propelling metaphysical dance of Capital that runs the show' (Žižek, 2006a, p. 383) it situates AOD use in contemporary consumer society.

Drawing on Lacan's (2006) symbolic-real-imaginary triad of the three psychoanalytic orders the ensuing discussion shows how the three registers not only provide a structure for

human existence and subjectivity, but also capitalism. Using ultra-realism and Žižek's ontology of subjectivity - transcendental materialism² - it subsequently seeks to move beyond existing theories to examine the nexus of drug use, pleasure and consumerism (see Ayres, 2019, 2020a; Hayward & Turner, 2019; Turner, 2018) and extend Linneman and Medley's (2022) concept of *palliative capitalism*³ to include all AODs. As the subsequent discussion shows, substances are a palliative to the ideological demands of neoliberalism and its resultant subjectivities, including its damaged subjectivities, which can lead to AOD use and 'addiction'.

Drugs—The ontological turn: An ontology of desire

Alex Stevens (2020, p. 1) recently wrote 'theory matters'. It does, but it needs to be relevant and up-to-date as society has changed considerably since the 1960/1970s meaning that many older theories (e.g. subcultures and moral panics) are no longer applicable in the contemporary context (Hall & Winlow, 2015), particularly when it comes to AOD research. Although AOD research is multidisciplinary, and thus theoretically, epistemologically and ontologically diverse there has been a recent focus on ontology and reality in recent research - Steven's (2020, p. 1) 'ontological turn.' This has led to the urgent need for 'new ontological investments' in AOD research to revitalise the social sciences and uncover a more nuanced account of 'the real conditions of AOD use' (Duff, 2014, p. 127). Currently, the social sciences (positivism and empiricism) restricts itself to symptomology rather than true aetiology, and 'therefore cannot guide relevant action' (Hall & Winlow, 2015, p. 98). Seeking to address this point, this article focuses on an ontology of desire.

Malins (2017, p. 131), suggests that a more advanced understanding of the ontology of desire can yield 'a better appreciation of the ways that our different emotional and corporeal responses to drugs may be connected to one another, as well as how they might be tied to broader social, spatial, economic, political and moral forces'. It acknowledges how desire and fantasy are central to consumer subjectivity and AOD use. Using Žižek's work on desire, which according to Lacan (2006) is always unconscious, this article seeks to push beyond shallow accounts of pleasure and explore the complexities of the ontology of desire. Drawing upon Freud's early work, Lacan (1998) claimed that desire signifies a lack. It cannot be satisfied. As we draw close to the object of desire, the structure of our desire shifts, and we begin the process of desiring again. Desire sustains, articulates and repeats itself, as desire has been incorporated in to the neoliberal conception of the good life (Žižek, 2002). Subsequently, it is important to conceptualise desire, including how desire relates to *jouissance* before using drive to explain AOD use and 'addiction'.

Desire, consumer capitalism and AODs

In consumer capitalism, the thrill of desiring, and the myth of satisfaction, has become ideologically bound-up with the good life (Žižek, 2002). The overabundance of commodities

and experiences perpetuates the illusion of freedom and choice, which is actually structured and controlled by capitalism, and includes AODs. The diversification of AODs means there is a plethora of pills and potions that not only promise pleasure and enjoyment, they also promise to complete us by satisfying the traumatic void that lies at the heart of human subjectivity. Subjectivity is no longer fixed but performative, as the malleable subject has to be constantly told what it is they want (Žižek, 2008b). Whether it relates to identity, appearance, personality, lifestyle, leisure or pleasure AODs promise to improve us, increase our market value and individual competitiveness. However, choice is an illusion limited to choosing between ranges of legal consumer options, complete with the reassurance that you have made the right choice (Bauman, 2007).

The right substances if bought and consumed promise to transform your personality, sex life and appearance, as well as improve your performance (cognitions, energy levels, immune system, sexual-prowess), physique, health, wellbeing, pleasure, and competitiveness, in addition to promising personal growth, psychic-improvement and spirituality⁴ (Ayres, 2019, 2020a; Evans-Brown et al., 2012; Hall, 2019; Illing, 2019; Koenraadt & van de Ven, 2018). Miracle cures that proffer quick fix solutions to every ailment or imperfection, no matter how serious. They promise the consumer 'the mysterious and elusive X' (Žižek, 1999, p. 1) as the entrepreneur has become the role model of social subjectivity (Bröckling, 2007) and subjectivity has become a 'commodity to be bought and sold on the marketplace as beauty, cleanliness, sincerity and autonomy' (Bauman, 2007, p. 28) that starts in childhood.

As children (the Lacanian mirror phase),⁵ we enter the social symbolic order and become split⁶ subjects where the immediacy of the pre-symbolic Real⁷ is lost forever, absolute *jouissance* is cancelled and the true object of our desire becomes unattainable (Žižek, 1989). Instead, the symbolic order (the Big Other) provides the structure and meaning, which enables us to make sense of our reality and inform the construction of our identity and our life (Žižek, 1989). It is here that consumerism has merged the imaginary 'ideal ego of narcissistic identification' with the symbolic 'ego ideal of mimetic admiration to create the most seductive talking mirror' as everyone attempts to construct their unique identity from mass produced goods (Hall et al. 2008, p. 107), which includes substances (Ayres, 2019, 2020a; Hall, 2019). What we purchase reflects our inner most desires (Baudrillard, 1998) and the truth about the subject as it is 'through fantasy, we learn how to desire' (Žižek, 1992, p. 6).

Fantasy has created idealised self-images, imaginary identities—characterised by fragility and insecurity⁸ (Dean, 2009, p. 67)—and desirable (healthy, ethical and luxurious) lifestyles as the new spirit of cultural capitalism dominates (Žižek, 2014). The consumption of some AODs depict desirable 'celebrity' lifestyles (e.g. champagne) via conspicuous consumption alongside helping consumers to create desirable images and identities (e.g. botox and derma-fillers). However, like most products on the market, these are fundamental fantasies, which safeguard against satisfaction as desire is alienated from us; we are unsure what it is that we desire (Lacan, 2007). In this context, AODs are what Lacan calls 'the

metonymy of desire'; they are the 'stand-in for the void of the impossible Thing' (Žižek, 2012, p. 465). Rather than assuaging 'the anxieties that gnaw away at us from within' (Winlow and Hall, 2016, p. 4), AODs—like everything else—fail to deliver (see NIH, 2019 for example). Instead, the consumer is forever cheated by its deferred promise of fulfilment. This is because the symbolic order can no longer pacify our desires, although this is concealed by fantasy (Žižek, 2012). AODs do not create unique and individual identities and lifestyles. Instead mimetic desire means everyone starts to resemble everyone else (Girard, 1965) as everything is mass-produced (Hall et al., 2008), which engenders a sense of dissatisfaction that defers our desire on to something else. Here desire is converted into 'a desire for un-satisfaction; a desire to keep our desire open,' despite us not knowing what we really want, what this something else is as desire is never our own; it is always mediated (Žižek, 1991, 1992).

For Lacan (1998, p. 235) 'desire is the desire of the Other', as we attempt to become 'the object of the Others desire' and elicit their envy (Žižek, 1997, p. 29). We seek recognition from this Other. We can also desire to be the Other, and desire what the other has/wants (Girard, 1986). We seek social distinction. 'The desire to be something different, something better' (Winlow & Hall, 2016, p. 87). We want to stand out. To be perfect, which sees people resorting to drastic and potentially harmful measures, including the consumption of toxic and harmful substances (e.g. injecting the poison botox into their face or using toxic mercury to whiten the skin) as they endeavour to enhance their image and improve their appearance as they make and remake themselves and their identity (Bauman, 2007). As the desire of the Other becomes our own desires it 'presents itself... as what [we] do not want', a 'misrecognition' of which the subject is 'unaware' leaving a gap between the desire of their ego and their unconscious desire (Lacan, 2007). We are unable to desire things directly. Instead, we learn to desire through imitation, where we see someone desiring and enjoying something, like a coffee or a beer, and we want that and its accompanying pleasures for ourselves (Girard, 1965). AOD users also learn how to appreciate AODs from others via imitation and observation as they learn the pleasure of AODs whilst also hiding their ignorance (Becker, 1963). While many philosophical accounts of desire are structured in relation to joy and the good life, others are tinged with ostracism, exclusion and pain and AOD use is no different.

For some desire is all about pleasure (e.g. John Stuart Mills), while for others desire is tied to sadness, disappointment, violence and pain (Girard, 1965, 1986), which applies to AOD use. AOD use can be pleasurable as well as painful, particularly if excessive. We can pursue pleasure relentlessly, and to the extent that we are negatively affected in innumerable ways. In *The Wolf of Wall Street*, we see this clearly. Good times quite easily turn into bad times and the drive to experience boundless pleasure results in tragedy, which can be seen with AODs as excessive use can easily slip into more problematic patterns of use and 'addiction'. Those with more dependent patterns of use will also use AODs to alleviate the comedowns associated with AOD use, to assuage the pains of withdrawal and to cope with trauma and pain (physical

and psychological) (Ayres, 2020c; Hammersley et al. 2016). Lembke (2021) has called this 'our dopamine economy' while Courtwright (2001) uses 'limbic capitalism'. It can also constitute *palliative capitalism* as AODs alleviate conditions and pressures created by neoliberalism. Lacan (2020) articulates the relationship between desire and pain in particularly vivid detail. Condemned to chase after the objects of our desire without ever reaching a point of satisfaction, we are forever at risk that our achievement to the object of our desire will tip over into the experience of pain. We often desire so much that it hurts. However, even the most painful experiences can also be enjoyable. Therefore, for Lacan '*jouissance* is ... pleasure in pain' (Žižek, 2000, p. 297).

For Lacan (2007) absence is central in his account of the subject and *jouissance*. For Lacan, much of our social behaviour is connected in various ways to an unconscious desire to address the constitutive lack that lies at the centre of subjectivity. We are condemned to search for ways to fill up or cover over our constitutive lack, and this drive becomes more noticeable as symbolic orders collapse and the systems of belief that structure them cannot retain our faith. This, again, can in various ways be seen in *The Wolf of Wall Street*. Belfort's search for a sense of meaning, a life project he can use to fill in his sense of lack, drives him to achieve and accumulate in ways prescribed by the market system. Here, he finds something to believe in. Life is fleeting, and rather than live as a slave, it is better to commit to the accumulation of rare, exciting and luxurious experiences (Žižek, 2014) that allow you to find your inner-self and ascend above the social, which can involve AODs (e.g. Ayahuasca retreats). Lacan's (1986) account of *jouissance* fits neatly with Žižek's (2002) account of the superego injunction to enjoy. Just not too much!

Drugs, the law and capitalism's cultural injunction to enjoy

Contemporary politics is 'the politics of *jouissance*' (Žižek, 2006a, p. 311). Capitalism has deployed the 'pleasure principle for its own perpetuation' (Bauman, 1991, p. 50). The cultural injunction to enjoy has gone from the permissive 'you may' to the prescriptive 'you must' as consumers are encouraged to seize every opportunity for enjoyment if they are to avoid the guilt attached to not enjoying properly and not enjoying enough (Žižek, 2008a, p. 24). Consequently, AOD users are merely heeding capitalism's cultural injunction to enjoy as the consumption of AODs provides pleasure not only in and of themselves, but they also enhance other forms of leisure/pleasure (e.g. dancing, socialising, clubbing, sex, television and music) (Ayres, 2019, 2020a; Boys et al. 2001; O'Malley & Valverde, 2004; Pennay & Moore, 2010). Despite encouraging excessive enjoyment and pleasure, which is 'tolerated, solicited even', it is on the 'condition that it is healthy, that it does not threaten our psychic or biological stability' (Žižek, 2014, p. 4) as (supposedly) seen when people use illicit drugs or are 'addicted' to AODs. Therefore, despite being solicited, excess is punished by the very system that incites it, as pleasure is diluted by the contradictory logic of

sacrifice (Žižek, 2014). In line with the neoliberal ethos of individualisation, consumers must adopt a healthy choice that conforms to neoliberal norms indicative of success or they only have themselves to blame (Žižek, 2008b).

In the contemporary marketplace, products are stripped of their malignant properties, which includes substances. Consumerism has deprived enjoyment of its excessive dimension. We now have beer without alcohol and coffee without caffeine (Žižek, 2008a, 2014). In 'a kind of pseudo-Hegelian immediate coincidence of opposites: action and reaction should coincide' as removing these malevolent dangers has become an investment of biopolitics (Žižek, 2003a, p. 1), which is reflected in drug policy's focus on harm reduction as pleasure is regulated 'by scientific knowledge propagated by the discourse of the university' (Žižek, 2019). The marketplace is awash with products promising to minimise harm (e.g. drug testing kits) as individual responsibility is emphasised despite individual drug risks often being beyond individual control (Sumnall, 2017 cited in Hillier, 2017). As responsible agents of choice, however, AOD users, particularly those that use illicit unregulated substances, are expected to minimise harm, select the healthiest enjoyment option available and consume in a tempered fashion that demonstrates self-constraint and moderation to ensure that their pleasure is responsible and risk-free (O'Malley and Valverde, 2004). In contemporary society only a controlled-loss-of-control is accepted (Measham, 2004) as pleasure and constraint comprise today's tolerated hedonism as the command to enjoy has replaced the symbolic law of prohibition (Žižek, 1999). Today, committing to pleasure is how we follow the rules. The law tells us what to do, which means we no longer have to feel tormented by the unyielding demands of the superego as we are encouraged to find enjoyment in acceptable/lawful activities and commodities, despite their failure to deliver.

The law intervenes in desire (Dean, 2004). Desire 'would be possible to fulfil if it were not for the prohibition impeding its free reign' (Žižek, 1991, p. 267). Therefore, the law liberates us from the demands of the Other by opening 'our access to desire' (Žižek, 1991, p. 265). The superego emerges where the public law fails, and is 'compelled to search for support in an illegal enjoyment' (Žižek, 1994, p. 54). Put simply, the standard Freudian account of the superego suggests that it is the site of ethical regulation. The raw drives of the id are adapted by the ego and regulated by the superego. The superego is the voice of the law in our heads; it bombards us with the requirements of the symbolic community. Most modern accounts of the superego tell us that the superego tells us not to pursue our desire. However, with the rise of consumer capitalism, Žižek (1994) maintains, the superego's role has evolved. Rather than bombarding us with injunctions not to pursue our desire, the superego now instructs us to do the opposite: consume now. Take drugs. Do not miss opportunities to avail oneself of pleasure. This, today, is how we abide by the rules of the symbolic community (Žižek, 2002). In truth, the superego was never a site of ethical regulation. In enjoining us to abide by the rules of the symbolic community, it can push us towards profoundly

unethical acts. Of course, behaving in an unethical way is also sometimes, how we follow the rules.

We subsequently obey the law, not 'simply because it is the law' (Žižek, 1989, p. 35), but because adhering to the law is also enjoyable and stops us feeling guilty (Dean, 2004); *jouissance* is the libidinal bribery to those that serve the law, even in excess (Žižek, 1994). As such, the use of illicit drugs is prohibited and only the controlled consumption of commodified, legal products is acceptable, and even then only in appropriate (licensed) venues and in permitted zones (e.g. alcohol zones), as unacceptable consumption is controlled and criminalised (Measham & Moore, 2008), despite excessive intoxication being promoted (e.g. via happy hours, BOGOF offers and sugary alcopops)⁹ (Ayres, 2019; Smith, 2014). This is because excess is already part of the system (Žižek 2006a). In 'today's hedonist-utilitarian permissive society,' excess has not only been tamed but also exploited (Žižek, 2014, p. 4) as *jouissance* always veers off into excess (Hook, 2016).

In fact, moderation and the (supposed) health benefits of privileged legal substances is widely advocated but only if they are consumed temperately (e.g. red wine and champagne)¹⁰ as self-improvement remains linked to controlled consumption and the entrepreneurial self (Bröckling, 2007). Here the benefits of illicit substances are disavowed, while excessive use of substances becomes a problematic mode of consumption that is presented as both expected as well as problematic—like binge drinking—as the negative effects are emphasised via the media and public health campaigns, which often sees the users vilified (Patterson et al., 2016). This is because as subjects of the law we are expected to forgo (excessive) *jouissance* in the interests of individual and public good, as fantasy attaches us to the law, including how to understand it (Žižek, 1997) as *jouissance* is structured by fantasy (Lacan, 1986). However, prohibition also creates the desire to transgress the law (Žižek, 2003a) as people not only consume legal substances to excess but they also consume illicit drugs. In fact, without 'transgression there is no access to *jouissance*' (Lacan, 1986).

Drug use—and crime more generally (Katz, 1988)—is pleasurable because it is transgressive. However, it also provides a sense of belonging, closeness/love and community that crosses substances, cultures and epochs (Courtwright, 2001; Hunt & Evans, 2008; Kavanaugh & Anderson, 2008; Smith, 2014). 'What really tells people that they are members of the same group is... knowing what laws to break' as society tolerates minor indiscretions to make conformity more bearable (Dean, 2004, p. 22). However, the unity law creates is coercive. Therefore, AOD use not only provides pleasurable, desirable and luxurious experiences, but their use also breaks up the monotonous banality of everyday life because transgressing the law produces a surplus enjoyment that comes from the 'knowledge that our pleasure involves the thrill of entering a forbidden domain' that also involves 'a certain *displeasure*' (Žižek, 1991, p. 239). As we are instructed to transgress, however pleasure is withheld. Here AOD use also involves a certain displeasure either from breaking the law or excessive intoxication as users 'emphasise the value of unrestrained bodily pleasure facilitated by the heavy use of illicit drugs' (Pennay & Moore, 2010, p. 557). Although the

consequences of excessive intoxication may seem unpleasant and undesirable, it is part of the fun, indicating a good night out (Griffin et al. 2009) as everyone is told to *Jouiss*!

Actually, AOD use has become part of contemporary society's work-hard-play-hard lifestyle as people adopt a pick-n-mix approach to pharmacological leisure and pleasure (Parker & Williams, 2003). Like most transgressions, drug use has been incorporated into the scripts of consumerism, as transgression is not only appropriated by capitalism, but also solicited by it (Dean, 2004; Žižek, 2000) as drug prohibition and its enforcement is highly profitable (Ayres, 2020b; Paley, 2014). However, 'the greatest transgression, the most traumatic, the most senseless thing, is law itself: the 'mad' super-egotistical law, which inflicts enjoyment' (Žižek, 1991, p. 30) and the AOD user heeds. Rather than undermine the law, however these transgressions merely serve to reinforce the rules and make us more compliant to them as guilty enjoyment is participated in as part of social normality, illustrating 'consumer capitalism's rebellion/conformity hybrid' (Hall et al. 2008, p. 203). Actually, despite being illegal, drug use—once confined to deviant subcultures—has become normalised (Duff, 2003; Parker et al. 1998; Pearson, 2001; Pennay & Moore, 2010). In fact, cannabis has become so normalised it is 'no wonder [cannabis] is so popular among liberals who want to legalize it—it already IS a kind of opium without opium' (Žižek, 2003b, p. 2). Therefore, AODs allow users to forget about everyday life. A life where they are exploited, oppressed, overworked and overcontrolled but without control, making the consumption of AODs a normal part of their everyday existence and a tool to cope with the demands of consumer capitalism (Ayres, 2019, 2020a).

Prioritising *jouissance* normalises the AOD user as they obey the demands placed on them to prioritise enjoyment and to consume to excess (Žižek, 2002). Once drugs are consumed to excess, they start to engulf the subject, leading some to 'addiction'. Drug users are encouraged to transgress the boundaries of acceptable consumption integral to the social order, which creates a hierarchy of consumer competence (Bauman, 2007; Douglas, 1966), hierarchies that are also seen among AOD users (Aldridge et al. 2011). Hierarchies 'have replaced the old class differences' that have been created by 'irrepressible desires' (Baudrillard, 1998, p.ix). This is because desire is inherently transgressive, secured by the law and sustained by enjoyment (Dean, 2004). 'In a society where everything is permitted, enjoyment takes the form of a paradoxical hedonistic asceticism' (Žižek, 2006b) and nowhere is this more evident than in the consumption of AODs as users subsequently fall into two main categories: controlled/unproblematic use and uncontrolled, problematic/addicted use.

According to Žižek (2014, p. 4) the controlled unproblematic users are *enlightened hedonists* 'who carefully calculates [their] pleasure to prolong [their] fun and avoid getting hurt', while the uncontrolled problematic user is a *jouisseur proper* who is 'ready to consummate [their] very existence in the deadly excess of enjoyment' as humans are driven to enjoy life to excess (Žižek, 2006a). This surplus-enjoyment of AODs connects with the basic functioning of capitalism. However, because enjoyment is ordered it becomes impossible to

obtain as real enjoyment and pleasure become unachievable and for some painful—'*jouissance* is suffering' (Lacan, 1986, p. 184)—as AOD use is self-administered *jouissance*.

The enlightened hedonist and the *jouisseur* proper

The majority of people who consume AODs are enlightened hedonists (Ayres, 2020a). They abide by the law (bar their use of illicit drugs), and partake in the controlled-loss-of-control tolerated in contemporary neoliberalism where they calculate their pleasure to maximise their enjoyment and minimise the risks, as they partake in excessive but determined intoxication (Measham, 2004). Adhering to neoliberalisms coupling of pleasure with constraint, most AOD users adopt a range of harm reduction strategies to minimise the risks and to stop them from being too out of control as they attempt to circumvent the negative consequences associated with excessive intoxication and AOD use. This is also part of maintaining a desirable and competitive identity as a form of personal management as the importance of image and representation is paramount, however it also engenders subtler forms of intimidation and violence as people are often envious of the competition (Hall et al. 2008; Hutton, 2006; Smith, 2014). A kind of jealousy and repulsion is engendered when we see other AOD users enjoying themselves. Here we believe they have not only stolen our *jouissance* from us, but they appear to be enjoying more than us as we are constantly made to feel guilty for not seizing every opportunity for enjoyment and for not enjoying enough (Dean, 2009; Žižek, 2014), particularly when it comes to pharmacological leisure/pleasure. Enjoy, just not too much!

To ensure pharmacological pleasure is controlled AOD users not only implement strategies to reduce risk but also to prolong the (leisure) experience (Ayres & Treadwell, 2012; Measham, 2004; Peacock et al. 2013; Pennay et al. 2015). Despite proffering safety however, these strategies often lack a rigorous evidence base (Hunt, 2003) and instead provide the AOD user with an 'artificial shine of safety' (Winstock et al. 2001, p. 1139) since they are linked to an array of harms, which include antisocial behaviour, accidents, sexual assaults, violence, rape and impaired judgement resulting in risky behaviours like going home with strangers and/or partaking in unprotected sex (Ayres & Treadwell, 2012; Berger et al. 2013; Hughes & Bellis, 2003; Peacock et al. 2013; Smith, 2014; Standerwick et al. 2007). Here AOD users prioritise immediate gratification, responsibility is shirked and excessive intoxication is encouraged since it is integral to the good life and good night out demanded by capitalism's cultural junction to enjoy. The health warnings underpinning this unconditional injunction incorporates the message 'you should enjoy a long and healthy life', which means you can enjoy anything, as long as it is deprived of its substance (Žižek, 2003a, 2003b). To facilitate this, products proffering to minimise AOD risks (e.g. drug testing kits, alcohol free gin and citric/vit-c) are sold, but these are also fantasies. Therefore, despite trying to partake in carefully calculated hedonism, the excessive pleasure-seeking promoted by consumer capitalism takes over, which not only facilitates the slip from

recreational to more problematic patterns of AOD use, but actively encourages it. Pleasure is prioritised above anything else (Žižek, 2002). Selecting, the utmost pleasure is the only rational option (Bauman, 1991). This excess characterises the death drive, which is nothing other than what Lacan (2006) calls *jouissance*. The consumption of drugs provides direct access to *jouissance* via the neuronal pleasure centres in the brain.

The consumption of AODs subsequently provides pleasure via an escape from symbolic castration by providing 'a purely autistic *jouissance*, a *jouissance* accessible without the detour through the Other' (Žižek, 2006a, p. 311). This is because AOD use eliminates the 'symbolically structured formations of the unconscious in a sea of toxicity' (Loose, 2002, p. 221), which provides users with a sense of wellbeing, warmth, comfort, relief, relaxation and escapism that for some, involves blocking everything out, including life (Ayres, 2020; Boys et al., 2001; Hammersley et al., 2016; Hunt & Evans, 2008; Loose, 2002; Warburton, et al., 2005). These feelings however, are only temporary, meaning that more AODs need to be taken to achieve the same high as the ego searches for pleasure. Tolerance to AODs increases the more they are used meaning the user needs more and more to obtain the same feeling, which is when many controlled AOD users slip into more problematic patterns of use. In fact, self-medication with AODs occurs on a continuum of severity, from low-level use¹¹ (*enlightened hedonists*) to more problematic/addictive patterns of use (*jouisseur proper*).

'Addicts' often use AODs as a form of self-medication, particularly to cope with traumatic experiences (Ayres, 2020; Hammersley et al., 2016) as drugs constitute a 'product to end all products' (Bjerg, 2008, p. 16). As Burroughs (1972, p. 9) highlights 'junk is the ideal product...the ultimate merchandise. No sales talk necessary. The client will crawl through the sewer and beg to buy' making it a commodity par excellence (Žižek, 2006a). It is unsurprising then that drugs are prohibited, as drugs are 'an object cause of *jouissance*' (Miller, 1989, p. 134). Drugs are the 'real Thing' (Bjerg, 2008)—they provide a (semblance) of Real *jouissance*—which users describe as 'being wrapped in a ball of cotton wool', inducing a state of calm, a sense 'of not caring' or 'having to worry' (Warburton et al. 2005, p. 27). As such, drugs implode the desire for other commodities by regulating and keeping *jouissance* at an ideal level. Instead, the consumer desires (crave) more drugs which become more important than anything else, meaning 'addiction' is not welcome in contemporary society as drug 'addicts' 'take the side of *jouissance*' (Loose, 2002, p. 174) and 'surrender to the death drive' (Žižek, 1989, p. 81). The craving AOD user is drive.

In the standard Freudian account, the death drive is the unconscious drive towards self-annihilation. The subject seeks the ultimate end-point, which is death. Lacan's (1988) adapted account of death drive, positions the death drive as the dead part of our subjectivity that demands recognition, as '*fantasy is the very screen that separates desire from drive*' (Žižek, 1997, p. 32). Fantasy covers the insuperable deadlock, the impossibility of fulfilling desire (Žižek, 1997). Here fantasy and desire inform and structure the 'intimate aspects of our internal life' (Winlow, 2014, p. 168) and offers the subject a

'path out of the dissatisfaction produced by the demands of social existence and everyday reality' (McGowen, 2007, p. 23). Consequently, for Žižek (2012) fundamental fantasy holds subjectivity together and is depended upon by the symbolic order, but 'beyond fantasy, we find only drive' (Žižek, 1989, p. 124), 'drive is literally the countermovement to desire' (Dean, 2006, p. 1).

The death drive to Lacan (1988, p. 326), however is 'the mask of the symbolic order', a determinant of subjectivity and the basis of the subject's relation to the world. The desire for recognition from the Other according to Lacan (2007) also structures our drives. The death drive goes beyond the pleasure principle it 'knows nothing of prohibition and certainty does not dream of transgressing it. The drive follows its own bent and always obtains satisfaction' (Miller, 1996, p. 227). Therefore, according to Žižek, (2001, p. 159) 'drive and desire are ... inherently interwoven: not only does desire always rely on some partial drives which provide its stuff; drives also function only insofar as they refer to the subject whose desire I desire.' Consequently, the preceding discussion shows how substances are linked to desire and drive, as well as the (libidinal) economy of capitalism.

AOD use and the death drive

Like Jordan Belfort, the 'addict's' deadly excess of enjoyment goes beyond everyday life, and exemplifies the death drive. An excessive impulse that exists beyond mere existence or biological life that lives through us, the death drive is embodied in life itself, which comes from our fundamental alienation (Hook, 2016; Žižek, 2001). Here the *jouisseur proper* desires something more than ordinary pleasure and libidinal gratification so they might live 'an excess of obscene life' (Žižek, 2006a, p. 82), which according to Žižek (2003a) is what makes life worth living in contemporary society. This is the good life. As such, the 'addict' seeks to destroy their symbolic self as humans pursue a *jouissance* beyond that which is good for them (Hook, 2016) recognising that 'human beings are profoundly maladapted creatures' (Johnston, 2008, p. 184).

Drive is thus the animating force that humans get caught up in. It is 'quite literally the very 'drive' to break the All of continuity in which we are embedded, to introduce a radical imbalance into it', which throws the user out of kilter with their environment (Žižek, 2006a, p. 63). In a Freudian twist, the death drive cuts the 'umbilical cord with nature' as we partake in self-destructive acts that potentially disrupt and cause problems in our everyday lives (Žižek, 1989), which is why 'addiction' is (supposedly) bad for us and why 'addiction' to some (unprivileged) drugs is prohibited by law. These 'excesses through which the Real disturbs the homeostasis of life ... generates artificial monsters' (Žižek, 2001, p. 182). Drugs and their users are these artificial monsters (Ayres & Jewkes, 2012).

Drugs are blamed for destroying the individual as well as society (Ayres & Jewkes, 2012). A scourge that needs to be eradicated if things are to ever improve, which maintains the social and racial hierarchies integral to the ideological

machinery that also detracts from the objective violence of consumer capitalism keeping the ideological fantasy alive (Ayres, 2020a, 2020b; Žižek, 2008a). However, these fantasies are nothing but illusions of capitalism, as mass production, pursuit of profit and the production of surplus value reflect Lacan's (2006) compulsion to repeat, which the AOD user also derives pleasure from, trapped inside capitalism's continual movement. Here drive provides a suffocating *jouissance* in its 'self-enclosed circular movement' (Žižek, 2000, p. 311). Therefore, they find pleasure not only in the substances themselves, but also in the repetitive acts surrounding AODs no matter how painful or traumatic they are.

AOD use/addiction is both pleasurable and painful as the 'human psychic apparatus is subordinated to a blind automatism of repetition beyond pleasure-seeking, [and] self-preservation' (Žižek, 1989, p. xxvii) as compulsive repetition is 'embedded within the substance of being, as a 'naturally' generated glitch in human nature' (Johnston, 2008, p. 183). Pleasure and pain are derived from the repetitive act of taking AODs and continually getting high as well as the cyclical behaviours/activities that accompany AOD use, which users/addicts not only become fixated on (e.g. needles, places, people), but which can also become as pleasurable as the drugs themselves (Frederick, et al., 1973; McBride et al. 2001). This is 'the circuit of the drive' (Lacan, 1981, p. 178). Here the subject has an agentic role in their own self-sabotage as these traumatic repetitions entrap them in a self-perpetuating cycle of AOD use and 'addiction' (Wanberg & Milkman, 1998). This 'repetition automatism (*Wiederholungszwang*)' according to Lacan (2006, p. 5) finds its basis in 'the insistence of the signifying chain' as this repetition is symbolic repetition. The 'addict' repeatedly takes drugs not just to obtain pleasure, but also to avoid the pain of withdrawal, which according to Lacan (1986) pushes pleasure into the background. Therefore, the 'addict' carries with the negative as a subject of the drive in their repetitive circuit of *jouissance* (Žižek, 1993). There is also a 'perverted pleasure provided by the very painful experience of repeatedly missing one's goal' and circling around the unobtainable object (Žižek, 2000, p. 297), which is also characteristic of AOD use/addiction.

Repeatedly missing one's goal provides *jouissance* as we 'shift from desire to drive, we pass from the lost object to loss itself as an object' (Žižek, 2012, p. 368). This push to directly enact loss makes a success out of failure, as drive knows this is the shortest way to accomplish its aim and find satisfaction (Žižek, 2001, 2006a). 'Addiction' is characterised by a repeated failure to abstain from AOD use as some 'addicts' seek to escape from the compulsive behaviours and destructive consequences of 'addiction'. However, this circling produces constituent anxiety as our libido gets 'stuck on a particular object, condemned to circulate around it forever' (Žižek, 2006a, p. 62), which is what happens with AODs. AOD users do 'not give up a (self-destructive) duty of desire' (Hook, 2016, p. 28). Instead, they demonstrate 'an ethical compulsion to mark repeatedly ... a lost cause' (Žižek, 2000, p. 273) as they repetitively use AODs no matter now painful or pleasurable, they are. People are 'addicted' to AODs like many other sublime objects, because they always fail to

deliver, the object is always a void, which leaves them wanting more.

The symbolic drive of the subject is subsequently set to repeat something beyond the narcissistic imaginary at the expense of the ego itself as some users get stuck in a repetitive short-circuit of AOD use/addiction. Here they constantly chase their first high (Bornstein & Pickard, 2020) as drive seeks to return them to a state of complete and phallic *jouissance* (Lacan, 2007). Therefore, the 'addict's' fixation on AODs and procuring AODs becomes as satisfying as the drugs themselves, providing users with a sense of purpose and structure in their otherwise chaotic and often meaningless lives (Preble & Casey, 1969). Here the AOD user circles endlessly around the object of their desire as their subjectivity disappears and material reality is suspended as addicts get 'caught in the endless repetitive cycle of wandering around in guilt and pain', they become the 'undead' (Žižek, 2006a, p. 62). Here the addict exists in the uncanny gap between two deaths, which can be filled by 'either sublime beauty or fear-some monsters' (Žižek, 1989, p. 150).

The death drive leads 'addicts' to a second death, which results in them being 'eliminated from the world of the living' (Lacan, 1992, p. 280). This also 'signals a change in *jouissance*'—'what to others would be almost unbearably painful—is now *enjoyed*' (Hook, 2016, p. 28). Drugs in this context turn people into monsters—the living dead¹²—plaguing, corrupting and causing fear in contemporary society as certain users, of certain (unprivileged) drugs constitute a 'Zombie Apocalypse' (Boyd, 2018), putting AOD users so far beyond the boundaries of normal human existence that it constitutes an extreme form of othering. 'Addicts' are scapegoated to relieve the tension we derive from our inability to desire directly, always desiring what the other desires and always trying to turn ourselves into the object of the Other's desire (Girard, 1986); Others who we see enjoying more than us and who stole the *jouissance* we are deprived of from us (Žižek, 1997). Subsequently, 'addicts' become Girard's (1986) generative scapegoat. 'Addicts' supposedly lead uncivilized, diseased and repugnant lifestyles characterised by excess and self-destruction. They are 'out of control of their own lives and unfit to be in charge of anyone else's' (Maher, 1997, p. 2). They are 'junkie scumbags' (Radcliffe and Stevens, 2008). Here the destructive nature of illegal drugs is depicted in the medicalised discourse of disease and contagion. Drugs are seen as a scourge on society, an epidemic infecting the masses and destroying civilisation as well as the individual, to create barely functioning zombies ready to bring about the end of the world.

In this post-political era of biopolitics—where the protection of human life is paramount and fear dominates (Žižek, 2008a)—the addicted are framed as a threat that needs to be managed, in any 'decent' society, they constitute 'matter out of place' (Douglas, 1966, p. 36). They are Bauman's (2007) flawed consumers—people with no market value—meaning that there is no good reason for their existence. Consequently, 'addicts' experience symbolic death—they are deontologised—existing outside the political realm effectively becoming *Homo Sacer*, reduced to Agambenian bare life (Agambon, 1995) as they represent 'the pure excess (the

empty form) which remains when all the content of human life is taken away from the subject' (Žižek, 2012, p. 660). Consequently, their excommunication is justified and their citizenship suspended¹³ as a sense of foreboding is created. Unless a war is waged and won against these evil wrongdoers, humanity will be destroyed, thus legitimising state intervention whilst also illustrating the dangers associated with relaxing or abolishing prohibition. The 'addict' acts as a warning to us all (Bauman, 2007). They haunt the living, biologically alive but symbolically dead (Žižek & Dolar, 2002). They become 'the walking symbols of the disasters that await fallen consumers... the yarn of which nightmares are woven' (Bauman, 2007, p. 124). This is because the 'addict' pursues a lethal agenda that not only contravenes societal norms/laws but also risks everything, including their own life. Consequently, they deserve everything they get for being irresponsible toxic subjects (Žižek, 2009).

The 'addict' hell bent on pharmacological oblivion accepts 'the death drive, as a striving for radical self-annihilation' (Žižek, 1992, p. 42) as enjoyment is found in provoking one's own ruin, which is often seen in addiction. 'Addicts' often demonstrate a desire to die or at least an indifference to death (Coleman et al. 1986; Connery et al. 2019; Langman & Chung, 2013; Meehan et al. 1996) as they are often shattered by traumas of the past, many of which induce shame and pain, meaning they want to wipe the slate clean and start again. This is facilitated since the 'addict's' symbolic identity is destroyed, which 'opens the way for the creation of new forms of life ex nihilo' (Žižek, 1989, p. 149). Here the death drive wills the 'addict' to begin again (Lacan, 1992). Premised on the notion that addiction is incompatible with neoliberal subjectivity (Pennay & Moore, 2010), 'addicts' seek to discard their 'past... seeking new beginnings', struggling to be reborn, which is 'a duty disguised as a privilege' in consumer society (Bauman 2007, p. 100). People live an ideological existence as cynical distance blinds them to 'the structuring power of ideological fantasy' (Žižek, 1989, p. 33). Here desire seeks to return the 'addict' to their pre-symbolic primordial self the only way it can, as a drive towards death, as a desire to 'return to the state of equilibrium of the inanimate sphere' as the death drive is one of nostalgia (Lacan, 1986, p. 212). The death drive provides the AOD using subject with 'an opening, an empty frame' (Hook, 2016) 'to make a fresh start' (Lacan, 1986, p. 212), which can only be achieved via drug treatment and for some abstinence.

AOD policy, treatment and punishment: Redemption?

'Addicts' can wipe the slate clean and start again, but redemption can only be bought from the contemporary marketplace, as the law structures desire (Žižek, 1997). The law also determines who deserves treatment and who deserves punishment. However, like most things in neoliberalism the façade of decency surrounding drug policy and its twin-track approach comes from its medicalised discourse, supposed experts and perceived legitimacy, despite the harms arising from its implementation and swathes of

marketplace solutions,¹⁴ which come at a cost and often implement unscrupulous business practices (Beetham et al. 2021; Mann, 2021; Snitzer, 2017). Those unwilling to seek redemption voluntarily, may find themselves coerced or even forced into treatment by the ideological state apparatus, as drug prevention and treatment is big business (Paley, 2014; TMR, 2019) and unacceptable consumption is controlled and criminalised as 'addicts' are punished for their sadistic and self-destructive desires. They act as a warning to us all and keep the ideological fantasy alive.

It is this ideological fantasy—an (unconscious) fantasy structuring our social reality (Žižek, 1991)—that conceals the impossibility of satisfying our desires. Despite the perceived enjoyment and pleasure obtained from consumerism, it is ephemeral as we are incapable of experiencing any enduring sense of happiness and contentment. Here pleasure is quickly followed by a new sense of want. A desire to keep our desire open, despite us not knowing what we really want, which 'converts into a desire not to know, a desire for ignorance' as ignorance masks enjoyment (Žižek, 1991, p. 144). This desire for ignorance is reflected in drug policy/legislation, the consumption of new psychoactive substances despite a dearth of knowledge on them or their harms (see Evans-Brown et al., 2012), and the new market in lifestyle drugs, dietary supplements and herbal remedies, products that have not only been deemed a waste of money (Jenkins et al. 2018; Pope et al. 2014), but have also been deemed harmful,¹⁵ which is also true of other legal substances. Whether we are talking about pharmaceuticals, alcohol, tobacco, caffeine and/or sugar, the harms are well established (Cappelletti et al., 2015; Lustig, et al., 2012; Singer & Baer, 2009), but routinely disavowed. Instead, we are told illegal drugs are worse, rationalising their prohibition, despite the lack of evidence underpinning this demarcation as legal substances are often as, if not more harmful than their illicit counterparts.

The demarcation between legal and illegal substances is not premised on scientific evidence (Nutt et al. 2010) illustrating that 'the law is never grounded in truth' (Dean, 2004, p. 21). Instead drug prohibition and its war on drugs, like its substances, is tied to neoliberalism and its pursuit of profit (Ayres, 2020a, 2020b; Courtwright, 2001; Paley, 2014). Both epitomise neoliberalism's hegemonic ideology, discourse and ethos by distinguishing between the deserving (non-drug user or controlled illicit drug user) and undeserving AOD using citizen (uncontrolled problematic/addicted substance user) to produce excluded and monstrous populations that warrant social control and punishment, perpetuating capitalism via its system of divide and rule (Žižek, 1997). This has created a system where some substances have become privileged (sugar, alcohol and tobacco) while others have been excluded and criminalised (opium, cannabis and cocaine)—regardless of their harms—which has resulted in a 'global drug apartheid'¹⁶ (Taylor et al. 2016). Instead, neoliberalism and the war on drugs constitute 'a failed if not disingenuous and utopian project masking the restoration of class power' (Harvey, 2007, p. 42). 'A guerrilla campaign of penit harassment of low-level street dealers and poor consumers' (Wacquant, 2009, p. 61) as the inequalities evident in the war on drugs—defined by race/ethnicity, gender, class, religion

and geographical affiliations—replicate those evident in capitalism, which have been exacerbated by neoliberalism and manifest as symbolic violence (Žižek, 2008a). In the war on drugs, developed nations in the global north have spent trillions imposing their problems (and policies) on developing countries in the global south, sometimes without the countries' consent and sometimes in breach of international treaties, which can be described as an eco-crime (see Ayres, 2020b) as well as a form of recolonization (see Bowling 2010) in an era where calls for decolonisation are rife.

It is not just the drug trade that is profitable but also the war on drugs, which has done little, if anything to curb trade or reduce supply. Instead the war on drugs merely offers a distraction from more pressing issues—it is opium for the people (Debord, 1970)—as exploitative, draconian drug policies open resource-rich countries and territories to capitalist markets and international trade in what Paley (2014, p. 14) calls drug war capitalism. In fact, evidence suggests that anti-drug policies sustain and prioritise the global expansion of capitalism, and have been a tremendous source of profit for state-corporate entities and have facilitated global exploitation by the West/Global North of the East/Global South (Ayres, 2020b; Courtwright 2001; Meehan 2011; Paley 2014). All prohibition has done is increase the prison industrial complex and those housed within it (Wacquant, 2009) as some AOD users are punished for their consumption practices despite being driven by the demands of capitalism. Instead, fantasy serves to conceal the trauma of the symbolic order (Žižek, 2008a). Fetishistically disavowing the harms arising from the system itself, including its objective violence, as people seek their own redemption for being nothing more than an egotistical consumer in a market that proffers freedom, choice and perfection but is rife with guilt, as our sinful desires are always compromised (Žižek, 2006a). Instead, 'as long as desire remains within the channels that capitalism provides... there is no possibility for satisfaction, just a false happiness that serves as... profound dissatisfaction' (McGowen, 2016, p. 9), which perpetuates further desire and drives capitalism forward (Bauman, 2007; Winlow & Hall, 2016; Žižek, 1997, 2008b).

Regardless of the AOD product (licit or illicit), it is branded,¹⁷ and the same marketing strategies implemented (see Martin, 2014).¹⁸ Fair trade business models are adopted. AODs are sold as 'ethical', 'conflict-free', 'fair trade' and 'organic' to entice consumers (see Martin, 2014). To show they care, customers pay extra to participate in communal projects of charity, social responsibility and ecology (Žižek, 2014). However, these are merely marketing ploys to make consumers feel better about themselves and capitals 'ruthless pursuit of profit' (Žižek, 2008a, p. 22). Strategies that disavow the exploitative realities and harms underpinning them (Ayres, 2020a; Žižek, 2014) as people competitively search for happiness and success, while dutifully obeying the cultural injunction to enjoy, as *jouissance* has been made obligatory (Žižek, 2002), illustrating capitalism's paradoxical nature. AODs—their use, production, supply, prohibition and treatment—are not only *palliatives to capitalism*, its demands, lifestyles and subjectivities, but it also epitomises many of the contradictions inherent in consumer capitalism as acceptable AOD use is that proscribed by ideology and its market systems not their harmfulness (Ayres, 2019, 2020b).

Conclusion: Some final thoughts

The preceding discussion shows that AODs are fatasmatic objects that capitalism sublimates consumers to desire as they seek to construct desirable identities, images and lifestyles, which maximise their market value by giving themselves that competitive edge. Whether it is a Starbucks coffee or the use of cocaine or Adderall by professionals to facilitate long-working hours (Krill et al., 2016), substances help people keep up with the demands and pressures placed on them by neoliberalism—proffering a *palliative to capitalism*—as fantasy reveals 'desires they were not even aware they possessed' (Žižek, 2001, p. 21). Although we think we are adept at resisting the influence of consumer capitalism, our acceptance and submission to ideology is sublimated and penetrates the core of subjectivity illustrating the structuring power of the ideological fantasies. Capitalist ideology compels us to enjoy its commodities, including AODs. Our very existence depends on it.

The diversification of AODs, therefore offers 'new perverse and excessive desires' and 'modes of pleasure' alongside products that promise to satisfy and complete us (Žižek, 2006a). Their consumption is about hedonism and enjoyment as well as coping with the pressures of neoliberalism and its resultant and sometimes damaged subjectivities illustrating that the concept of *palliative capitalism* should be extended to include all AODs. Whether it relates to identity, appearance, personality, lifestyle, leisure or pleasure AODs promise to fill the void and increase our market value. To make us the object of the Other's desire as everyone is enthralled by consumerism's system of signs, in a culture marked by a constant pressure to be someone else (Bauman, 2007). Here the big Other confers an identity and lifestyle on the decentered subject as our bodies, identities and lifestyles become objects of narcissistic investment, survival strategies essential for human adaptability and continued existence in contemporary neoliberalism as post-modernity has seen a shift in the notion of subjectivity, a shift which requires new theories as proposed by the preceding discussion.

AODs promise to address the radical negativity, which haunts contemporary subjectivity (Žižek, 2000). AODs promise a better life. A life of excess. A life of authentic experiences. AODs satisfy the demand for *jouissance* without castration. AODs offer a path out of dissatisfaction (McGowen, 2007). AODs are about obtaining and maintain a desirable image, identity and work-hard-play-hard lifestyle. They allow the user to ascend the social and find their Real selves whilst also escaping from the mundane banalities of everyday life. AODs satisfying the cultural injunction to enjoy, just not too much! As subjects of drive, 'addicts' realise they are the locus of an excessive, unbearable, suffocating *jouissance* 'grounded in a constitutive surplus as drive is the impersonal compulsion to engage in the endless circular movement of expanded self-reproduction' as everyone seeks to reinvent themselves, be someone else, as they are all invested in project Me (Bröckling, 2007). However, the more AODs are used to cope with life the more likely the user is to develop problematic/addictive patterns of use (Ayres, 2020a, 2020c; Boys et al. 2001; Boys & Marsden, 2003). 'Addicts' become trapped

in 'the circuit of the drive' (Lacan, 1981, p. 178), traumatic repetitions that ensnare them in a self-perpetuating cycle of AOD use and addiction, which is both pleasurable and painful (Wanberg & Milkman, 1998) as they heed and cope with the demands of consumer capitalism.

The collapse of the symbolic order has led to a fragmentation of meaning condemning the 'dispersed subject' to search for ways to address their constitutive lack as they are always in the process of becoming, 'free to float' between the 'multitude of subject positions,' lifestyles and experiences that fantasy has created (Žižek, 2008b, p. 7). AODs proffer that, and mask the fact community and society do not exist (Žižek, 1989) as community has been replaced by consumption and its 'increasing number of bogus' products, services and innovations as everyone competes with each other for perfection, success, and social distinction (Baudrillard, 1998; Hall et al. 2008). Instead, AODs distract from the inequalities, harms and horrors of consumer capitalism and its inherent ambiguities. Instead, there are signs of chaos and confusion everywhere (e.g. drug policy, legislation, treatment) that replicate the contradictions inherent in capitalism. Ambiguities that serve to domesticate the excessive *jouissance* demanded by the super-ego as enjoyment is perceived as fullness and happiness, which gives our life meaning (Žižek, 2003a, 2006a). The decline in symbolic efficiency has meant there is nothing left for people to believe in and an absence of guarantees in their life choices, as everyone frantically searches for the neoliberal good life. Like Belfort, everyone is searching for a sense of meaning, forced to take their place in the social (symbolic) order. However, the consumer is forever cheated by their deferred promise of fulfilment (Žižek, 1996) as 'unsatisfied desire converts into a desire for unsatisfaction', which is integral to driving capitalism forward (Žižek, 1991, p. 144).

In fact, despite proffering a Real *jouissance* the consumption of AODs merely provides its semblance—Kant's transcendental illusion—as semblances keep the neoliberal fantasy alive in a society where symbolism dominates and reality is fetishistically disavowed. Here fantasy structures our social reality and our desires, as the death drive—a motivator of desire, which is nostalgic—seeks to return the user to its pre-oedipal state of ontological completeness, where *jouissance* was direct and unmediated. A pre-ontological excess of drive, which threatens to exceed capitalism's ability to reappropriate it, illustrates why 'addiction' is unwanted in contemporary society as excess is punished by the very system that incites it, unless of course it is an addiction to consumer goods/services. Therefore, AODs facilitate the transcendence of symbolic reality and desire, allowing people to distance themselves from the rules and expectations of consumer capitalism, making it feel like conformity is their choice, despite the reality (Lacan, 2006; Žižek, 1989). Conformity is not a choice. Fantasy prevents choice and 'conceals the fact that the Other, the symbolic order, is structured around some traumatic impossibility' (Žižek, 1989, p. 138).

Fantasy domesticates and organises *jouissance*, structures our desires and provides 'a rationale for the inherent deadlock of desire' (Žižek, 2000, p. 297). However these fantasies are based upon a simulacra of AODs and their users, created by capitalism's 'loops and spirals' (Ferrell et al., 2008, p. 119), which serve

as 'the cultural wallpaper in our lives' (Taylor, 2010, p. 97). Imbued with ideology, the hyper-reality surrounding drugs and their users (and suppliers) has become more real than reality itself (Baudrillard, 1994). Instead, stereotypical representations function as a fetish, giving body to inconsistency (Žižek, 1989) as fantasy serves to conceal the trauma and the inconsistencies of the big Other, while fetishistically disavowing the harms arising from the system itself and its (legal) products, including its objective violence (Žižek, 2008a), which has led to the drug apartheid (Taylor et al. 2016). Here illicit (unprivileged) drugs and their users are blamed for society's ills—scapegoated—which conceals the veracity of social life and the fact that many of these inequalities are attributable to the ramping up of neoliberal consumer capitalism and the disintegration of the underlying social order, not drugs. Instead, drugs seek to divert the publics' attention away from wider and more important socio-political issues (Baudrillard, 1998; Debord, 1970). Therefore, it is not just AODs, but their laws, policies, education/prevention, treatment and harm-reduction products/initiatives, which are sublime objects of ideology—a weapon used in a terminal war (Burroughs, 1972)—as some unprivileged substances and their users are criminalised as AODs are defined and organised by capitalism rather than harm.

Instead, the prohibition and regulation of certain substances but not others is thus premised on the control of *jouissance*, particularly the enjoyment of Others (Žižek, 2006a). Although capitalisms commodified provocations to enjoy push us toward excessive AOD use and 'addiction', the *jouiss proper* is unwelcome in contemporary society. Bar dependence on commodities and consumerism, there is no place for dependence in a neoliberal society, despite being the standardised state for all human beings (Bauman, 2000). Thus, the only way substance induced *jouissance* may be enjoyed is if it is controlled, as pleasure has been coupled with constraint (Žižek, 2002). This seeks to protect us from 'the stressful shocks of excessive *jouissance*' (Žižek, 2001, p. 182), as *jouissance* is haunted by the death drive.

The 'addict' is a subject of the death drive. As drive is unconscious, the repetitive behaviour of addiction is experienced as an external compulsion over which the subject believes they have no control. In fact, this article shows, that to Žižek the death drive is many things (see Hook, 2016)—'a parasite, an imbalance, antagonism'. It is the void of excessive impulse that persists beyond biological life; it is the space between nature and culture; it is a parasitic form of enjoyment; it is the subject prior to subjectivization; it is the elementary form of the ethical act.' Driven by the death drive the 'addict' shows 'human beings are maladapted creatures... stubbornly attached to maladaptive symptom-strategies, of being unbalanced by excessive, pathological over investments rendering the individual out of synch with [their] milieu' (Johnston, 2008, p. 184) as addiction—despite causing all sorts of problems in the users life—is perpetuated. The lost object that repeatedly eludes them means the 'addict' starts 'to find pleasure in just repeating the failed task... - which... shifts from desire to drive' as drive is the by-product of desire and desire is defence against drive (Žižek, 2006a, p. 7). 'Addicts' find pleasure in the activity itself and its repetitive failure as they are said to occupy a 'horrible undead

life' (Žižek, 2008b, p. 112), but do they? Is an 'addict's' life any emptier or deathly than a conventional consumerist life-style as Renton from *Trainspotting* highlights: 'Choose a life ... Choose sitting on that couch watching mind-numbing, spirit-crushing game shows, stuffing fucking junk food into your mouth. Choose rotting away at the end of it all, pissing your last in a miserable home ... But why would I want to do a thing like that?' Instead we ignore the fact consumer capitalism has turned everyone into mindless zombies living empty consumerist lives. In its place, drugs and their users are scapegoated due to the dearth of positive drug stories or evidence illustrating that some people might actually be better for their AOD use (Enge et al., 2021; Hart, 2021).

Adopting an ontology of desire, this article has shown how capitalism structures our desires and drives, which leads to AOD use in contemporary neoliberalism that has deployed the pleasure principle for its own perpetuation that commands us all to *Jouiss!* It shows how AOD users/'addicts' heeding these demands are subjects of the death drive. Drugs, like the death drive are parasitical, vampirically feeding off the host and its dissatisfaction of desire as the Lacanian drive extricates enjoyment from the thwartings and failures of desire (Burroughs, 1972; Johnston, 2008). Here we shift from desire—lost object—to drive—loss itself as an object—as fantasy separates drive from desire. Desire is constantly searching for satisfaction and completeness. Desire libidinally circles around the 'gap in the order of being' a gap that constantly threatens to disrupt the symbolic framework of subjectivity (Žižek, 2000) as contemporary subjectivity is haunted by nostalgia for a state of ontological completeness, a desire to return to a state of equilibrium (Lacan 1986), which manifests itself in acts of self-sabotage. Subsequently, focusing on an ontology of desire shows how our corporeal and emotional response to AODs and their use is inextricably tied to neoliberal consumer capitalism. The libidinal economy of capitalism has replaced human relationships, and although we might think we can resist the logic of capitalism, we are unconsciously invested in it, as it is in tune with us libidinally (Lyotard, 1993). Everyone 'knows very well what they are doing, but still, they are doing it anyway' as experts are disbelieved, self-responsibility is emphasised and cynicism dominates (Žižek, 1989, p. 19).

Moving beyond traditional theories, the preceding discussion illustrates the role of ideology as an inescapable part of contemporary society. It highlights the unconscious functioning of ideology, including how it functions as non-ideology and the influence it has on us and our behaviours including AOD use/'addiction'. It acknowledges the dominance capital now has over every aspect of our lives, including its systemic harms. While the theories of the 1960s/1970s are not without their merits, it is clear times have changed. The emergence of neoliberalism, its exacerbation of inequalities, ubiquitous ideological messages and harmful subjectivities (e.g. objectless anxiety, cynicism) mean that we live in very different economic, political, ideological and cultural times, which have not only seen crime transmutate but criminal motivations change, illustrating the need for new (realist) theories (see Hall et al. 2008). New theories that move away from the abstract empiricism tied to philosophical-liberalism and its ideological idealism, which has dominated criminology (Hall & Winlow, 2015). Instead, it proffers

a contemporary twist. Despite looking like a revival of old theories (e.g. Freud/Lacan), the proposed framework acknowledges the demand for a rejuvenation of ontology seen across disciplines, while incorporating the diversity of human desires and drives that 'activate the abstract structures, forces and processes that are the dynamic foundations of our lives in the liberal-capitalist system' (Hall & Winlow, 2015, p. 131) to present an aetiology of the real conditions of AOD use/addiction in contemporary consumer society. By adopting Žižek's new philosophical realism to look at AODs, this article overcomes some of the criticisms and limitations levelled at other theoretical approaches (e.g. critical realism, transcendental empiricism, left realism) (see Hall and Winlow, 2015 and Žižek, 2004), while Hegel's dialectal thinking in Žižek's reading of Lacan opens up debate to the suggested ideas, which will help to develop the proposed theoretical framework and bring dialectics back to academia.

Therefore, this article shows, rather than subvert capitalism or indicate a flawed neoliberal subjectivity; AODs are inextricably tied to capitalism. They provide a means of coping with pressure, a sense of belonging, a means of relieving boredom, achieving perfection and for ascending to a plain above the social. AODs act as a *palliative* to neoliberalism and its resultant, and sometimes damaged subjectivities: 'what ideology offers the subject is the fantasy of change ... precisely as a means of avoiding any real (or Real) change' (Žižek, 2001, p. 182). Subsequently, it acknowledges that only by traversing the fantasy of drugs can realistic and effective discussions on policies, legislation and treatment be had, and this area of academia moved forwards.

Notes

1. The author acknowledges that the term addict/addiction is controversial and problematic, but it is used to illustrate the theoretical argument being proposed and to distinguish between controlled and uncontrolled AOD use (also problematic terms).
2. Transcendental materialism recognises 'all humans are, paradoxically, hard-wired for plasticity, which carries a natural tendency to dysfunctionality' (Hall & Winlow, 2015, p. 111).
3. Linnemann and Medley's (2022, p. 1) palliative capitalism 'describes a set of social relations in which legal pharmaceutical drugs and their producers, marketers and distributors profit from treating or attempting to treat the conditions that neoliberal capitalism creates.'
4. People can pay to go on luxurious *ayahuasca* retreats in search of spirituality, self-enlightenment and psychic self-improvement.
5. 'The Lacanian theory of the mirror stage: only by being reflected in another man - that is, in so far as this other man offers it an image of its unity - can the ego arrive at its self-identity' (Žižek, 1989, p. 20).
6. Split between conscious and unconscious thought.
7. According to Žižek (1989, p. 70) 'the Real is in itself a hole, a gap, an opening in the middle of the symbolic order— it is the lack around which the symbolic order is structured'. It cannot be symbolised or represented.
8. This is because they have no firm 'position from which one can make sense of one's world' (Dean, 2009, p. 67).
9. To encourage excessive consumption and intoxication the market offers a diverse array of substances - alcopops and shots - designed to be consumed quickly in vast quantities as the sweetness disguises the very high alcohol content (Smith, 2014)
10. Red wine (Hough, 2010) and champagne (Ky & Drouard, 2006) consumed in moderation can be beneficial to health.

11. For example, a glass of wine after a hard day at work or a cigarette to relieve stress/tension.
12. Libidinally alive with excess drug-induced *jouissance* but excluded from society.
13. Some good examples come from the USA, where drug addicts are being left to die as one state introduced a three-strikes-style policy for people who repeatedly overdose, which means those who had received overdose treatment twice in the past would not have an ambulance sent to resuscitate them or receive life-saving medication (Wootson, 2017).
14. E.g., we ignore the harmful side effects of prescribed pharmaceutical drugs; drug-testing technologies; and doctors that over prescribe drugs and harm their patients (Dyer, 2004; Singer & Baer, 2009; Taylor et al., 2020).
15. Many of these substances contain banned and dangerous ingredients, very little is known about some of them (e.g. safe levels of use/concentrations), let alone how they interact with each other or metabolise in the body, which is particularly problematic since people consume several products together (Evans-Brown et al., 2012; Maughan, 2013; Tucker et al., 2018).
16. The Drug Apartheid is a hierarchical system of segregation that privileges certain drug markets whilst criminalising others (see Taylor et al. 2016).
17. E.g. ecstasy tablets and cocaine bricks are stamped with legitimate luxury corporate brands like Louis Vuitton, Ralph Lauren and Gucci. Corporate designer and luxurious brands also piggy-back on illicit drugs (e.g. Calvin Klein's heroin chic) as transgression has been subsumed by capitalism.
18. Drug sellers adopt similar strategies implemented in the promotion and sale of legitimate substances like coffee and tea.

Acknowledgements

The author would like to thank Simon Winlow not only for encouraging me to write this article, but also for his input, guidance and invaluable feedback/comments, which helped to make this paper what it is. Your continued support and guidance is much appreciated. The author would also like to thank the anonymous reviewers for their positive and constructive comments.

Disclosure statement

No potential conflict of interest was reported by the author(s).

Funding

The author(s) reported there is no funding associated with the work featured in this article.

References

- Agambon, G. (1995). *Homo Sacer: Sovereign Power and Bare Life*. Stanford University Press.
- Aldridge, J., Measham, F., & Williams, L. (2011). *Illegal Leisure Revisited*. Routledge.
- Ayres, T. C. (2020a). Substances: The luxurious, the sublime and the harmful. In S. Hall, T. Kuldova & M. Horsley (Eds.), *Crime, harm and consumerism*. Routledge.
- Ayres, T. C. (2020b). The war on drugs and its invisible collateral damage: Environmental harm and climate change. In A. Brisman and N. South (Eds.), *Routledge international handbook of green criminology*. Routledge.
- Ayres, T. C. (2020c). Childhood trauma, problematic drug use and coping. *Deviant Behavior*, 42(5), 578–599. <https://doi.org/10.1080/01639625.2020.1746132>
- Ayres, T. C. (2019). Substance use in the night-time economy: Deviant leisure? In T. Raymen & O. Smith (Eds.), *Deviant leisure: A criminological perspectives on leisure and harm*. Palgrave MacMillan.
- Ayres, T. C., & Ancrum, C. (2022). *Understanding drug dealing and illicit drug markets: National and international perspectives*. Routledge.
- Ayres, T. C., & Jewkes, Y. (2012). The haunting spectacle of crystal meth: A media-created mythology? *Crime, Media, Culture*, 8(3), 315–332. <https://doi.org/10.1177/1741659012443234>
- Ayres, T. C., & Treadwell, J. (2012). Bars, drugs and football thugs: Cocaine use amongst english football firms. *Criminology and Criminal Justice*, 12(1), 83–100. <https://doi.org/10.1177/1748895811422949>
- Baudrillard, J. (1998). *Consumer society: Myths and structures*. SAGE.
- Baudrillard, J. (1994). *Simulacra and simulation*. University of Michigan Press.
- Bauman, Z. (2007). *Consuming life*. Polity.
- Bauman, Z. (2000). *Liquid modernity*. Polity.
- Bauman, Z. (1991). *Imitations of postmodernity*. Routledge.
- Becker, H. (1963). *Outsiders*. Free Press.
- Beetham, T., Saloner, B., Gaye, M., Wakeman, S. E., Frank, R. G., & Barnett, M. L. (2021). Admission practices and cost of care for opioid use disorder at residential addiction treatment programs In The US. *Health Affairs*, 40(2), 317–319. <https://doi.org/10.1377/hlthaff.2020.00378>
- Berger, L., Fendrich, M., & Fuhrmann, D. (2013). Alcohol mixed with energy drinks: Are there associated negative consequences beyond hazardous drinking in college students? *Addictive Behaviors*, 38(9), 2428–2432. <https://doi.org/10.1016/j.addbeh.2013.04.003>
- Bjerg, O. (2008). Drug addiction to capitalism: Too close to the body. *Body & Society*, 14(2), 1–22. <https://doi.org/10.1177/1357034X08090695>
- Bowling, B. (2010). *Policing the Caribbean*. Oxford University Press.
- Boys, A., & Marsden, J. (2003). Perceived functions predict intensity of use and problems in young polysubstance users. *Addiction*, 98(7), 951–963. <https://doi.org/10.1046/j.1360-0443.2003.00394.x>
- Boys, A., Marsden, J., & Strang, J. (2001). Understanding reasons for drug use amongst young people: A functional perspective. *Health Education Research*, 16(4), 457–469. <https://doi.org/10.1093/her/16.4.457>
- Bornstein, A. M., & Pickard, H. (2020). Chasing the first high: Memory sampling in drug choice. *Neuropsychopharmacology*, 45(6), 907–915. <https://doi.org/10.1038/s41386-019-0594-2>
- Boyd, C. (2018). Britain's Zombie Apocalypse. *The Mail Online*, 16th June.
- Bröckling, U. (2007). *The entrepreneurial self*. SAGE.
- Burroughs, W. (1972). *Junkie*. Pierre-Belfond.
- Cappelletti, S., Piacentino, D., Daria, P., Sani, G., & Aromatario, M. (2015). Caffeine: Cognitive and physical performance enhancer or psychoactive drug? *Current Neuropharmacology*, 13(1), 71–88. <https://doi.org/10.2174/1570159X13666141210215655>
- Coleman, S. B., Kaplan, J. D., & Downing, R. W. (1986). Life cycle and loss: The spiritual vacuum of heroin addiction. *Family Process*, 25(1), 5–23. <https://doi.org/10.1111/j.1545-5300.1986.00005.x>
- Connery, H. S., Taghian, N., Jungjin, K., Griffin, M., Rockett, I., Weiss, R., & McHugh, K. (2019). Suicidal motivations reported by opioid overdose survivors: A cross-sectional study of adults with opioid use disorder. *Drug and Alcohol Dependence*, 205, 107612–107616. <https://doi.org/10.1016/j.drugalcdep.2019.107612>
- Courtwright, D. (2001). *Forces of habit: Drugs and the making of the modern world*. Mass.
- Dean, J. (2009). *Democracy and other neoliberal fantasies*. Duke University Press.
- Dean, J. (2006). *Conspiracy's Drive* I-Cite Blog.
- Dean, J. (2004). Žižek on the Law. *Law and Critique*, 15(1), 1–24. <https://doi.org/10.1023/B:LACQ.0000018770.92058.29>
- Debord, G. (1970). *Society of the spectacle*. Red & Black.
- Douglas, M. (1966). *Purity and Danger*. Routledge.
- Duff, C. (2014). *Assemblages of health*. Springer.
- Duff, C. (2003). Drugs and youth cultures: Is Australia experiencing the 'normalization' of adolescent drug use? *Journal of Youth Studies*, 6(4), 433–446. <https://doi.org/10.1080/1367626032000162131>
- Dyer, O. (2004). Seven doctors accused of overprescribing heroin. *British Medical Journal*, 328(7438), 483.

- Engel, L., Bright, S., Barratt, M., & Allen, M. M. (2021). Positive drug stories: Possibilities for agency and positive subjectivity for harm reduction. *Addiction Research & Theory*, 29(5), 363–371. <https://doi.org/10.1080/16066359.2020.1837781>
- Evans-Brown, M., McVeigh, J., Perkins, C., & Bellis, M. A. (2012). *Human enhancement drugs: The emerging challenges to public health*. Northwest Public Health Observatory.
- Ferrell, J., Hayward, K., & Young, J. (2008). *Cultural criminology: An invitation*. SAGE.
- Frederick, C. J., Resnik, H., & Wittlin, B. J. (1973). Self-destructive aspects of hard core addiction. *Archives of General Psychiatry*, 28(4), 579–585. <https://doi.org/10.1001/archpsyc.1973.01750340097015>
- Girard, R. (1965). *Deceit, desire, and the Novel: Self and other in literary structure*. The Johns Hopkins University Press.
- Girard, R. (1986). *The Scapegoat*. The Johns Hopkins University Press.
- Griffin, C., Bengry-Howell, A., Hackley, C., Mistral, W., & Szmigin, I. (2009). 'Every time I do it I absolutely annihilate myself: Loss of (self-)consciousness and loss of memory in young people's drinking narratives. *Sociology*, 43(3), 457–476. <https://doi.org/10.1177/0038038509103201>
- Hall, A. (2019). Lifestyle drugs and late capitalism: A topography of harm. In O. Smith and T. Raymen (Eds.) *Deviant leisure and social harm*. Policy.
- Hall, S., & Winlow, S. (2015). *Revitalizing criminological theory*. Routledge.
- Hall, S., Winlow, S., & Ancrum, C. (2008). *Criminal identities and consumer culture: Crime, Exclusion and the new culture of narcissism*. Willan.
- Hammersley, R., Dalgarno, P., McCollum, S., Reid, M., Strike, Y., Smith, A., Wallace, J., Smart, A., Jack, M., Thompson, A., & Liddell, D. (2016). Trauma in childhood: Stories of people who have injected drugs. *Addiction Research & Theory*, 24(2), 135–151. <https://doi.org/10.3109/16066359.2015.1093120>
- Hart, C. (2021). *Drug use for grown Ups*. Penguin.
- Harvey, D. (2007). *A brief history of neoliberalism*. Oxford University Press.
- Hayward, K., & Turner, T. (2019). Be More VIP: Deviant leisure and hedonistic excess in Ibiza's 'Disneyized' Party Spaces. In T. Raymen, & O. Smith (Eds.), *Deviant leisure: A criminological perspectives on leisure and harm*. Palgrave MacMillan.
- Hillier, D. (2017). *Are Home Drug Testing Kits Actually Helpful?* Retrieved 28 February 2020 from https://www.vice.com/en_uk/article/3dmyj3/are-home-drug-testing-kits-actually-helpful
- Hook, D. (2016). Of symbolic mortification and undead life: Slavoj Žižek on the death drive. *Psychoanalysis and History*, 18(2), 221–256. <https://doi.org/10.3366/pah.2016.0190>
- Hough, A. (2010). *Drinking red wine 'can help you live longer and healthier life', scientists claim*, *The Telegraph*, 31st July. Retrieved from <http://www.telegraph.co.uk/news/health/news/7919450/Drinking-red-wine-can-help-you-live-longer-and-healthier-life-scientists-claim.html>
- Hughes, K., & Bellis, M. A. (2003). *Safer nightlife in the*. LJMU.
- Hunt, N. (2003). A review of the evidence-base for harm reduction approaches to drug use. London: Release. <https://www.iprt.ie/site/assets/files/5939/huntharmreduction.pdf>
- Hunt, G., & Evans, K. (2008). The great unmentionable: Exploring the pleasures and benefits of ecstasy from the perspective of drug users. *Drugs*, 15(4), 329–349.
- Hutton, F. (2006). *Risky pleasures? Club cultures and feminine identities*. Ashgate.
- Illing, S. (2019). The Brutal Mirror. *Vox*, 2nd November.
- Jenkins, D. J. A., Spence, J. D., Giovannucci, E. L., Kim, Y.-I., Josse, R., Vieth, R., Blanco Mejia, S., Vigiouliou, E., Nishi, S., Sahye-Pudaruth, S., Paquette, M., Patel, D., Mitchell, S., Kavanagh, M., Tsiarakis, T., Bachiri, L., Maran, A., Umatheva, N., McKay, T., ... Sievenpiper, J. L. (2018). Supplemental vitamins and minerals for CVD prevention and treatment. *Journal of the American College of Cardiology*, 71(22), 2570–2584. <https://doi.org/10.1016/j.jacc.2018.04.020>
- Johnston, A. (2008). *Žižek's ontology: A transcendental materialist theory of subjectivity*. Northwestern University Press.
- Katz, J. (1988). *Seductions of crime: Moral and sensual attractions in doing Evil*. Basic Books.
- Kavanaugh, P., & Anderson, T. (2008). Solidarity and drug use in the electronic dance music scene. *The Sociological Quarterly*, 49(1), 181–208. <https://doi.org/10.1111/j.1533-8525.2007.00111.x>
- Koenraadt, R., & van de Ven, K. (2018). The Internet and lifestyle drugs: An analysis of demographic characteristics, methods, and motives of online purchasers of illicit lifestyle drugs in the Netherlands. *Drugs: Education, Prevention and Policy*, 25(4), 345–355. <https://doi.org/10.1080/09687637.2017.1369936>
- Krill, P., Johnson, R., & Albert, L. (2016). The prevalence of substance use and other mental health concerns among American attorneys. *Journal of Addiction Medicine*, 10(1), 46–52. <https://doi.org/10.1097/ADM.0000000000000182>
- Ky, T., & Drouard, F. (2006). *The healing power of champagne: History, traditions, biology and diet*. Savoir-Boire Ltd.
- Lacan, J. (2020). *Formations of the unconscious*. Polity.
- Lacan, J. (2007). *The Seminar of Jacques Lacan. Book XVII: The Other Side of Psychoanalysis*, ed. Jacques-Alain Miller, trans. Russell Grigg. W. W. Norton.
- Lacan, J. (2006). *Ecrits: The First Complete Edition in English Paperback* (Bruce Fink). W. W. Norton.
- Lacan, J. (1998). *The seminar of Jacques Lacan: The four fundamental concepts of psychoanalysis*. W. W. Norton & Co.
- Lacan, J. (1992). *The Seminar. Book VII: The Ethics of Psychoanalysis 1959–1960*, ed. Jacques-Alain Miller, tr. Dennis Porter, W. W. Norton & Co.
- Lacan, J. (1988). *The Seminar. Book II. The Ego in Freud's theory and in the technique of psychoanalysis, 1954–55*, trans. S. Tomaselli, Cambridge University Press.
- Lacan, J. (1986). *The Seminar of Jacques Lacan. Book VII: The Ethics of Psychoanalysis 1959–60.*, ed. J.-A. Miller, trans. D. Porter W. W. Norton & Co.
- Lacan, J. (1981). *The Seminar of Jacques Lacan. Book XI: The Four Fundamental Concepts of Psychoanalysis.*, ed. J.-A. Miller, trans. A. Sheridan W. W. Norton & Co.
- Langman, L., & Chung, M. C. (2013). The relationship between forgiveness, spirituality, traumatic guilt and Posttraumatic Stress Disorder (PTSD) among people with addiction. *The Psychiatric Quarterly*, 84(1), 11–26. <https://doi.org/10.1007/s11126-012-9223-5>
- Lembke, A. (2021). *Dopamine Nation*. Headline.
- Linnemann, T., & Medley, C. (2022). Side affects May Vary: Palliative capitalism, punitive capitalism and us consumer culture. In T. C. Ayres and C. Ancrum (eds.), *Understanding drug dealing and illicit drug markets: National and international perspectives*. Routledge.
- Loose, R. (2002). *Subject of addiction*. Karnac Books.
- Lustig, R. H., Schmidt, L. A., & Brindis, C. D. (2012). Public health: The toxic truth about sugar. *Nature*, 482(7383), 27–29. <https://doi.org/10.1038/482027a>
- Lyotard, J. (1993). *ibidinal economy*. Indiana University Press.
- McBride, A. J., Pates, R. M., Arnold, K., & Ball, N. (2001). Needle fixation, the drug user's perspective: A qualitative study. *Addiction*, 96(7), 1049–1058. <https://doi.org/10.1046/j.1360-0443.2001.967104914.x>
- McGowen, T. (2016). *Capitalism and desire*. Columbia University Press.
- McGowen, T. (2007). *The Real Gaze*. State University of New York Press.
- Maher, L. (1997). *Sexed work: Gender, race, and resistance in a Brooklyn Drug Market*. Oxford University Press.
- Malbon, B. (1999). *Clubbing: Dancing, ecstasy and vitality*. Routledge.
- Malins, P. (2017). Desiring assemblages: A case for desire over pleasure in critical drug studies. *The International Journal on Drug Policy*, 49, 126–132. <https://doi.org/10.1016/j.drugpo.2017.07.018>
- Mann, B. (2021). As addiction deaths surge, profit-driven rehab industry faces 'Severe Ethical Crisis', *NPR*, 15th February. Retrieved from <https://www.npr.org/2021/02/15/963700736/as-addiction-deaths-surge-profit-driven-rehab-industry-faces-severe-ethical-crisis>
- Martin, J. (2014). Fair trade' cocaine and 'conflict-free' opium: The future of online drug marketing. *The Conversation*, 12th August 2014.
- Maughan, R. J. (2013). Quality assurance issues in the use of dietary supplements, with special reference to protein supplements. *The Journal of Nutrition*, 143(11), 1843S–1847S. <https://doi.org/10.3945/jn.113.176651>
- Measham, F. (2004). The decline of ecstasy, the rise of 'binge' drinking and the persistence of pleasure. *Probation Journal*, 51(4), 309–326. <https://doi.org/10.1177/0264550504048220>

- Measham, F., & Moore, K. (2008). The criminalisation of intoxication. In P. Squires (ed.) *ASBO Nation*. Policy Press.
- Meehan, P. (2011). Drugs, insurgency and state-building in Burma: Why the drugs trade is central to Burma's changing political order. *Journal of Southeast Asian Studies*, 3(3), 376–404. <https://doi.org/10.1017/S0022463411000336>
- Meehan, W., O'Connor, L. E., Berry, J. W., Weiss, J., Morrison, A., & Acampora, A. (1996). Guilt, shame, and depression in clients in recovery from addiction. *Journal of Psychoactive Drugs*, 28(2), 125–134. <https://doi.org/10.1080/02791072.1996.10524385>
- Miller, J. A. (1996). Commentary on Lacan's text. In R. Feldstein, B. Fink, & M. Jaanus (eds.) *Reading seminars I and II: Lacan's return to Freud*. B. Fink, Trans. SUNY Press.
- Miller, J. A. (1989). To Interpret the Cause: From Freud to Lacan. *Newsletter of the Freudian Field*, 3, 1–2.
- National Institute of Health (NIH). (2019). *Dietary supplements for weight loss*. NIH.
- Nutt, D., King, L. A., & Phillips, L. D. (2010). Drug harms in the UK: A multicriteria decision analysis. *Lancet (London, England)*, 376(9752), 1558–1565. [https://doi.org/10.1016/S0140-6736\(10\)61462-6](https://doi.org/10.1016/S0140-6736(10)61462-6)
- O'Malley, P., & Valverde, M. (2004). Pleasure, freedom and drugs: The uses of pleasure in the liberal governance of drug and alcohol consumption. *Sociology*, 38(1), 25–42. <https://doi.org/10.1177/0038038504039359>
- Parker, H., Aldridge, J., & Measham, F. (1998). *Illegal Leisure: The normalization of adolescent recreational drug use*. Routledge.
- Parker, H., & Williams, L. (2003). Intoxicated weekends: Young adults' work hard–play hard lifestyles, public health and public disorder. *Drugs: Education, Prevention and Policy*, 10(4), 345–367. <https://doi.org/10.1080/0968763031000140200>
- Paley, D. (2014). *Drug war capitalism*. AK Press.
- Patterson, C., Emslie, C., Mason, O., Fergie, G., & Hilton, S. (2016). Content analysis of UK newspaper and online news representations of women's and men's 'binge' drinking: A challenge for communicating evidence-based messages about single-episodic drinking? *BMJ*, 6(12), e013124.
- Peacock, A., Bruno, R., & Martin, F. H. (2013). Alcohol mixed with energy drinks: Are there associated negative consequences beyond hazardous drinking in college students? *Psychology of Addictive Behaviors*, 27(1), 202–206. <https://doi.org/10.1037/a0029985>
- Pearson, G. (2001). Normal drug use: Ethnographic fieldwork among an adult network of recreational drug users in inner London. *Substance Use & Misuse*, 36(1–2), 167–200. <https://doi.org/10.1081/ja-100000234>
- Pennay, A., Miller, P., Busija, L., Jenkinson, R., Droste, N., Quinn, B., Jones, S. C., & Lubman, D. I. (2015). Wide-awake drunkenness? Investigating the association between alcohol intoxication and stimulant use in the night-time economy. *Addiction (Abingdon, England)*, 110(2), 356–365. <https://doi.org/10.1111/add.12742>
- Pennay, A., & Moore, D. (2010). Exploring the micro-politics of normalisation: Narratives of pleasure, self-control and desire in a sample of young Australian 'party drug' users. *Addiction Research & Theory*, 18(5), 557–571. <https://doi.org/10.3109/16066350903308415>
- Pope, H. G., Wood, R. I., Rogol, A., Nyberg, F., Bowers, L., & Bhasin, S. (2014). Adverse health consequences of performance-enhancing drugs: An Endocrine Society scientific statement. *Endocrine Reviews*, 35(3), 341–375. <https://doi.org/10.1210/er.2013-1058>
- Preble, E., & Casey, J. (1969). Taking care of business. *International Journal of Addiction*, 4(1), 1–24. <https://doi.org/10.3109/10826086909061998>
- Radcliffe, P., & Stevens, A. (2008). Are drug treatment services only for 'thieving junkie scumbags'? Drug users and the management of stigmatised identities. *Social Science & Medicine*, 67(7), 1065–1073. <https://doi.org/10.1016/j.socscimed.2008.06.004>
- Singer, M., & Baer, H. (2009). *Killer commodities: Public health and the corporate production of harm*. AltaMira Press.
- Smith, O. (2014). *Contemporary adulthood and the night time economy*. Palgrave.
- Snitzer, Z. (2017). The underbelly of addiction treatment: A look at the Unethical and Illegal Practices of Addiction Treatment Industry. In *Blog*. Maryland Addiction Recovery Center.
- Standerwick, K., Davies, C., Tucker, L., & Sheron, N. (2007). Binge drinking, sexual behaviour and sexually transmitted infection in the UK. *International Journal of STD & AIDS*, 18(12), 810–813. <https://doi.org/10.1258/095646207782717027>
- Stevens, A. (2020). Critical realism and the 'ontological politics of drug policy'. *The International Journal on Drug Policy*, 84(6), 102723. <https://doi.org/10.1016/j.drugpo.2020.102723>
- Taylor, P. (2010). *Žižek and the Media*. Polity.
- Taylor, S., Ayres, T.C., & Jones, E. (2020). Enlightened hedonism? Independent drug checking amongst a group of ecstasy users. *International Journal of Drug Policy*, 83, 102869. <https://doi.org/10.1016/j.drugpo.2020.102869>
- Taylor, S., Buchanan, J., & Ayres, T. C. (2016). Prohibition, privilege and the drug apartheid. *Criminology and Criminal Justice*, 16(4), 452–469. <https://doi.org/10.1177/1748895816633274>
- Transparency Market Research (TMR). (2019). *Addiction Treatment Market to hit US\$7.0 Billion by 2025* – TMR. Retrieved October 13, 2019, from <https://www.globenewswire.com/news-release/2019/10/01/1923298/0/en/Addiction-Treatment-Market-to-hit-US-7-0-Billion-by-2025-TMR.html>
- Tucker, J., Fischer, T., Upjohn, L., Mazzeo, D., & Kumar, M. (2018). Unapproved pharmaceutical ingredients included in dietary supplements associated with US Food and drug administration warnings. *JAMA Open Network*, 1(6), 1–11.
- Turner, T. (2018). Disneyization: A framework for understanding illicit drug use in bounded play spaces. *The International Journal on Drug Policy*, 58, 37–45. <https://doi.org/10.1016/j.drugpo.2018.04.018>
- Wanberg, K., & Milkman, H. (1998). *Criminal conduct and substance abuse treatment strategies for self-improvement and change*. SAGE.
- Wacquant, L. (2009). *Punishing the poor*. Duke University Press.
- Warburton, H., Turnbull, P. J., & Hough, M. (2005). *Occasional and controlled heroin use: Not a problem?* Joseph Rowntree Foundation.
- Winlow, S. (2014). Pornography. In R. Atkinson (ed.) *Shades of deviance*. Routledge.
- Winlow, S., & Hall, S. (2016). Criminology and consumerism. In P. Carlen (ed.) *Criminologias alternativas*. IEA.
- Winstock, A. R., Wolff, K., & Ramsey, J. (2001). Ecstasy pill testing: Harm minimization gone too far? *Addiction*, 96(8), 1139–1148. <https://doi.org/10.1046/j.1360-0443.2001.96811397.x>
- Wootson, C. R. Jr., (2017). One politician's solution to the overdose problem: Let addicts die. *Washington Post*, 30th June. Retrieved from: <https://www.washingtonpost.com/news/to-your-health/wp/2017/06/28/a-council-members-solution-to-his-ohio-towns-overdose-problem-let-addicts-die/>
- Žižek, S. (2019). Can one exit from the capitalist discourse without becoming a Saint? *Crisis Critique*, 3(3), 481–499.
- Žižek, S. (2014). The Impasses of Consumerism. In *teNeus.Prix Pictet 05: Consumption* (ed.) teNeus.
- Žižek, S. (2012). *Less than nothing*. Verso.
- Žižek, S. (2009). *First as tragedy, then as Farce*. Verso.
- Žižek, S. (2008a). *Violence*. Picador.
- Žižek, S. (2008b). *Plague of fantasies*. Verso.
- Žižek, S. (2006a). *The Parallax view*. MIT Press.
- Žižek, S. (2006b). Jacques Lacan's Four discourses. Retrieved from <https://www.lacan.com/zizfour.htm>
- Žižek, S. (2004). *Organs without bodies: On Deleuze and Consequences*. Routledge.
- Žižek, S. (2003a). *The Puppet and the Dwarf*. MIT Press.
- Žižek, S. (2003b). Homo Sacer as the object of the discourse Of The University. *Cités*, 16, 25–41. <https://doi.org/10.3917/cite.016.0025>
- Žižek, S. (2002). *Welcome to the desert of the real*. Verso.
- Žižek, S. (2001). *On belief*. Routledge.
- Žižek, S. (2000). *Ticklish subject*. Verso.
- Žižek, S. (1999). The Superego and the Act. Retrieved 28 February 2020 from <https://zizek.livejournal.com/1101.html>
- Žižek, S. (1997). *Plague of Fantasies*. Verso.
- Žižek, S. (1994). *The Mestastases of enjoyment*. Verso.
- Žižek, S. (1993). *Tarrying with the negative*. Duke Press.
- Žižek, S. (1992). *Looking Awry*. MIT Press.
- Žižek, S. (1991). *For they know not what they do*. Verso.
- Žižek, S. (1989). *Sublime object of ideology*. Verso.
- Žižek, S., & Dolar, M. (2002). *Opera's Second Death*. Routledge.