

Navigating risk: How “ravers” engage in harm reduction when using illicit drugs

by

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Abstract

This thesis examines the relationships between harm reduction and the Electronic Dance Music (EDM) community. To better understand how ravers navigate, perceive, and react to risks inherent in a club drug using setting, this thesis presents research from interviews with EDM community members about their experiences. I find that community not only encourages harm reduction but *is* a form of harm reduction. This is achieved primarily through connection, culture, and the transmission of knowledge. Further, the nature of community encourages and acts as harm reduction because of ravers' duty of care for others, which ensures ravers look out for one another to address a broad continuum of care. Further, ravers have their own subset of folk knowledges that are created by and shared with the community. This encourages ravers to engage with harm reduction, attempt to avoid stigma, and learn more about formal and informal harm reduction resources and strategies. Ravers can better engage in holistic harm reduction, not only when it comes to consuming club drugs, but to a broader spectrum of risks that ravers may be susceptible to when at a rave.

Preface

This thesis is an original work by Jillian Q. Bevan. The research project, of which this thesis is a part, received research ethics approval from the University of Alberta Research Ethics Board 1, Project Name “Navigating risk: How “ravers” engage in harm reduction when using illicit drugs,” Pro00098183 on April 7, 2020.

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Chapter 1: Introduction

Electronic dance music (EDM) is an umbrella term which encapsulates a variety of genres of music characterized by punchy beats and infectious rhythms. Fans of this music make up a vast subculture. For those not in the subculture, EDM may often also be associated with "hedonism via dance parties, drinking and drugs [...] and generally circumventing the normative channels of society" (Conner, 2015, p. 5). While EDM may once have been characterized by warehouse parties, rampant drug usage, and the seedy underbelly of society, the new reality of this music scene results from a normative transition into pop culture (Conner, 2015). The EDM genre now is about *more* than the music; it has transformed into a vast youth culture focused on sharing experiences and creating community (Weir, 2000; Wagner, 2014). The genre has spawned an EDM "scene" in multiple locales across the globe that fans of the genre are a part of. As such, EDM *as a scene* has moved towards mainstream appeal.

The EDM genre has its most prominent roots in the disco era of the 1970's (Colombo, 2010). As a new form of dance music, disco had a wide appeal, globally. It is with disco that "DJs" became prominent in the nightlife scene (Colombo, 2010). Renowned clubs like Studio 54 in New York were a hot spot for fans of the genre (Glazer, 2014). As dance music became more popular, club drugs like acid and ecstasy gained more popularity as well to enhance the experience and help party-goers party longer (Colombo, 2010). In the 1980's in the United States, the genre of house music became a popular offshoot of disco, which was a precursor to the EDM rave scene that blossomed in the 1990s (Colombo, 2010; King, 2020). These new genres continued to surge in popularity around the world, and eventually morphed into the popularized EDM aesthetic of the 2000's up to present day (King, 2020; Glazer, 2014).

Along with EDM's shift into mainstream pop culture, entertainment companies and night life venues globally have increasingly promoted and hosted EDM events. This process has shifted the genre and culture towards being a more "acceptable" form of deviance than it once was. Today, EDM artists, such as the late DJ, Avicii, and the Chainsmokers, release some of the most popular records on the global music charts (Pelletiere, 2017; Westbrook, 2013) and as such, EDM is no longer an underground music scene. EDM subculture incorporates many young people and has moved into a sphere of pop culture that challenges the label of "exclusively underbelly" as more and more otherwise "pro-social" youth engage with the scene and the culture associated with it.

Just as EDM evolved, perceptions of risk and risk mitigation evolved, too. As club drugs became associated with EDM, it is clear that there are risks associated with consuming club drugs at EDM parties (Colombo, 2010; Cristiano, 2020). With the surge in popularity of EDM parties and the accompanying surge of club drug use, some ravers recognized a need for grass roots risk mitigation in the form of harm reduction services (JPX, 2016; Henricksen, 2000; Koch, 2018). Thus, the relationship between ravers who use club drugs and harm reduction became key to address risks in the EDM community.

This project is a qualitative study of ravers' experiences with drug use and harm reduction. Information was gathered through qualitative interviews, with people with lived experience in the rave community. Through this thesis, I will be answering the overarching question "*How do "ravers" understand and engage with harm reduction?*" With this guiding question, I was able to gain insight into how ravers perceive their harm reduction practices at raves. I was also able to discover how "organic" harm reduction plays a role in ravers' experiences and influences their interactions with others. Importantly, with this question in mind,

I have unpacked how ravers engage in knowledge transmission to share their experiences and strategies, leading to the role of the community as a whole as form of harm reduction.

Importantly, at the core of this thesis is the idea of "harm reduction" for rave goers, and how they engage in behaviours and services that make their rave experience safer.

I have structured this thesis into five chapters. This first chapter includes: an account of the context within which Edmonton's EDM scene was born; a general theory overview, and a literature review. The second chapter is a detailed breakdown of the methods used and the rationale behind them for this research project. Chapters three and four are thematic chapters, grounded in my data. Chapter three addresses the nature of "community" as harm reduction. In this chapter, I unpack how the characteristics of the culture, and ravers' duty of care towards each other are intrinsic in "community" being harm reduction. Chapter four addresses the relationship between stigma, knowledge, and harm reduction. In this chapter, I suggest that stigma can be both a motivating factor and a barrier to engage in harm reduction, and social learning is key in this distinction. Chapter five presents "next steps" in research and policy recommendations. I include my interview guide and consent form in the final appendix.

Local Background: EDM within the City of Edmonton

It is important to address the history of EDM in Edmonton to better understand the contextual, local history. Despite this shift towards acceptance, the City of Edmonton is no stranger to contention when it comes to techno and EDM. Edmonton's rave scene, much like many other cities, has evolved stylistically and politically. In line with global trends in dance music, Edmonton's EDM scene started in the 1990s. At its inception in the 90s and early 2000s, Edmonton's scene was what many may stereotypically associate with rave culture, described as

"rougher edged and gritty" (Prodaniuk, 2017). Media and law enforcement viewed raves as being intrinsically linked to club drug usage, "demonizing" raves and rave goers for their substance use (JPX, 2016). It was at this time in the 90s, when EDM and raving was becoming popular, that Edmonton first started to see inklings of grassroots harm reduction in the form of RaveSafe Edmonton, following in the footsteps of harm reduction initiatives coming out of California's branch of RaveSafe at the same time. RaveSafe Edmonton was a collective of ravers who were concerned about the potential risks that associated increased interest in raves, and the drug usage that went along with it. As such, this group connected with the California group for training, and compiled resources for a harm reduction booth to take to raves (JPX, 2016). RaveSafe was often the target of contempt from Edmonton city councillors and Edmonton police officers during this period. Volunteers with the group were regularly targets of police drug busts at raves. In the mid-to-late-2000s, there were "two directions taken by raves in Edmonton: underground (GOMP¹), or above ground (Boodang)" with the latter playing a large role in the process of "'mainstreaming' of techno" and EDM in Edmonton (JPX, 2016).

In 2009, West Edmonton Mall's amusement park Galaxyland hosted a unique rave called "Rock 'n' Ride" advertised as an all ages dance party. It was at this party that a 14-year-old overdosed on ecstasy and died. After this, the mall cancelled all future Rock 'n' Rides (CBC News, 2009). In 2012, the Boodang promoted weekend festival, Elements, saw 29 attendees sent to hospital for ecstasy and alcohol related concerns (CBC News, 2012). Prior to the event, the venue, Northlands, had cited concerns about potential overdoses, but Boodang was ultimately still allowed to put on the event. Ravers in attendance noted that security was tighter at this event

¹ Grumpy Old Men Productions: an underground collective of individuals holding raves and connected to RaveSafe

than at others, and as such “‘pre-drinking' and 'pre-dosing' are cited as possible reasons" for the 29 hospitalizations (JPX, 2016).

Across the 6 raves held at city-owned venues in 2017, "a total of 84 people were treated for drug-related illnesses and another 26 were taken to emergency rooms" out of the total 29,362 recorded attendees (Jung, 2018). In response, city councillors debated passing a moratorium on EDM parties and concerts the following year. Some councillors deemed these events harmful and dangerous because of instances of drug overdose at the events. However, in part due to advocacy from a local organization called Indigo Harm Reduction Services, community members urged councillors to consider the dangers that would manifest if *legal* raves were forced back underground. As such, councillors voted down the moratorium and Edmontonians were permitted to "rave on" (Alam, 2018).

More recently, in March 2020, Edmonton city council enacted revisions to Bylaws 19166 and 13138 to promote the safety of rave patrons (City of Edmonton, 2020). Promoters with Boodang had spoken in favor of this bylaw, suggesting standardizing raves would ensure venues follow rules to keep patrons safe. The bylaws include the stipulation that events must "provide attendees with unrestricted access to fresh water and a 'chill space' (with reduced noise, temperature, light) at no cost" as well as ensuring rave promoters have a harm reduction plan (Antoneshyn, 2020). The City of Edmonton is now working with rave promoters to ensure ravers can attend the events safely. Since 2018, the dynamic between government and rave promoters has shifted from one of tension to one of cooperation, which the policy implications for ravers reflect.

Unfortunately, we will not know the true effect of this bylaw until after the COVID-19 pandemic ends, as no formal raves have been held since the bylaw was enacted. There is

currently a Halloween massive, promoted by Boodang, called "SCREAM" that is tentatively scheduled for October 2021. This will likely be the first big, organized rave to occur after the bylaws have passed. It will be an interesting opportunity for policy makers, researchers, and ravers to see if the changes as laid out in the bylaw are effective and feasible.

Theoretical Background

This project is theoretically informed by the constructionist school of thought, as well as Bruce D. Johnson's (1980) "Toward a Theory of Drug Subculture." At the core of this project is understanding how people interact with institutions and people around them shape their understandings of the social world. In the case of drug usage at raves, the normative framework within which drugs are conceived of means that, in this particular subculture, drugs, drug usage, and the meanings associated with drugs are both constructed and informed *by* the social world. How subculture members understand and interact with harm reduction and drugs is formed and reformed *within* and *by* the group. This also means that the subgroup likewise constructs perceptions of risk. In this project, how people who use drugs construct meaning around harm reduction will ultimately play a role in these perceptions of risk and risk management. This is an important pillar for this project as I seek to analyze how ravers come to understand harm reduction in rave spaces. In the past, the social construction of drug use was that of a "devious behavior that violates normative standards of drug-free consciousness" (Venturelli, 2015, p.204). However, within the EDM subculture, drug use is not necessarily deviant, as it is understood that it is a common practice within the scene (Weir, 2000; Henricksen, 2000).

Johnson's (1980) "Toward a Theory of Drug Subculture" in which he indicates that drug usage is a subculture within which people learn and organize around "subcultural conduct norms,

values, rituals, and argot," (p.112) is complimented by constructionist theory. This theory provides a useful basis to understand the subcultural context within which meaning is constructed, and how these subcultures are defined, and define themselves. Golub, Johnson, and Dunlap (2005) expand on this in their article "Subcultural evolution and illicit drug use." Their theory centres on the idea that it is "the prevailing drug subcultures and each person's place relative to them that impart a greater significance to the activity" (Golub et al., 2005, p.2). This is important in a constructionist analysis of drug usage – and harm reduction – at raves, and notably informs my project.

The social acceptance of recreational drug usage is constructed in and by the EDM subculture. Likewise, perceptions of harm reduction are constructed. The choice to access harm reduction resources is largely determined through ravers' interaction with the social world. This choice is a "function of personal and social meanings" (Burrell, 1999, p.46). All of the factors that lead to whether or not to engage with these resources are informed by the social community.

Foundational to this project is Becker's *Outsiders* (2018). Becker is a seminal scholar in the field of deviance, and must be acknowledged as a key sociologist in informing my project. Not only does Becker (2018) engage with the act of "labelling," he also suggests that labelling must go hand in hand with understand how social interaction *influences* the perception of labels. In other words, labels are meaningless if we do not understand how they are developed and perpetuated. We can assign meaning to labels *and* understand how others assign said meaning. Expanding on the importance of the social, Becker (2018) goes on to suggest deviance is a "collective action." People's actions are informed "with an eye on what others have done, are doing, and may do in the future" (Becker, 2018, p. 173). Behaviours are influenced by *others* as are labels. As individuals see how others react to their actions, they internalize that and alter their

actions to gain "status" or alignment with those they are conscious of (Becker, 2018). In deviance studies, this means that perceptions of what is "deviant" rely on what *others* perceive/label as deviant. This also explains why, as norms and labels change, certain things like club drug use are still "deviant," but are seen as a different type of deviance as they may once have been (i.e., the "official definition" of "deviance" in this case has shifted) (Becker, 2018, p.175).

Importantly, Becker (2018) engages with what "deviance" means in his research of the deviant musician subculture. He emphasizes that deviance does *not* refer solely to the criminal or illegal, but can be broadly applied to those whose "culture and way of life are sufficiently bizarre and unconventional for them to be labelled as outsiders" in contrast to more "conventional members of the community" (Becker, 2018, p.77). This is a useful comparison for my project. It supports my assertion that, while club drug usage is *less deviant* than it used to be, it is still "unconventional" and has stigmas and perceptions attached to it.²

Becker's (2018) work on "Becoming a Marijuana User" (pp. 39-56) is important to my project, as it specifically addresses how people who use drugs benefit from social learning as they learn how they are supposed to consume and how they are supposed to feel. This approach also acknowledges that people who use drugs are the experts on their own experience and can share that expertise with others to learn the "dos and don'ts" of drug usage. Further, Becker (2018) explains how, through this social learning process, people who use drugs come to *enjoy* and *continue* their usage once they know the techniques and knowledges associated with drug use. This is important for my project as it provides a foundational understanding of the relationship between harm reduction and continued drug usage. As people practice harm reduction when using club drugs at raves, they choose to *continue* their usage with their

² The shift in the perception of the deviance of drug use is likely in part due to broader acceptance of recreational drug use, including of club drugs.

techniques and strategies for how to use safely in the back of their mind. Through this mitigation of harm, they can better focus on the *enjoyment* of the experience as a whole with the assurance that they have learned and taken appropriate steps to address potential risks. This whole process occurs *due to their interaction with others* (Becker, 2018).

Finally, Becker (2018) also engages with the relationship between drug use and social control. For people who use drugs, stereotypes, normativity, and perceptions of morality influence their usage. As an individual progresses past being a "novice user" they develop a set of assertions and beliefs to justify their usage in the face of stigma and moral questioning (Becker, 2018, p.71). As one is able to rationalize and justify their risk-taking behaviour which may otherwise be considered deviant/morally suspicious, they are more likely to continue that behaviour. For a raver, one could say that as they learn more about harm reduction and act in a way that reflects this knowledge, they can rationalize their club drug use in the face of potential risk or stereotyping. This is important to my study, as it provides a foundational knowledge of the process of risk justification, label-seeking, and stigma avoidance.

Literature Review

Harm reduction is central to this thesis. Harm reduction as an approach offers compassionate alternatives to traditionally punitive and absolute responses to situations with potential risks/harms associated with them, including general healthcare, sex work, and drug use (Hawk et. al, 2017; Rekart, 2005; Marlatt, 1996). By recognizing that there are risks built into many of these situations, people can develop strategies to mitigate them. For example, a harm reduction approach is the most logical approach for patients for many health issues. "Improving health behaviours" for some patients means reducing the harms of certain health concerns (i.e. eating disorders, substance use, etc.) as opposed to stopping them entirely (Hawk et. al, 2017, p.

2). For sex workers, harm reduction may include education about risks and safety strategies like condom-negotiating, prevention of STI transmission through the use of condoms, and vaccination against HIV (Rekart, 2005). This approach recognizes that sex work is a risk environment, and instead of trying to *stop* sex workers, it seeks to build and provide a toolkit for these workers to reduce potential harms. Harm reduction approaches, in general, *do not seek to stop the risk behaviours*. These approaches focus on making the risk behaviours *safer*. (Lenton & Single, 1998). For people who use drugs, the goal is *not* to stop people using drugs, it is to address and mitigate the risks that accompany substance use (Marlatt, 1996). This is paralleled for ravers in the EDM community.

At the core of "harm reduction" is the idea that if people are going to engage in risk behaviours, they should have the resources/opportunities to do so safely. As there is risk inherent in drug use, risk cannot be eliminated entirely for people who use drugs. This in mind, risks can be minimized to lessen the risks and potential negative consequences of drug use. This not only benefits the individual, but it benefits the community, as it promotes broader public health outcomes. Pragmatically, harm reduction approaches for people who use drugs divert tax dollars to other services that benefit all, as health services are less overloaded with overdose cases (McIntosh, 2020). Harm reduction approaches in whatever context they are applied ensure that those who can access the service are treated with dignity and as an equal and valued member of the community (McIntosh, 2020).

This is an expansion on solely-abstinence-based approaches that overlook that for some, abstinence will not result in their best health outcome, and does not address the harms associated with drug use in the first place (Lenton & Single, 1998). This is not to say that harm reduction is in tension with abstinence, as abstinence for some *is* an appropriate strategy to reduce harms.

Rather, broad harm reduction approaches generally have the "immediate and practical goal of reducing harm for users who cannot be expected to stop" or do not *want* to stop using substances at the present time (Lenton & Single, 1998, p.216). For people who use drugs, harm reduction is about mitigating the potential risks/harms associated with drug use to promote better health outcomes than are possible *without* harm reduction.

Despite a vast body of literature examining drug usage at raves (Lenton et. al, 1997; Palamar et. al, 2015; Rome, 2001; Kavanaugh & Anderson, 2008) and work on harm reduction generally (Henricksen, 2000; Roe, 2005; Fernandez-Calderon et. al, 2014; Saleemi et. al, 2017), few studies have analyzed the intersection of the two. For example, Ruane (2015) studied the dichotomy between psychedelic support and harm reduction at "transformational festivals" in the United States, the United Kingdom and Portugal. In this ethnographic study, Ruane notes that there is a tension between those using drugs at these festivals and harm reduction organizations, since traditional methods of harm reduction do not neatly align with the needs of those using psychedelics at festivals. Further, in this study, the three countries selected have vastly different drug policies and therefore have different social conceptions of drugs from each other, and Canada. Ruane's project points to a need to study the specific needs of people who use drugs, and their understandings of harm reduction to ascertain why people chose whether or not to engage with harm reduction resources when using illicit drugs.

Further research exists around the United States' RAVE Act (Reducing Americans' Vulnerability to Ecstasy Act) which states that "any music festival organizer who knowingly permits people to use drugs at their event could be held liable" for drug overdoses and mortality (Mohr, 2018, p.946). Mohr (2018) suggests that, by allowing harm reduction resources into festivals, organizers recognize people will use drugs at the event. Under the RAVE act, they

would be held accountable for any deaths *because* they know people will be using drugs. Officials could see it as "knowingly permit[ting] people to use drugs". As such, festival organizers may be hesitant to include harm reduction organizations at the festivals for fear of legal repercussions. However, there may still be surges of overdoses without harm reduction resources. Accordingly, it is crucial to recognize and assume people will use drugs at these events *regardless* of the presence or absence of harm reduction resources at the event. As such, Mohr seeks to make a case for the RAVE Act to make an exception in the legislation and allow harm reduction resources to be present without penalty to the festival organizers. This article provides good background and insight into the relationship between the American government and harm reduction at music festivals. It should be expanded to look at the relationships between event space, and drug policy in the Canadian context concerning harm reduction.

Some existing research suggests that people who use drugs in rave and club scenes engage in learning processes and generate their personal harm reduction strategies. These strategies may be born out of the "folk knowledge" from the "'experience' [of] club drug users in their attempt to avoid negative outcomes of club drugs" (Perrone, 2006, p. 28). Knowledges developed by people who use drugs are used "as a reference guide to control the effects, maximize the experience, and address negative reactions to the drugs" (Perrone, 2006, p.41). In other words, people develop personal strategies of harm reduction through experience and learning about the drugs they use. This is valuable background for my project as it provides a basis for recognizing that knowledge generated by users can serve as a form of harm reduction. Understanding these folk models and knowledges further aids in understanding how knowledge acquisition comes from experience and interaction with others. Thus, the meaning behind risk and specific drugs is socially constructed.

Additional scholarship in this area includes information about existing harm reduction initiatives in Canada that seek to make ravers experiences safe, including Winnipeg's Project Safe Audience (Koch, 2018). Project Safe Audience trains volunteers to test drugs and help reduce harm at rave events. At the time of publication, the Koch noted "harm reduction services in the rave community are few and far between" and as such Project Safe Audience volunteers were initially met with hesitancy from organizers of the raves they attended (Koch, 2018, p.23). Despite this, those who accessed the service indicated they were "grateful" and saw value in having the harm reduction service at the rave (Koch, 2018, p. 23). Through consultation with potential service patrons, Project Safe Audience found that there were additional resources required to address the needs of Winnipeg's rave scene such as "a safe space for people [...] having a psychedelic crisis," which they have since incorporated into their resources offered (Koch, 2018, p.24). This demonstrates value in consulting with (potential) harm reduction users to ensure that harm reduction resources can accurately address the needs of that particular regional rave community.

A similar program, DanceSafe, in the United States looks also at the experiences of people who access the harm reduction resource at raves (Hess, 2007). DanceSafe, as an organization, "connect[s] with youth within contexts where drug use is considered acceptable" to reinforce a safe community that addresses the needs of those using drugs at raves. Volunteers with DanceSafe start dialogues with youth at the raves about drug usage and experiences with drug usage. Hess indicates that "DanceSafe functions as a shoulder to lean on" for ravers as they learn about their drug usage from trusted others in the community (Hess, 2007, p.23). This reinforces this exact sense of community due to the non-judgemental approach inherent in harm reduction philosophy, and subsequent development of a relationship of trust in other ravers and

people who use drugs. Recognizing this function of DanceSafe as a community building resource is valuable to my project as this provides a basis on understanding the potential relationships that can be made between ravers and harm reduction organizations. Further, it provides insight into what perceptions of harm reduction could encourage or potentially discourage ravers from accessing services in Edmonton.

Further work on DanceSafe also takes into account DanceSafe's resources to reduce harm stemming from risky sexual encounters in addition to harm related to overdose and drug contamination, specifically tied to HIV and sexually transmitted infections (Henricksen, 2000). Henricksen (2000) emphasizes that harm reduction agencies like DanceSafe should be created and run by people *within* the community who have experience using drugs popular in the rave scene. With this background in mind, DanceSafe's harm reduction policies and values are rooted in the assertion "that the best way to protect ravers from making irresponsible decision begins with education from within the community" (Henricksen, 2000, p.3). This is valuable in the sense that the emphasis on community-based knowledge across multiple articles on harm reduction organizations implies the social aspect of drug usage and harm reduction is crucial when ravers who use drugs choose to access harm reduction. This also provides additional evidence that knowledge surrounding drugs and risks is a product of a process of social construction.

Additional research examines how young people who use drugs in rave settings understand "risk." How "youth impart meaning on [...] drugs shapes their understandings of risk" and thus their strategies for consumption of said drugs (Kelly, 2005, p.1444). Kelly (2005) further notes that youth who use club drugs understand risk through "folk models" or conceptions which they learn to understand risk through interaction with other people and

institutions. The strategies that youth develop and engage in when using drugs are developed "from the context-specific manner" associated with specific drugs and their risks (p.1455). My project will be informed by Kelly's work, as it provides evidences that people who use drugs in rave settings engage in risk management based on what they know and understand about the drugs they use. In line with the understanding that personal risk management is based in experience, additional literature has indicated that ravers may express "frustration that their voices as participants go unheard while the voices of the authorities" in policy decisions meant to ensure the safety of attendees (Hunt et al., 2007, p.74). This indicates that knowledge grounded in experience is important in informing decisions affecting people who use drugs at raves.

Importantly, existing research indicates that, to manage risks associated with their drug use, ravers take "individual steps to mitigate some of the negative physiological effects, including using harm reduction strategies" (Hunt et al., 2007, p. 87). Ravers who have developed their own strategies to navigate risks in this case considered themselves to be able to minimize risks while maximizing pleasure associated with the drugs they use. Crucially, this usage of drugs and development of risk mitigation strategies occurred in a social environment. The environment and the context in which ravers use drugs influence how people who use drugs understand and construct meaning surrounding potential risk. Ravers' "notions of safety in using drugs [...] are determined by both the setting and the individual's social group" (Hunt et al., 2007, p. 89). Therefore, this study provides background into how ravers who use drugs construct meaning around risk and develop strategies to mitigate risks associated with drugs. In recognition of this, it is likely ravers who use drugs come to understand and make choices about accessing harm reduction resources from an organization through similar processes of social construction. All of this existing work is beneficial in providing a basis for my project. It

provides background to the varying approaches, tensions, and dynamics between ravers and harm reduction resources in multiple locales.

The work described above will help inform my project. However, it is important to note that much of the existing literature surrounding raves and harm reduction is i) outdated, as much of the work on raves specifically was published in the early 2000s, and rave culture is morphing at a rapid pace; ii) context dependent, as drug policy and culture varies from location to location, even within Canada; and iii) does not take into consideration specific personal strategies of harm reduction that individual users may have developed and engage in. My project, while using the existing literature as a basis, addresses these gaps and provide a more modern understanding of EDM culture, and take into account this subculture's shift towards the mainstream. While there is existing literature on "folk" knowledges that aid in ravers who use drugs risk navigation, these studies do not explicitly address how these personal forms of risk management interact with organizational forms of harm reduction, nor label them explicitly as "harm reduction," which is a gap my project will fill.

Chapter 2: Methods

At the inception of this project, I intended to explore why ravers do or do not access harm reduction organizations. While I had kept this in mind writing my interview guide, I chose to leave my questions more general to allow participant voices to guide the conversation. In this, my project moved away from narrowly exploring why ravers do/do not access harm reduction, allowing me to explore the broader concept of harm reduction within the EDM community. Originally, I was going to conduct this project in two stages. In stage one, I would have engaged in participant observation at 3-5 large EDM shows/festivals in Alberta. Stage two was to consist of 15-20 semi-structured interviews with people who rave at Alberta venues. Including ethnographic observation would increase study credibility as findings, such as behaviours and cultural norms observed at the raves, can be corroborated in interviews, and vice versa. This would have allowed me to highlight any disjuncture between what people say they do and what they actually do (Jerolmack & Khan, 2014). Importantly, I intended to observe participants who both did and did not access harm reduction resources at rave events. Due to the emergence of the COVID-19 pandemic in the early spring of 2020, all raves in Alberta were cancelled,³ and I no longer had the opportunity to conduct any in-person recruitment or observation.

Initially, the project was to begin in May 2020 with participant observation. The first event I intended to observe was a concert by a popular Canadian DJ, Borgore, in Edmonton. In June, Bomfest, a two-day outdoor festival in Edmonton, would have been the next site of my data collection. In July, I would have attended a show by the DJ Illenium, who was going to perform an outdoor concert in Calgary. I had also planned to attend Chasing Summer – another two-day outdoor festival – in Calgary for observation. As participant observation would have

³ At time of writing (March 2021), all raves in Alberta remain cancelled as the pandemic continues.

been costly (tickets for attending shows are expensive), I had accounted for spending up to \$400 attending shows and events to conduct the ethnographic observation. I intended to engage in participant observation, which would help me develop a complete picture of how the culture “works” (Delamont, 2004).

As the reality of COVID-19 became more apparent, all shows and festivals in Alberta were cancelled. I was forced to rethink my project direction and adapt quickly – both in what I was intending on studying and how I would study it. As mentioned, I had initially planned to research why ravers do/do not access harm reduction through participant observation AND interviews. Despite this intention, I had to pivot my project to ask more general questions about harm reduction, as I could not corroborate statements by viewing raver behaviour in person. I wanted my project to have a broader scope. As such, I adjusted my interview guide to ensure I could have the most open questions to allow for the participants to guide the narrative. I also saw a unique opportunity to collect data at “online” raves. EDM DJs and festival organizers globally turned to online platforms like YouTube and Twitch to organize “virtual” raves that people can watch from the comfort of their homes. To address this, I watched some of these streams and included a brief section on the shift online in my interview guide. I further explore this aspect of the project in Chapter 5.

I was reminded of the importance of *flexibility* in qualitative research through all of this. By adapting and expanding my project, I ensured the narratives developed and data collected were as reflective of my participants’ experiences as possible (Holloway & Todres, 2003). I also allowed for flexibility as this method followed the grounded theory approach of developing theory out of the data, entirely based on participant narratives (Holloway & Todres, 2003; Charmaz, 2001).

Methods and Recruitment

This project consisted of 19 semi-structured interviews and 1 written response to the interview guide, for a total of 20 participants. I recruited participants between the ages of 18-26 as this age range is generally considered to be “youth” and were, therefore, the most likely to be active in the raving subculture. All participants lived in Edmonton and the surrounding area⁴. I selected participants based on how many raves they have attended to ensure participants had sufficient opportunities to potentially engage in harm reduction strategies and with resources. To be classified as someone “in” the subculture for my project, selected participants had used drugs while attending at least 5 raves. I chose 5 raves as the baseline that a participant had attended, as this would ensure I would be more likely to include more “experienced” ravers with this minimum. This also excluded “new” or “first-time” ravers. I chose to exclude this group as I felt it important that my participants had attended enough raves to have had ample opportunity to experience multiple aspects of raves and harm reduction. I did not choose to set my minimum as higher, as raves can be expensive, and the cost may be a barrier for some participants having attended more than 5. This was the minimum eligibility criteria for recruitment. As such, I included only the insights of those deeply familiar with the subculture in my thesis. I only recruited participants who spoke English, as I am unable to communicate in other languages.

I initially began recruitment for interviews with key informants whom I know personally and attempted to snowball from there. I asked individuals I identified as contact points to provide my contact information to individuals they know who may be interested in participating in the study. If they chose to participate, they would have the necessary information to contact me to

⁴ Whilst I would have likely recruited individuals from other areas of Alberta as well had I been attending festivals in Calgary and Edmonton, with COVID-19 restrictions, I exclusively recruited Edmonton-and-area-based participants.

indicate interest. This way, individuals who use illicit substances and were *not* interested in participating would not be known to me, thus protecting their privacy. To avoid only recruiting participants from one social group who may all have similar understandings and strategies of harm reduction, I also intended to engage in additional recruitment at raves by handing out a business card to rave-goers. This, of course, did not happen as COVID-19 made it unsafe to gather.

Initially, I reached out to individuals I knew through personal direct messages on Twitter and Snapchat instead of a text message, as that is how I would typically communicate with these individuals. I reached out to four people this way, and three of them agreed to be interviewed. Out of this cohort, only one individual whom I interviewed gave my information to someone unfamiliar to me. Unfortunately, this method of “convenience sampling,” often known as snowball sampling (Naderifar et al., 2017), was ineffective. I then turned to a broader social media strategy, as I have a long list of Facebook friends between the ages of 18-26, and I suspected that I either had ravers on my friends list and/or my friends had ravers on theirs. In July 2020, I posted on my personal Facebook page:

✨ Hey YEG raver pals! I’m currently working on collecting research for my Master’s thesis entitled “Navigating Risk: How ravers engage in harm reduction when using illicit drugs” and I’m looking for participants! ✨

Are you:

- ✓ Someone who has attended AT LEAST 5 raves (in Edmonton)!
- ✓ Someone who has used illicit substances at AT LEAST 5 raves?
- ✓ Between the ages of 18-26?

If this is you, I’d love to chat with you! Interviews take about an hour, and are ENTIRELY confidential and anonymous. You will be compensated for your time. Shoot me a message if this is you or someone you know and I can give you more info!

Within 24 hours, I had eight people shared the post to their pages and approximately 30 messages from people I knew and did not know offering to be part of this study. I filled the

remaining spots in my study in this period. Unfortunately, I chose to close recruitment once I hit 21 total participants (including the original 3 I had interviewed before this recruitment strategy), as I knew I would not have the capacity to analyze more than 21 interviews carefully. I also knew I would likely hit thematic saturation with this many interviews, as 21 participants would likely provide me with enough range of people to get both a full scope of the topic *and* an emergence of repeated themes (Lowe et al., 2018; Saunders et al., 2017). With the knowledge that saturation is subjective, I was prepared, as needed, to reopen recruitment if this many participants did not prove to be enough, but I was satisfied with the data I got (O'Reilly & Parker, 2013).

Only one person who initially offered to be in the study did not get back to me to schedule their interview. Thus, 20 people participated in this project – I interviewed 19 and one sent in a written response. Some of the participants I recruited in this process knew each other, and at least two participants informed me that they had either a) seen my post on their friend's page, or b) one of their friends had seen it and had sent it to them suggesting they participate. While this may not be considered a “conventional” snowball sample, in the prime of social media AND a global pandemic, I would argue this is a form of snowball sampling, nevertheless. Recruiting participants online is becoming an increasingly common practice across the social sciences (for example, Khatri et al., 2015; Hugelius et al., 2017; Garey et al., 2020), and has many benefits such as efficient recruitment through forwarded emails and messages, and the potential to be a more ‘invisible’ researcher to avoid social desirability bias (Murthy, 2008). While there are increasing challenges with the *ethics* of and approaches to cyber-recruitment and digital research practices (see Haggerty, 2004; Urbanik and Roks 2020; Whiteman, 2007), the benefits – especially during a global pandemic – of these methods should not be discounted.

As gender, race, class, and sexuality are some of the demographic variables that influence how people experience and interact with the social world (see Brown, 2012; Crenshaw, 1989), one's identity likely influences their drug usage and perceptions of/experiences with harm reduction (see Collins et al., 2019). It has already been established that various demographic factors such as "race/ethnicity, gender and sexual orientation" produce "significant associations" between identity and lifetime drug usage (Fendrich et al., 2003, p. 1699). The same is likely to be said of interactions within and related to the EDM community. While this is an important aspect that should be further addressed in research, and I had intended to unpack this through my research, the data did not speak enough to this to be included.

Confidentiality and Ethics

The University of Alberta Research and Ethics Board approved this study in April of 2020 (Pro00098183). A consent letter was emailed to participants upon their indication of interest. Participants had the opportunity to read it over prior to the interview to decide to participate. All potential risks and benefits were listed and made available to participants (see Appendix 1 for the Information and Consent Letter). To ensure the privacy of my participants, all interviews were anonymized and only labelled with the date of the interview and their initials for my own organization.

Further, because I conducted the interviews mostly remotely, I attained participant consent verbally at the beginning of each interview. This also served to maintain confidentiality as no participants had to link their names to their interviews. When I began my analysis, I assigned each participant a pseudonym. All identifying characteristics are removed and/or changed to protect anonymity further (e.g., names, workplaces, organizations or groups

participants work with, information shared about others). Due to the nature of the study (about illicit drug possession and usage), it was crucial that participants were made aware of the confidential nature of their participation. All data files are stored on my computer, and no one but myself has access to the documents, which are all protected with a passcode and fingerprint ID.

I ensured I made clear to participants that their participation was voluntary and were under no obligation to participate. I wrote this into the consent form and reiterated it throughout the interview. I assured participants they could choose not to answer or skip questions without penalty. Participants were also made aware that they would likely be asked to recount potentially traumatic or unpleasant experiences. Again, they were reminded that they could request to stop the interview or skip questions at any time, without penalty, if they were uncomfortable and/or for any other reason. Whenever a participant shared an unpleasant memory or experience with me, I was sure to thank them for sharing and make sure they knew I appreciated their vulnerability. This supports a respectful interviewer-interviewee relationship that maintains that the interview space is a safe one and respects the participant's standpoint and experience. This is a crucial practice in qualitative research, as there is a power dichotomy at play between interviewer-interviewee. Participants are in vulnerable positions when being interviewed. To address this dynamic, researchers must centre participant voices. Interviews are power-informed relationships that require nuance and respect from the interviewer to the interviewee (Briggs, 2001; Song & Parker, 1995; Hood et al., 1999).

I compensated participants for their time in the form of a \$10 Starbucks e-gift card. I choose this option as I could purchase it online and email it to the participant, and they do not require a Starbucks account to use it. Participants were not told about the gift card until they read

the consent form after reaching out to me to express interest. At this time, they could still opt out after reading the form and knowing about the compensation. By *not* recruiting on the basis of people wanting compensation, participants' willingness to participate was less influenced by the compensation and more by their interest in the study. Further, I stressed to my personal contacts they were not obligated to participate because of the voluntary nature. I was initially concerned there may be a power imbalance between myself and these individuals and that they may feel like they "have" to participate, but I ensured it was clear that they did not have to join if they did not want to.

Sample

My participants' ages ranged from 20-26, with the majority of them concentrated between the ages of 22-25. Most of my participants were university students. All identified as being "working" and/or "middle" class (equal distribution). The majority were employed at the time of the interview, and many of them worked in the hospitality and retail industries. Most of my participants identified as heterosexual, though 6 identified as being part of the LGBTQ2S+ community (*lesbian (1), bisexual (4), and queer (1)*). As for gender identity, 8 participants identified as male, 11 as female, and one person indicated they use both he/him pronouns and they/them pronouns. It is important to allow people to self-identify rather than categorize people into a small number of categories (Smith, 1997; Itzigsohn et al., 2005). This allows participants' voices to be centred, identities to be valued, and better accounts for nuances in identity than pre-defined categories do. For this reason, I did not give participants stringent categories to ascribe to when asking them in the demographic section of the interview and allowed them to tell *me* how they identify. I will list below the racial breakdown of how participants identify: Indigenous and

Chinese – 1; Vietnamese – 1; Middle Eastern/Iranian – 1; Caucasian – 6; Caucasian-Métis – 1; Asian – 2; Filipino – 2; Chinese-Canadian – 1; Half white and half Japanese – 1; Half black and half white, from Barbados – 1; Malaysian-Chinese – 1; Indian – Canadian – 1; Ukrainian – 1.

My participants' experiences with raving ranged from 1-12 years, though most reported raving for about 2-5 years. All my participants had been to at least five rave events at the time of the interview. Overall, most participants said they preferred to attend festivals and “massives” or larger shows held at the conference and event centres in Edmonton that have room capacities of approximately 5000 people at a time. A significant portion of individuals said they preferred the smaller, more “intimate” shows at local venues or underground warehouse parties with a significantly smaller mainstream draw. There was a fairly even distribution between participants who had never done drugs until they started raving and people who had only consumed cannabis or alcohol until they started raving when they began to use more illicit substances (primarily MDMA/ecstasy or LSD). 5 participants said they were using an illicit substance (i.e. drugs other than cannabis or alcohol) prior to raving. Some of my participants informed me they raved sober or only used cannabis at raves *now*, but used to consume illicit substances at raves.

Interviews

I chose to use semi-structured interviews so that participants' voices are central to the data to have the most accurate accounts and narratives of their experiences with harm reduction at raves. Interviews ranged from 30 minutes to 95 minutes, though the majority were approximately 50 minutes long. Most interviews took place over Facetime or the phone due to the COVID-19 pandemic. Two interviews took place in person – one in a coffee shop and one in a meeting room – as my participants wanted to participate but were at work and preferred an in-

person interview. One participant lost her voice just before our scheduled interview and requested to write her responses to the interview guide instead, which I happily accepted. All oral interviews were recorded on my cell phone or laptop and saved as audio files on my computer to be transcribed and coded later.

My interview guide, while detailed, was used to shape the conversation while still allowing participants' voices to be the main focus. This falls in line with the grounded theory school of thought in qualitative research wherein data garnered in these interviews guides the direction of the conclusions (Charmaz, 2001). I broke the interview guide into five sections: 1) Raves; 2) Harm Reduction; 3) General Questions; 4) Online Raves; 5) Participant Information.

The first section, "Raves," broadly asked about participant's raving experiences, how long they'd raved for, and who they raved with. Questions in the "Harm Reduction" section sought to better understand a) how ravers understand their own harm reduction strategies – even if they did not call it that specifically – and b) how ravers understood and felt about harm reduction organizations. The third section, "General Questions," asked about broader connections between raving and harm reduction, as well as an opportunity to talk about Fentanyl, as I was interested if this drug (often vilified in broader society) was of particular concern for ravers. I was curious to hear if any of my participants had any thoughts on the digital rave 'streams' on online platforms that many well-known artists and festivals embraced as COVID-19 continued to shut down the industry. As such, I included the fourth section, "Online Raves," in my interviews. While this was not part of my "main" project, I would be remiss to overlook this unique opportunity to attempt to collect data on such a precarious time for the EDM community. Finally, the final section, "Participant Information," included general demographic information to get a sense of my participant base.

These sections contained main questions and probing questions to guide the interviews along. Many of the questions also had follow-ups, depending on how the participant answered. After the fourth interview, I found I did not need to rely as much on the interview guide and instead was able to focus more on the *flow* of the conversation. I italicized questions that were not eliciting “new” answers in comparison to other questions so that I would not delete them entirely from my guide. Instead, I would be reminded that I likely did not need to ask certain questions unless I needed to probe further, as they were essentially repeating previous questions in different words. While this can be useful in ascertaining the nuance of participant’s answers, I found I was just getting the same answers to multiple questions throughout one interview. I decided it would be better to unpack the answers given instead of asking questions that would elicit the same response.

Through the interview process, each interview evolved and became more streamlined as I learned more about the scene – questions I would ask in the first few interviews about drug terminology or rave slang like “kandi flip⁵” or “G⁶” had become part of my vocabulary. The questions asked also became more directed and effective over time. Once I became comfortable in the “role” of the interviewer, I better understood how to recognize the nuances in my participants’ answers. I also got better at asking questions in a way that participants were able to quickly understand what I was getting at. Initially, some of the phrasings of the questions in my guide were convoluted. I quickly realized I should revise my language to be more straightforward and more direct in my questions. This streamlined the process and made it a lot

⁵ A “kandi flip” generally refers to taking acid and MDMA at the same time to combine the hallucinogenic effect of the acid with the euphoric effect of MDMA. This was a popular mix for many of my participants and their friends.

⁶ “G” is short for GHB or gamma-hydroxybutyrate – better known as the “date-rape drug.” This substance is commonly used by some ravers.

easier for participants to answer honestly and from their gut instead of having to think through all the parts of the questions they were asked.

Data Analysis

Each interview was transcribed verbatim. During the interviews, I took highly detailed jottings of each participant's comments, noting themes that emerged in each interview as I went. When it came time to transcribe, I opted to skip over line-by-line coding as I was able to easily look at my notes to get the thematic nuance of each interview based on what I had written down in my jottings. As such, I was able to code thematically – what Gibbs (2012) would refer to as “analytic coding” – by looking at the themes I found interesting while interviewing participants. I went through each transcript to find sections and answers that addressed the main themes I noticed in my notes. From here, I was able to narrow down which themes I felt were most important to focus on: “community” and “knowledge.” I chose to code this way to better “facilitate comparison between” (Maxwell, 2012, p. 137) different passages, as well as to pay deeper attention to the nuances of the overall messages of my data. In this sense, I skipped over the “substantive” coding in lieu of determining “theoretical categories,” as this allowed me to develop theory from my data as opposed to relate it to theory (Maxwell, 2012).

Positionality

It is important to acknowledge my positionality in this research. I am an outsider in the EDM community – I have never attended a rave or accessed a harm reduction service for myself. I ensured I was transparent about this during interviews – many of my participants would ask me questions like “have you been to a rave?” or “do you know what I’m talking about?” and I would

inform them that I have *not*, and would need them to explain this to me. They always obliged. I am also conscious of how my physical appearance invites presuppositions from participants. A portion of my interviews were done in person/on a video call. Further, my recruitment on Facebook was attached to my personal account with my profile picture visible. My arms are full of visible tattoos, and I have visible facial piercings and unnaturally coloured hair. I am aware that this likely played a role in individuals feeling comfortable joining my study and answering my questions about their raving behaviours, as I present myself similarly to many other ravers. Due to this, I thought it especially important that I was transparent about my status as an outsider to ensure I was not portraying a different, untruthful version of myself to my participants.

While I did want to present myself as a trustworthy person to speak with and potentially disclose information to, I wanted to make sure participants felt this way because of my overall demeanour and not my perceived status as a raver. Overall, though, I believe that my demeanour and “alternative” appearance allowed participants to feel comfortable discussing their raving/drug use experience with me, despite being an outsider. In this way, I was an “insider-outsider” (Humphrey, 2007). While I fit the bill as an “alternative” individual, much like many ravers define themselves, I am also *not* a raver. It is in the “hyphen” of this label that I needed to engage with to bolster my data collection: participants felt comfortable speaking with me as they *could* perceive me as an “insider” (Humphrey, 2007). At the same time, my role as an outsider allowed me to take an objective position on the culture (Humphrey, 2007). Trust is an important relationship between participants and a researcher, especially in studies of illicit behaviour (Bucerius, 2013). As an outsider, my participants needed to trust me so I could receive this “insider knowledge” of the EDM community (Bucerius, 2013, p. 691). Through our interactions and the way I present myself, I became a “trusted outsider” to my participants (Bucerius, 2013).

I personally believe in the importance of harm reduction, safe supply, and decriminalization. While this had the potential to be detrimental in terms of bias, my support for harm reduction initiatives also allowed me to be an understanding, allied listener to my participants. I found, as well, that all my participants shared similar beliefs with me regarding harm reduction, which allowed me to understand and engage with their opinions more holistically. Although my personal opinions did not come up as much in the interviews as my personal experience (and lack thereof) at raves, they still *did* come up. Participants tended to finish statements on harm reduction strategies (i.e., safe supply, decriminalization, supervised consumption, etc.) with “you know?” While this is likely a colloquial speech pattern, I felt it necessary to confirm that I know what they are talking about and affirm that they were speaking with someone like-minded. In this case, my personal biases also contributed to my “insider-outsider” status, as my values generally aligned with my participants, allowing them to view me as an “ally” of sorts in the field of harm reduction and drug use.

As mentioned, all my participants were supportive of harm reduction. This is an interesting note, as there are likely many reasons why this is. Many of my participants likely believe harm reduction is a positive thing due to their drug usage. They may recognize that they are among a broader community of people who use drugs that should be provided the opportunity to use safely. The majority of my participants and I have mutual friends, and specifically, friends I know are pro-harm reduction. Likely, then, this affected my access. As my personal friends who are pro-harm reduction shared my recruitment post with their friends (and so on) whom they thought would like to be part of my study, the recruitment post was primarily seen by/sent to other pro-harm reduction individuals. At the end of their interviews, many of my participants expressed to me that they thought this project was both interesting and important and

were glad I was undertaking it. This sentiment confirms that people who are pro-harm reduction were more attracted to my study than anti-harm reduction individuals.

Chapter 3: "Community" as Harm Reduction

This chapter will examine how the concept of "community" in the Edmonton EDM subculture is inherently a form of harm reduction. Considering the social nature of EDM and rave culture, the formation of relationships – both formally defined and informally implied – serves as an opportunity for ravers to provide care and safety *to* and *for* each other. Through ravers' connections with others within the community, I demonstrate that ravers engage in a style of organic, unspoken harm reduction. While ravers may have specific strategies of reducing harm, this chapter will primarily address how connection to others is a core of harm reduction. For ravers, a sense of "community" plays a role in making the environment of a rave conducive to, and exemplary of, harm reduction, and this chapter will delineate how. My data reveals numerous influences illustrate community *as* an organic harm reduction practice: i) "PLUR" culture⁷ as a community characteristic; ii) a deep sense of duty of care ingrained in the culture; iii) the social transmission of knowledge.

EDM and Drugs

Connection with like-minded individuals is important to many EDM fans. Apart from a love of the music, many ravers cite that the connections they make with others – the community they build – are an incredibly important part of their experiences in the EDM scene. In many cases, "ravers pride themselves on their lack of pretension and their open acceptance of themselves and their community," branding raves as "safe havens" for those who may otherwise not fit in with broader society (Weir, 2000, p.1844). This inclusivity and sense of community are

⁷ PLUR culture refers to the oft-stated catchphrase of the EDM community: "Peace, Love, Unity, and Respect." (See Anderson, 2009; Lorenz, 2014; Weber, 1999; Villalobos, 2015)

characterized by a widespread "party etiquette of peace, love, unity and respect," better known as PLUR (Weir, 2000, p.1843). It is important to note that drug usage is considered a focal characteristic of the EDM community as "many illicit drugs are available at raves and are used liberally to enhance the "vibe"" (Weir, 2000, p.1844). Many scholars have acknowledged the important role of community and connection for EDM fans (Goulding et al., 2010; Wagner, 2014; St. John, 2006; McLeod, 2001). However, there is notably less existing literature on community in EDM that also focuses on the normalization of drugs within the culture and transmission of knowledge (Weir, 2000; Kelly, 2005; Soussan et al.,2014).

Dance music has a historied relationship with drug usage, and the current generation of EDM and ravers tend to be characterized in relation to drug use, as well. Perceptions of the risks of drug usage may not be the same at a rave as they would be in other social environments. "Some of those who [use] drugs at raves consider the environment friendly to drug-taking because the parties are safe" due to the venue, the people, and "the absence of drunken people" fighting (Weber, 1999, p. 324). A notable reason why drugs are so characteristic of the culture is that ravers view raves as appropriate venues for consumption. While "drugs [play] such a significant role in the parties," other aspects like community and connection are still important to the culture (Weber, 1999, p.327-328). Despite this normalization of drug usage, many ravers perceive "people who attend the parties strictly for using drugs" as "not going for the right reasons" (Weber, 1999, p. 327). This serves as further evidence that, while the drug culture of raves is important to many ravers, it is not necessarily ravers' *sole* focus or primary motivation, nor should it be considered the master status of many (Hughes, 1945).

Knowledge transmission for people who use club drugs is an interesting social interaction. Much of current literature explores this process through the lens of social learning

theories, including differential association (see Sutherland, 1992; Akers et al., 1979). Through viewing others' behaviours and sharing values, attitudes, techniques, and beliefs, ravers share their knowledge with others in the community. Learning techniques for safe drug usage is a product of the social environment an individual is a part of (Rukus et al., 2017). Through exposure to others with experience, who share these experiences, people can internalize the knowledge shared with them. As individuals get deeper into the identity of a raver who uses club drugs, they learn "techniques and motivations" from the people around them – much like as is chronicled in Becker's (1953) work (Orcutt, 1987, p. 344).

"Experienced users" especially play a role in this knowledge transmission, as they can provide advice to their peers based on their experience (Marin et al., 2017). Experience here is important, as the level of experience can act as a rationale for viewing someone's advice as legitimate. Further, people who use club drugs can and do share how they consumed, what they felt, and what happened to them during their experience. This influences others' perceptions of what *their* experiences *should* be like, based on others' experiences. This is a fascinating aspect of social learning and knowledge transmission; not only are ravers learning *how* to consume substances, but they also learn *why* and *what "should" happen* (Marin et al., 2017). As such, fellow ravers play a key role in developing knowledge. More broadly, the social nature of the EDM community plays a significant role in the transmission of ravers' knowledges.

Ravers' conceptions of risk explain in part why many engage in drug culture. In fact, how people understand risk is shaped by how they understand the drugs themselves (Kelly, 2005). Kelly (2005) further notes that youth who use club drugs understand risk through 'folk models,' which are socially constructed and "experientially based" (p.1450). The strategies youth develop and engage in when using drugs come "from the context-specific manner" that they associate

with specific drugs and their risks (p.1455). This suggests the social aspect of raves and drug culture is highly influential to ravers' consumption.

Harm Reduction

Harm reduction as a concept can be traced back to the beginning of the AIDS crisis and the promotion of both safer sex practices and safer injection practices (Race, 2008). The accompanying body of work focuses predominantly on these roots and on the applications of harm reduction principles to fit different community contexts, ranging from drugs to safe sex to women's health care (see Roe, 2005; Shernoff, 2006; Briozzo, 2016). Harm reduction as a guiding principle has surged in popularity and application. In Canada during the 1980s, institutions shifted their approach to combat the HIV/AIDS health crisis that represented "the 'risk reduction,' 'harm reduction' and 'harm minimization' solution" (Roe, 2005, p. 243). This shift promoted a move away from solely policing and punishment, which allowed for the unique needs of people at risk of contracting HIV/AIDS⁸ to be addressed as a *health* matter prior to/in lieu of legal responses (Roe, 2005).

Harm reduction, grounded in the early days of the HIV/AIDS epidemic, "addresses the reality that not everyone *wants to* or *can* stop using drugs and differs from an abstinence-based approach in that it is not judgmental about an individual's use of substances" (Shernoff, 2006, p. 110, emphasis added). This was an alternative approach to early HIV/AIDS treatment that excluded people who contracted HIV/AIDS through intravenous drug use from accessing services unless they were no longer using substances (Shernoff, 2006). Community members who belonged to stigmatized populations during the epidemic worked to reshape the perception

⁸ Roe's (2005) term

of HIV/AIDS and those who contracted it and restructure how the epidemic was institutionally addressed (Escoffier, 1999). As such, harm reduction, at its core, is a "community response" that provides care and advocacy (Escoffier, 1999, p. 14). In some cases, community members realize that participating in harm reduction is a "matter of life and death" (Escoffier, 1999, p. 18). Harm reduction, in this context, applies not only to safe sex practices but also to safe drug practices. The principles underscoring harm reduction for people who use drugs intravenously during the HIV/AIDS crisis are just as applicable to the broader discussion of harm reduction for *all* people who use drugs beyond the crisis.

As discussed in Chapter 1, harm reduction in Edmonton consciously entered the EDM scene in the 1990s. Discussions around harm reduction in the broader EDM community tend to acknowledge that "the user would be using drugs regardless of the external input" from others, and in turn, the user "has nothing to lose by becoming more informed" about their decisions (Henricksen, 2000, p. 4; Frei, 2010; Ma & Perera, 2016; Caulkins & Reuter, 2005; Fletcher et al., 2010). Inspired by the values and principles that underpin harm reduction, for people who use club drugs, harm reduction is similarly grounded within community and seeks to address the need for safety for those consuming drugs, *regardless* of personal contexts (i.e., identity, criminal status, history of drug usage, etc.). It operates as a "paradigm for the care of drug users offering an alternative to approaches which focus on criminalization and abstinence" and instead supports personal choices regarding substance use (Ruane, 2015, p. 57).

PLUR Culture

My data reveals that PLUR is a characteristic of the EDM community central to harm reduction. PLUR culture is grounded in the values of peace, love, unity, and respect. As a value-

based ideology, PLUR embodies the sense of community that draws many ravers into the scene. For many ravers, the connection and sharing of an experience that comes with promoting PLUR allows them to find community and connection with those around them – both the friends they come with and the friends they meet (Conner, 2015; Park, 2015; Wu, 2010).

A notable aspect of PLUR that allows for community connection is "Kandi Culture." In Kandi Culture, when two ravers come together and feel connected, even if they are strangers, they put their hands together as a form of ritual to symbolize connection. When trading "kandi" – beaded bracelets, ravers do a 4 step handshake where they first make a peace sign with the tips of their fingers touching to symbolize peace; they then put their hands together to make a heart to symbolize love; then they clasp and interlock their hands together to represent unity; and the ritual concludes with them trading kandi over their interlocked hands out of respect (iHeartRaves, 2020).

Kandi is often hand-made with the intention of trading. Some ravers who are particularly crafty go beyond simple bracelets and make other items like necklaces or clothing they can give away. This dedication to preparing kandi to share indicates that, for many, the ideals behind PLUR go beyond just the ritual of a rave and are more deeply engrained in their person. Ravers tend to collect Kandi and wear many bracelets at once – for some, their entire forearms are full of Kandi. Kandi etiquette generally dictates that giving kandi away is a sign of PLUR and inclusivity and is not only a symbol of previous connections but a way to connect to those who seem like they need to be drawn into the community (iHeartRaves, 2020). Kandi, then, is both a symbol of PLUR culture and a conduit of it.

The interesting part about trading kandi is, in many cases, ravers will create and express this connection with a person they have never met before and will likely not meet again. It is not

necessarily about creating a *lasting* connection but rather about expressing connection *in the moment*. One participant described their experience with Kandi Culture at one of their first raves they attended:

*I just started talking to these two people. That's what's so great about the culture is it's just so easy to like, meet people. And I think a lot of people in like regular society are scared of going up to one another. And if you start a conversation with somebody, they think it's like, weird, like, "I don't know, what do you want from me?" And at the shows, you just go up and you introduce yourself and you like get to know these people and everybody's very open. So, I started talking with this couple, and we just had great conversation, I think I can't even really remember what it was. [...] We didn't exchange contact information, but he was like, hey, I want to give you something and he went like this (gestured the start of the PLUR handshake) and I didn't know what was going on. He was like "fresh raver, obviously I'm going to teach her something." Oh, there's like a handshake. Okay, I guess and it represents peace, love, unity and respect. [...] So we do this handshake, and he gives me this bracelet. I still have it. It was my first bracelet I ever got. And it just really represented what he taught me: peace, love, unity and respect as like foundational values. **He taught me this** like culture of generosity and giving and like community.*

As June describes, this moment of connection with a complete stranger was incredibly foundational and educational in terms of her learning of the culture. This account unmask the EDM community's nature as one that celebrates openness and inclusivity. The stranger's willingness to give June a bracelet during a fleeting meeting and bringing her into and "teaching" her the "culture" indicates ravers' general willingness to connect with others for the sake of connection.

This interaction embodies PLUR because it shows that ravers who ascribe to PLUR will take a person for who they are and draw them into the community, allowing them to spread that connection as they move through the scene. The meaning and symbolism behind PLUR's ritualism and kandi sharing is intrinsic to connection and community within EDM. For some ravers, sharing kandi is "an exchange of a part of yourself, usually given to a fellow raver that you bond with. Trading kandi is more than just being friendly; it is a way to affirm another

human being" (Lorenz, 2014, p.14). Through this affirmation process, ravers can create deep connections with other ravers – even if they are strangers. This connection "'strengthens' and unites ravers within the shared belief of PLUR and is a performance that seeks to spread its values to the outside world as well" (Lorenz, 2014, p. 15). Although it is a performance, it is not *performative* so much as it is *symbolic*. Generally, the deep sense of connection and community intrinsic in PLUR (and therefore kandi) culture is not done as a "show" for others but because ravers genuinely value what PLUR stands for and what kandi represents.

For Alexander, PLUR, as an aspect of community and exhibited by kandi culture, is tied to the sense of the love and connection he feels for his friends:

*They call it peace, love, unity and respect. I find that's kind of like a common theme that people chat about. They even make kandi – it's like plastic bracelets and we do a handshake where it's like, peace you do the peace sing to symbolize peace, and do hands together, love and it's like unity, and then like you each share like a kandi. So it's kind of like a thing for people to be nice to each other and it's probably a side effect of the list of substances I could use because you feel more **euphoric and lovey-dovey and social and respectful and friendly** and stuff and sweating. That's kind of like an outcome of that behavior. So because of that you also want to take care of like your friends and stuff too.*

Alexander points out that it is likely the substances he uses at raves play a role in his relationship with the community as a whole. With lowered inhibition and increased feelings of being "lovey-dovey," ravers likely have an easier time connecting, expressing this connection through the trading of kandi. Not only does this emotion manifest in the PLUR motto, but it also is a guide for how the community acts and responds to the substances they use.

The aspect of connection and community that comes with PLUR culture is a form of harm reduction. While not denying that there is always the potential for negative risks when it comes to raving, PLUR culture seeks to make the social environment a safe one. Before accounting for the typical "risks" one may imagine when they think of raving – drug use, legal implications, unsafe sex, hearing damage, etc. – I argue the *community* itself is first "designed" to

lessen the risk environment because of the values-based, unspoken, code of conduct. This is not to say that there is *no* risk potential in the environment, but the nature of "harm reduction" work is the recognition that there is a risk potential, and the goal is to mitigate it as best as possible. In this sense, perceptions of risk are greatly influenced by the social aspect. In many cases, the *concerns* over "risk" are almost non-existent *because* of the function of community as a safety net. The majority of the effects of consuming substances at a rave that a non-raver may perceive as having a level of "risk" to it, for many ravers, are not of as great a concern as they perceive themselves as being safe within the community. While there are potential risks present, ravers' concerns about engaging in risk behaviours are lessened due to the nature of the community.

For some ravers, this idea of "risk and consequences" is balanced *by* the community aspect of the EDM scene. To illustrate, when I asked Scott if he perceives there to be any consequences of drug usage at a rave, he replied:

*Everything has consequences. But like, I think across the board, they are significantly more positive than they are negative. [...] You've experienced creating like **a greater connection** in the community, that **social aspect** that kind of comes out a lot. Just kind of having fun, I guess, like those are generally the consequences that I see a lot with raves – that kind of connection, community piece, and that social aspect.*

While Scott recognizes that there is the potential for negative consequences when doing drugs at raves, "everything has consequences." Scott points out that going to raves, for him, is not about the drug usage but about the community and forming social bonds. It is important to note here that using drugs is not a mandatory part of participating in raves. Instead, as Scott suggests, the drug usage *enhances* the *main* draw for some ravers –connection to others. The social nature of the EDM community offers an opportunity for people to foster deeper connections with other like-minded people. For many (but not all) ravers, using drugs allows them to enhance the show, the experience, and the depth of connection they have with the people around them.

Sarah explains this well when asked why she started raving:

*It was definitely for friends... like it's a **bonding experience**. Like, I love hanging with my friends and I guess, right, it's definitely brought us closer together, like compared to the real world, and especially when taking like MDMA. It has this effect where you kind of like lowers your barriers, like you're more receptive to love and like expressing it to your friends. And so that's part of how like, we get closer because I feel like those barriers that keep you from, like, you know, fully expressing yourself to your peers are let down. So, I think there's more honest communication.*

Sarah's suggestion that her drug use enhances her connection with her friends is an important one. For her, drugs enhance the overall experience of the show while also enhancing and strengthening her relationship with her friends that she attends with. This connection is evidenced in the perceived strengthening of the bond between friends that, for this participant, may not have been possible in the same ways *without* MDMA. In this sense, consuming drugs at a rave has positive outcomes for many ravers: enhancing and deepening connections with others. This allows, as Sarah suggests, for greater communication and greater expression of care to others and a release of inhibitions. Through this, a stage is set that allows raves to be a "safe" place for people to "fully" be themselves and have honest, open connections with those around them. This sense of connection is a crucial part of building a safe and inclusive community, as it sets a precedent grounded in PLUR for ravers' sense of a duty of care.

Duty of Care

My data reveals an unspoken social contract exists between some members of the EDM community – the duty of care towards others. In addition to the precedent that PLUR sets for the scene as a safe space as a whole, ravers feel a sense of responsibility for the people around them. Not only is this social contract a set of values-based expectations defined by PLUR culture, but it is also found in this sense of responsibility to keep those around you safe. While this

responsibility is most visibly identifiable amongst immediate social circles (close friends), ravers recognize a general responsibility to the *community as a whole*, irrespective of acquaintance. One participant suggested that she is conscious of her levels of drug usage because she "wants to be in a state that I'm able to, like, look out for myself and others" (Charlene). Charlene often attends raves alone to better engage with the people that she meets spontaneously. In this case, her sense of duty of care to others does not end with her close friends but extends to the broader community of ravers.

It is also interesting to note that Charlene, as a woman, is comfortable attending a rave alone. For many women and non-binary folks, engaging in nightlife alone is something they avoid. Fears of sexual assault, harassment, and being drugged are all prominent factors why most women do not go to bars or clubs alone (Sheard, 2011; García-Carpintero et al., 2020). While there are many parallels between raves and other institutions of the nightlife industry – loud music, substance consumption, and dancing – it is interesting that Charlene does not cite the same fears that many women have in bars and clubs. This is potentially indicative of the safety afforded by the EDM scene in a rave space. As an open, welcoming, safer space, Charlene is comfortable attending raves alone to meet new people there.

According to Charlene, she promotes a culture of consent to keep the community safe. She mentions that she is often part of an informal "consent team" to keep "eyes out for dance floor creeps" and to promote consent culture (Charlene)⁹. In this role, she and the rest of her team identify themselves to other ravers as people who can be reached out to for help if someone is in distress. This promotion of consent culture goes well beyond duty to your immediate friends and speaks to the nature of the sense of commitment in the broader EDM community. While other

⁹ Charlene's "consent team" is informal, as it is a group including Charlene and her friends who have taken it upon themselves to be advocates for consent at the raves she attends.

participants may not necessarily identify themselves as part of a "consent team," the ideals behind consent and safety are not unique to Charlene and her friends. Instead, it is an expectation entrenched in the culture of respect for others (as suggested by PLUR). Further, due to her love of the community, Charlene's sense of responsibility to contribute positively is formed. This particular case is a relatively organic example of harm reduction. The sentiment at its core – to keep the community safe – indicates how ravers can come to embody this duty of care to the community as a whole.¹⁰

This notion of care is perhaps best illustrated by the self-ascription to social roles seen in the example of the "group parent" that some ravers fill within their own social groups. While friends may take turns as the "mom or dad" of the group, in some circles, the individual who assumes this role remains sober throughout the night and is often the same person each time. One participant—Tom—identified himself as the consistent group parent:

When we were younger, there was no concept of, I guess mom and dad of the group or one or the other. But nowadays, there definitely is. There's definitely someone – which is now me since I'm the one who doesn't do drugs anymore – as the mom or dad of the group, but, you know, if something goes wrong, you guys text me or need something, you guys text me like, there's always that concept now. [...] I've taken people like home and stuff. Like, you know, the show was over, and they have a nice time and people be like, "I don't want to get in a cab. I don't want to do this. I don't want to be alone right now." Like I've gone over with them to their place, got them into their house and been like, "okay, like, I'm gonna go now. You're okay, you're in your bed," and then go.

Tom had been raving for five years at the time of the interview but had stopped taking club drugs for the past year at raves. While he had never had any stand-out negative experiences with drugs at raves, he no longer consumes substances when attending raves with his large group of friends – his group chat of people he knows that rave is upwards of 70 people. As he mostly remains

¹⁰ This duty of care is reminiscent of how "duty of care" operates in other nightlife settings. For example, anecdotally, women in bathrooms at nightlife venues tend to offer care/help to the other individuals whom they meet in the bathrooms. The fleeting connection of two or more women in a bathroom offering each other compliments and/or help if they are sick or in danger is a common experience for many women across the world.

sober at raves now, he makes himself available to support any member of his group "*if something goes wrong.*" This could mean any number of things – if their trips take a dark turn; their mental or emotional state becomes negative; they have an adverse reaction to substances; they want to go home; or even something as simple as getting separated from the group. As the group parent, Tom supports his friends with what they need to make sure they have a positive experience.

Accounting for and addressing potential things that could "go wrong" is part of the continuum of care embodied in the sense of care for others. The continuum of care, then, is *not* just concerned with risks of drug consumption; it extends to other risks as well (responding if *anything* goes wrong). Being this "go-to person" makes his experience, in turn, positive as well, as care for his friends is important to him. This is an excellent example of "duty of care *as* harm reduction" since Tom's sense of responsibility for his friends, and the role he takes in their relationship in caring for the group helps them mitigate potential harms. By taking the safety of his friends into his own hands – offering them rides, being the person they can reach out to when they need help, etc. – he ensures that any potential harms that could happen if his friends *did not* have him there to help are accounted for and moderated.

Katy similarly described the "family labels" of her friend group. In her case, she recounted an incident where one of the members of her friend group was passing out, and an older member of the group stepped in to aid the situation:

It wasn't an overdose, but I did have one friend at Chasing Summer¹¹, we were leaving a hotel party, and she ended up passing out. I feel like we were all kind of panic. We were just worried... we didn't know it was kind of going on but she kind of came through so she wasn't unconscious or anything, but we were really worried. And then my one friend is older than me, and she kind of "mother henned" it, and she was like, "Listen, like we need to make sure that you're okay, we need to get help," like, better safe than sorry kind of thing. Like "we're gonna make sure you're good." So I was kind of a little bit hesitant because they were supposed to come back to Edmonton, and we were in Calgary for Chasing Summer. And so we're like, "you're gonna miss your ride home, but we'll get you

¹¹ A popular weekend EDM festival in Calgary, Alberta.

home. We just want to make sure you're okay." So we ended up like going with her to the hospital and everything.

In this instance, the group's "mother hen" took the onus upon herself to ensure that the person having a negative experience was safe and received help. This ultimately encouraged the rest of the group to follow suit, despite any hesitations they might have had about staying in Calgary. Regardless of this concern, as the "mother hen"¹² encouraged, they prioritized the well-being of the girl in question. The issue of getting back to Edmonton was an afterthought to her immediate safety and wellness. Despite others' hesitations about staying (including Katy's), ultimately the group decided "we just want to make sure you're okay." In this case, then, it was not solely the "mother hen" who wanted to make sure she was okay; it was the group as a whole. This indicates the importance of this "mother" figure of the group stepping up to be the first to ensure the group is "better safe than sorry" in the face of potential negative consequences. The mother hen's initialization of care set an example for the rest of the group to act on their duty of care for their friend and ensured her safety was the concern of not just the mother figure, but of the whole "family."

This idea of a 'family' is a common analogy among many social groups on the margins of mainstream society, including people who use drugs, even if they do not necessarily ascribe themselves to a specific role. These forms of kinship are "social support systems made up of friends who in practice function as family and provide social support," identifiable in many subcultural and often marginalized social groups (Zarwell et al. 2019, p. 1350). It has been noted in the literature that legally defined "families of [injectable] drug users often develop patterns of rejecting the drug user over time" (Bonuck, 1993, p.78). This causes people who use intravenous

¹² "Mother hen" is an interesting label, as it implies a gendered role for females. However, I do not have enough data to speak to this being a gendered label. There is the potential that there is a difference between "mother" vs. "father" figures of the group that would be interesting to study, but can not be ascertained from the data at hand.

drugs to gravitate towards and identify with a "chosen family" to gain the traditional "family supports" they may be missing from their legal family (Bonuck, 1993). In the context of ravers who use drugs, however, the symbolism of "family" indicates this sense of a duty of care to others because of the deep social bonds. "Support" for ravers from their chosen rave family may be different from that of people who use injectable drugs who require traditional support from their chosen family. In many cases, the support that ravers are getting is much more situation-dependent and linked to the experience at the rave. This contrasts with the support for people who use intravenous drugs who may need more general support from their chosen family, though the principles of support and care are present in both cases.

One participant identified her friend group as her rave family:

*It's kind of like a family. You know, like we have to stick close because it is easy to be separated and in such a great crowd, totally. It's just kind of a friendship... It's just sort of **like responsibility and duty to be there for each other** to make sure we find each other again as a group. [...] We're still responsible to each other, like trying to take care of everyone. Yeah, sometimes people just have a bad trip, a bad time, and someone just has to be there for them and ride it out.*

For Sarah, although her rave group does not purposefully take on "parental" roles, they still have an increased sense of "responsibility" and "duty" for each other that pushes them to look out for each other's well-being at the rave. Interestingly, this participant indicates that she and her friends are both responsible *for* and *to* each other. This choice of words may represent the duality of responsibility that some ravers feel towards others in their group. On the one hand, they are responsible *to* each other under the unspoken social contract's guidelines of behaviour underpinning a relationship of mutual care; on the other hand, they are responsible *for* each other and their safety by merit of being in a community, and a chosen family. By being responsible *to*

each other, ravers passively uphold the social contract because everyone is obligated to practice a sense of care and responsibility to others. By being responsible *for* each other, the individual is expected to possess this duty of care to actively ensure others' well-being.

In my research, it became clear that lapses in meeting that "duty" of care can exhibit *how* duty of care is harm reduction. In some instances, despite knowing what *needs* to be done to provide care and reduce harm, if the group does not have a) a deep connection to each other, or b) that same sense of duty of care, it can have severe repercussions if something "goes wrong" for a raver. For one participant, June, the group she was with did not embody this sense of duty of care when her partner experienced an overdose. In this case, others' lack of care *overpowered* the care she had for her partner and led to a potentially severe harm. In this instance, her partner had taken a drink of what he thought was a sports drink at a post-rave after-party, which turned out to be an unlabelled bottle of GHB (Gamma Hydroxybutyrate – better known as the "date rape drug") mixed into a liquid. Upon drinking this, he went upstairs and passed out:

It was probably one of the scariest experiences of my life, and we weren't with our usual group of friends. Which really affected me like, I didn't feel very supported in what I thought was the best action moving forward. I wanted to call 911 right away and they were like, No, you know, he'll wake up this has happened before. [...] He started to get like really hot, and we were like, he was still breathing, so we thought, well, he'll just sleep it off. It'll be fine. But then he started to get really warm and his lips started to turn blue and I started to freak out. So we called 911, and I went with him in the ambulance, and he woke up a few hours later, they were giving him oxygen and everything like that. And that's where I learned that when somebody goes down on GHB, even if they're going to be okay and wake up later, they can actually get restricted oxygen and they can get brain damage from it.

June went on to reflect:

*I think that's what kept everybody so safe when I was younger - we were all such good friends and cared so much about each other. **What came first was everybody else's safety.** And unfortunately, in this circumstance, it wasn't the same group of people and there wasn't **that same level of care.** And so, he was out for quite a while before I made a really big fuss, and they call 911. [...] I've taken harm reduction courses growing up, I*

was part of like a drug action coalition. I've, like, done all of this. And I pride myself on being like a responsible user. And this happens, and it just was not handled properly. And it was, I felt very bad that, like the person that I care about most in the world, I couldn't really take care of properly in that moment. And I wish I had done it different, but he always assures me he's like 'you did what I would have wanted you to do, like wait to see like if I wake up and then if I didn't you call 911 you did everything fine.'

June's experience suggests that, even if you know what you are "supposed" to do in a crisis to reduce or address harm, if the group you are with does *not* have that "same level of care," they may not prioritize harm reduction principles, thus potentially rendering any harm reduction actions less effective. This example shows that the duty of care that many ravers possess is a necessary form of harm reduction. It is possible that if no one had called 911, there could have been more severe consequences than those which occurred. The group June and her partner were with did *not* have the same sense of connection or duty of care as their other group of friends, resulting in additional harms because of the failure to apply harm reduction principles. While instilled in many ravers and is an overarching aspect of the community, duty of care is nevertheless dependent on the group.

Social Transmission of Knowledge

The creation of community within the EDM scene would not be possible without knowledge sharing between members. Not only is knowledge sharing a conduit for connection, but it allows for community members' safety. Part of PLUR culture is ensuring that the rave environment is a safe space (Skolnick, 2020). This is most effectively accomplished through the transmission of knowledge. This knowledge transmission is not limited to information shared between ravers but also comes in the form of social learning from important figures in one's life.

For some people, seeing their parents have negative experiences with drugs guides them on how they consume substances. For Gary, seeing his father do cocaine gave him guidance on what he did not want to do when it came to substance use:

He wasn't really interested in a lot of the drugs that I find in raves. [...] It didn't really further my understanding [of substance usage] because I only really got more information about it once I was kind of older, okay, but it mostly just made me interested in like being proactive with it and being safe and just being careful knowing that like, you can kind of fall into some kind of like, reoccurring hole over and over again, kind of thing. Knowing that there are some good decisions, some that are not there are times when I could take a break and everything that is important to do so, you know, just like really more taking care of myself.

Gary does not identify his father's cocaine use as something that necessarily taught him about doing drugs. It seems that for this participant, seeing his father have "a problem with substances," Gary subconsciously showed him the potential risks associated with drug usage and provided him with a guideline of use for himself of what he did not want to do. This pushed him to develop his own forms of harm reduction by showing him the potential harms of drug usage. In response, he developed strategies to ensure a different outcome of his usage than his father had.¹³

Part of harm reduction for the EDM community comes from people sharing their experiences with drugs and substances, so others learn strategies to make their experience consuming substances at raves the best possible. Whether it was hearing stories of times that went badly or learning from their friends of how to best consume and maximize their experience, ravers engage in harm reduction by ensuring their knowledge experience does not go to waste and can be used to inform others in the community.

This process is supported by social psychological theories on response acquisition through vicarious learning (as stated in Bandura, 1965). Although reductive of Bandura's theory,

¹³ Arguably, this falls in line with differential association theories of social learning (see Sutherland, 1992).

one can consider the same mechanisms as Bandura: an individual sees how *others* respond to stimuli and what outcome it produces; the individual internalizes and imitates that stimuli response to achieve the same outcome. In the context of raves: a raver sees how other ravers respond (consume drugs, develop strategies for harm reduction, etc.) to the stimuli of drug consumption; the raver internalizes and imitates the methods, strategies, etc. that other ravers use to consume to achieve the same experience in consuming drugs. That individual, then, without needing to experiment themselves, develop their own strategies and methods grounded and developed in *others' trials and errors*, rather than their own. Further, though, an individual does not necessarily have to *observe* other's behaviours. Simply hearing about others' strategies is enough for an individual to learn and inform their *own* actions. Once they internalize this knowledge, based on another's story, they can pass on that knowledge to others with the intention to protect others (Urbanik et al., 2020; Brunson, 2007; Carr et al., 2007).

Other times, the transmission of knowledge does not come in the form of strategy sharing but in the form of pseudo-folklore. Sharing stories of risk situations play an important role in creating a narrative that can inform peoples' beliefs and behaviours. Through disseminating these stories, one's experience and how they reacted are shared. This knowledge is then internalized and added to a broad collective of the knowledge of all community members. This collective body of knowledge, built by shared stories, goes on to inform peoples' perceptions and behaviours when faced with similar situations/contexts (as above, see Urbanik et al., 2020; Brunson, 2007; Carr et al., 2007).

Two participants both reported hearing the same story of a "friend-of-a-friend," and expressed this story informed their desire to be cautious:

I've heard stories of other people, like I know that one of [my friend's] friends, he did so much molly that it literally fried his brain [...] so I've heard stories but none of my friends have like... gone that far. (Gareth)

This is an experience that I've heard from other people, but I don't know this person personally, but it was this person who took a total of 50 pills in one month, and his brain got absolutely fried and had to drop out of university because of it. So I think, in that case, they should have known and had access to that harm reduction because it's not something to mess around with, it can permanently damage your system, and at that point, it's no longer fun and games... it could ruin your future. (Sarah)

Both of these ravers came from the same rave group and therefore were both aware of the story of this "friend-of-a-friend" who had a bad experience. It is interesting to note, then, that this particular story had enough of an impact on them that when asked about people who need harm reduction resources but *do not access them*, they *both* independently shared this story. While neither of them knew this individual personally and likely did not know specifics or how true this story is, just hearing this story was enough for them to both identify that there is problematic usage of club drugs and the potential for negative consequences certain patterns of usage have. Both of these participants suggest that one of their personal strategies for harm reduction includes not taking too many pills in a short period. Sarah further explained:

[There is] a three-month rule, where it's like, you're supposed to wait three months in between, like taking MDMA. A lot of people are aware of that, and like they're still responsible [...] I think, for the most part, people who partake in raves are like, active members of society, like otherwise you wouldn't be able to afford them. So they're also still like conscious about their health. Making sure that it's the right dosage, but I know there are some individuals who don't care and just do it, like, like, bam, bam, bam anyways, but not really care about their brain health. So I guess it's like both ways, but I think I'm exposed to, I think, for the most part, people that are responsible.

It is very likely that Sarah's decision to follow this "three-month rule" is informed by the cautionary tale of what can happen if you do not. It is also very likely this story may have been in her thoughts when she suggested that "there are some individuals who don't care and just do it, like, bam, bam, bam." This response elucidates a distinction that Sarah draws between herself

and her friends as *responsible* ravers since they engage in safer practices and others who are *not* as careful that they are aware of through word of mouth. Thus, stories shared among ravers – in essence, folklore – of negative consequences others have experienced have the capacity to serve as a rationale for ravers when deciding to take extra measures (such as observing the three-month rule) to engage in safer drug consumption.

Chapter Conclusion

The social nature of the EDM community allows for the community itself to be a form of harm reduction. As a characteristic of the community, PLUR is a basis for the duty of care that mitigates many harms that seems to be ingrained in many ravers. More broadly, the sense of community is the basis for duty of care. The entrenched nature of PLUR culture in the EDM scene can be extended in that "harm reduction" is ingrained in the culture, too. Community, defined by PLUR, *is* harm reduction because, as a culture, it espouses the value of connection. Connection is the basis of community safety in the EDM community.

Regardless of whether it is care for strangers they meet or friends they come with, a sense of community is fostered around a need to take care of those around you. Strategies to ensure the care of others that some ravers employ include the "buddy system" so no one is alone in case they get lost or their trip takes a downturn. Consent culture is an excellent example of duty of care in the EDM scene, as it seeks to reduce the harms of sexual assault. This speaks to a sense of protection that PLUR culture cultivates. Community is harm reduction, then, as it is grounded in the idea that everyone in the community is "obligated" to take care of those around them and is responsible to contribute positively to the community.

Duty of care is also in the adoption of social roles. The role of "mom or dad of the group" that some ravers ascribe themselves to indicates a need to provide a sense of safety and security

for the others in their circle. Often, this individual will remain sober, check in on the well-being of the group, and act as a beacon for the group if they are lost or need help. This is a prime example of how social roles within the rave community offer informal harm reduction strategies because of the nature of the community. Further, social roles from greater society (i.e., the role of "carer" or "protector") are transcribed into the EDM context, reproducing social roles and social norms of care.

The social transmission of knowledge is an important aspect of harm reduction in the EDM community. Social learning is a key part of the knowledge base of ravers. How to dose, how to consume, and the "dos and don'ts" of raving are all common things that ravers often need to be taught by others in the community. As a characteristic of the community, PLUR is also a taught ideology – while ravers may be attracted to the community initially for its inclusivity, the specific ideology of PLUR is shared and transmitted through connection within the community. By sharing knowledge about PLUR, this community element can be reproduced. Ravers also transmit their knowledge of harm reduction practices socially. Ravers tend to share their experiences and strategies with drugs, allowing for others to make more informed decisions on their own raving and drug use. Harm reduction, however, does not apply solely to substance usage. PLUR is an all-encompassing ideology of communal respect that is certainly applicable to multiple aspects of raving, which includes, but is not limited to, drug use. Parents and family members also play an important role in knowledge transmission. For example, some ravers may see a parent use drugs and look to them for guidance on what to do and as an example of what not to do. Knowledge will be explored more in-depth in a later chapter.

Harm reduction services need to be based in community, acknowledging the reality that those from within the community know the community best. When harm reduction services are

provided by people who are members of the EDM community, they can serve their clients and entice potential clients better.

Outsiders may perceive the nature of the rave community as one that "encourages" drug use and risky behaviour. For insiders, though, it is likely that the community encourages *safer* behaviours (including safer drug usage). By being a part of a community that values Peace, Love, Unity, and Respect (PLUR), ravers tend to embody these values, which become the guiding values for their interactions with others in the community. This allows ravers to develop a responsibility to take care of each other through a social contract that stipulates each raver possesses a duty of care for other community members. The community then acts as a safety net for ravers if *anything* goes wrong, including (but not limited to) repercussions from drug usage. This allows the environment of a rave to be one of inherent harm reduction because the nature of the community is emboldened by and embodies harm reduction principles. By recognizing potential consequences of drug usage, ravers as a community organically and subconsciously account for these consequences by ensuring the community environment is conducive to mitigating harms. This is achieved through collectivizing values, strengthening relationships, sharing information, and understanding that people are likely to be using drugs in the space, so they should learn how to do it safely.

This chapter expands on the literature on harm reduction. I offer a reimagination of the role "community" plays in harm reduction. Not only is harm reduction *grounded* in community (Weir, 2000), community *is* harm reduction. Through connection, shared values, and a sense of responsibility for others, harm reduction practices are not only encouraged, but the community itself is harm reduction. This is achieved through the social transmission of knowledge. My data

in this chapter aids in understanding how social learning – as a by-product of community – is important for broader harm reduction.

Chapter 4: Folk Knowledge and Stigma

When developing strategies for harm reduction and weighing the potential risk of a situation, individuals ground their actions in the knowledge they possess. Folk knowledges are grounded in experience and community and have incredible value for the communities creating, absorbing, and disseminating this knowledge. This knowledge may include subcultural norms and ideas of "right" and "wrong." This also means that perceptions of stigmatized behaviour can be grounded in folk knowledge. The folk knowledge acquisition process allows the meaning and influence of "stigma" to be redefined. Further, stigma has the potential to play a new role in the EDM community as meanings shift. There is an "us" versus "them" dichotomy of perceptions of responsibility at play for some ravers. Stigma then works twofold: 1) avoiding stigma is a motivation to gather folk knowledge to better inform their own rave and drug practices, and 2) stigma acts as a barrier to harm reduction. The acquisition of folk knowledge addresses this barrier. In this chapter, I will demonstrate the social transmission of subcultural knowledge acts as both a form of resistance to stigma for the rave community and a source of stigma. Through this, folk knowledge and stigma work in congruence to inform harm reduction practices and address barriers to harm reduction.

Folk Knowledge

The sharing of knowledges and ways of knowing, grounded in community, is often labelled as "folk" knowledge (Clements, 1982). These knowledges are, by nature, created by and for the communities that embody the knowledge. They are not necessarily grounded in empirical evidence (although they may be). Broadly, folk knowledge can be "every day" knowledges that inform peoples' beliefs and actions (Steiner et al., 1999). The concept of "folk knowledge" has

roots in the field of anthropology (For examples, see Clements' (1982) study of Samoan folk knowledge and mental health; Scheub's (1996) account of South African post-apartheid Indigenous storytelling), and ethnographic methods work well for uncovering and analyzing folk knowledge.

Knowledges can be labelled as "folk" based on three elements: "(1) the forms in which knowledge is represented, (2) the locus of group knowledge, and (3) the stress placed on the social significance of representations" (Clement, p. 194, 1982).¹⁴ Folk knowledge is importantly not just about oral knowledge but is represented by many knowledge expressions, including rituals and folktales (Clement, p. 194, 1982). In Clement's (1982) study of Samoan folk understandings of mental health, these rituals and folktales include "curing ceremonies," apologizing to offended spirits (in Samoan, *aitu*), and sharing myths to explain mental health. This is a much more expansive and inclusive conceptualization of what counts as "knowledge" and grants unique expressions of knowledge greater legitimacy.

Further, folk knowledge is "an aspect of the group" in that it is a product of the group's collective experience, values, and shared information (Clement, p. 194, 1982). It is more than just an aggregate "cultural" knowledge, nor is it a set of prescribed cultural cues and ideals. Instead, folk knowledge is a product of a subculture's interactions with the world around them that is unique to that group as a whole. To Clement's (1982) third point, folk knowledge is also defined by "the stress placed on representations of knowledge as social phenomena" (p. 196). As a "social phenomena," this knowledge is created and expressed as alternative to and more specifically informed than mainstream cultural knowledge and norms. Folk knowledge

¹⁴ I.e. (1) oral vs. written history, (2) knowledge grounded in the collective, and (3) the recognition that the knowledge comes from a *community*.

represents a collective subcultural expertise that can inform future behaviours and decisions (Read and Behrens, 1989).

Existing research on folk knowledge for people who use club drugs reveals they draw upon a collective folk knowledge born out of the "influence of peers in the acquisition and dissemination of knowledge on how to reduce the risks of using illicit drugs" (Southgate and Hopwood, 2001, p. 328). This "folk pharmacology," as a collective knowledge set for people who use drugs led Southgate and Hopwood's participants to follow unspoken conduct and consumption guidelines to keep the scene and ravers safe. Norms are expressed through social interactions and decision making. In turn, this illuminates *which* drugs or drug practices are normative (Southgate and Hopwood, 2001). These norms vary from club community to community.

Importantly, these knowledges are transmitted via "conduits," which not only share but produce "knowledges and practices that continuously contributed to the [folk] pharmacology" (Southgate and Hopwood, 2001, p. 330). These conduits include media, "health promotion" tools, advertisements, and "social/sexual networks" of club drug users who interact with each other (Southgate and Hopwood, 2001, p. 330). These personal networks help inform people who use club drugs of strategies to consume and the effects of consumption and harm reduction strategies based on past experience. In this sense, as people transmit knowledge, they expand it, share it, and add to this body of folk knowledge. Likewise, Kelly (2005) notes that youth who use club drugs understand risk through "experientially based" (p.1450) perceptions they form "through the everyday practices of people in society" (p.1445). The strategies youth develop and engage in when using drugs are developed "from the context-specific manner" they associate with specific drugs and their risks (p.1455). Networks of people who use club drugs illustrate

how people can learn strategies of harm reduction and risk assessment based on the experiences of others.

In addition to the literature on the in-person social learning that occurs in the EDM scene, there is research on harm reduction for people who use drugs focused on transmitting knowledge between ravers on online forums. Over the past 30 years, forums, blogs, and chat sites have been the epicentre for knowledge transmission online, thereby providing an additional platform for harm reduction. This knowledge transmission covers a variety of topics, including "(1) uncovering the substance facts, (2) dosage and administration, (3) subjectively experienced effects, and (4) support and safety" (Soussan and Kjellgren, 2014, p. 3). More simply, this knowledge transmission includes (1) a substance's chemical makeup, (2) how much to take and how, (3) how an individual felt and what their "trip" was like upon consumption, and (4) advice and strategies for reducing potential harms. These shared knowledges are meant to make the community more connected and make illicit drug consumption safer. Soussan and Kjellgren's study found that, on online forums, substance users were able to share their experiences with others in a "communal process in which forum users supported each other and contributed with cumulative experiences and knowledge" (2014, p. 6-7). Key to this process is the "communal" aspect as these forums become a collective database of community-sourced knowledges to enhance the experiences of others and to keep each other safe.

It is important to note online forums are valuable hubs of folk knowledge in the EDM community, as they are sources of knowledge for many. Reddit, for instance, is an excellent example of folk knowledge being shared on an online forum for *countless* communities. While Reddit is a platform open to all – experts and laypeople alike – there is no guarantee of the authenticity or legitimacy of users who share their knowledge on the site (save for verified

users). Despite this, advice from Reddit is still *generally* considered legitimate, especially in larger online communities, as there is more opportunity for discussion, debate, and demands for "proof" of statements, should they require it. Some youth, for example, turn to Reddit for information on vaccines to inform their decisions to get vaccinated (Amith et al., 2020). Research suggests that information about the HPV vaccine and discussions between young people on Reddit – rather than discussions with professionals – likely influence this population's opinions and understanding of the vaccine. Amith et al. suggest there are information "networks" on Reddit that contribute to the body of knowledge surrounding the HPV vaccine *separate* from verified information from medical professionals (2020). These networks represent a body of *folk* knowledge that influences how forum users understand and act on the HPV vaccine.

This phenomenon is also present in other communities – or "Subreddits" – on the platform. The indoor gardening and hydroponics community provides another look at folk knowledge sharing on the online platform. People interested in hydroponics may access Reddit to address their "knowledge gaps" by learning from others on the subreddit (Solis-Tapanta et al., 2020). Reddit as a hub of knowledge provides an effective opportunity for indoor gardeners to learn from "science communicators and the general public" through anecdotes, advice, and *some* scientific evidence disseminated on the subreddits (Solis-Tapanta et al., 2020, p. 353). While there is no guarantee the information is verified or legitimate, people still turn to Reddit for learning in this case, as it is an open forum for the transmission of *folk knowledges*. The knowledge does *not* require verification, as it is community based and socially transmitted online. The principals underscoring these interactions in the hydroponics community can likewise be applied to online forum discussions and folk knowledge transmission within the EDM community.

Sharing of knowledge extends past Reddit to other areas of the internet. Social media is an excellent conduit for digital knowledge sharing (Leonardi, 2014; Panahi et al., 2012). The ease with which knowledge can be shared online means that folk knowledge can be rapidly disseminated to interested and broad populations. The experiences and knowledge people possess can be shared. Through sharing, it is converted into collective folk knowledge as others learn from them. This is crucial for "folk knowledge" as it *needs* to be shared across a collective for it to be carried on. For people who use drugs (including some of my participants), this includes websites such as *Erowid*¹⁵. People also turn to drug-experience-specific chatrooms and forums *off* Reddit (Davey et al., 2012). Folk knowledges are developed not by "professionals" per se but by people with lived experiences and knowledges of the subject. A considerable risk, then, is determining the legitimacy of the knowledge shared. On most forums, there is no way to "verify" the authority with which one is speaking. As such, there is always a danger in relying on folk knowledge, especially on the subject of drugs. The benefits, though, of being able to learn about other's experiences to inform one's own actions, for many, outweigh the risks.

Transmission of Knowledge

Knowledge sharing is crucial to the development of folk knowledge bases. For ravers, sharing knowledge within the community is an important way folk knowledge is expanded *and* internalized. As I demonstrated in Chapter 3, the EDM community itself is crucial to the formulation of harm reduction strategies through social interaction and vicarious learning (see Bandura, 1965; Chapter 3). In the same sense, though, it is also crucial for the *transmission* of knowledge. Knowledge can only become entrenched as community knowledge if it is passed

¹⁵ *Erowid* is a website that catalogues experiences and information regarding a wide variety of substances (including but not limited to club drugs) in hopes to reduce harms which many of my participants themselves use.

along, and as such, the *transmission* of knowledge is important for knowledge to be considered "a knowledge." In other words, "a knowledge" cannot be embedded as a form of knowing if it is not shared. Folk knowledge is not exclusive to drug consumption; folk knowledges are a practice for countless social groups. There is existing research on folk knowledge, for example, in inner-city communities where community members share knowledge about officers in their communities. This process is referred to as "cop clockin'" and refers to the process wherein people gather information about the officers who patrol their neighbourhoods and share this information with their neighbours to be acted upon (Urbanik et al. 2020). Through the information they learn through their own surveillance and information shared by others, residents can learn how to interact with certain officers. In doing this, residents can potentially mitigate any negative interactions with officers, as they know what to expect and how to act based on this knowledge. This informal social learning exemplifies just one way social groups employ folk knowledge to reduce harms.

This transmission of knowledge was an important element of ravers' social learning based on my data. The majority of my participants cited their knowledge of "what to do" at a rave and when consuming drugs comes from other people. Maria likened it to "embodied research" when asked how she learned what she knows:

*Um, definitely word of mouth like I think most of the people who I know and I'm close friends with and go to raves with me are a bit older than me and have been doing this for longer than I have. **So I guess just relying on that like community knowledge, okay, and sort of embodied research if you will.** So definitely taking people's advice about, like, what makes sense to mix. I'm also just looking things looking into things for myself. So finding information on, I guess, like what is understood to be the reputable forums for drug information.*

While many of Maria's strategies for safer consumption she engages with came from social learning and "taking people's advice" if she deemed them trustworthy, she *now* does her own

research on "reputable forums" online (as discussed in Soussan and Kjellgren, 2014). Through her interactions with those she considers "reputable," she learned strategies and can make more informed decisions when using drugs.

Another participant affirmed that knowledge in the rave community is socially reproduced:

*It was mostly through a lot of more experienced ravers, and actually, it was mostly from like that social piece and experienced ravers. I think usually what happens is they kind of spark curiosity, and then then you use that **as a resource**. And I think a lot of people in the community like to pass down knowledge and experiences. And so, I think a lot of the harm reduction stuff is one of those things that really, really gets passed on really well, like stuff like not taking MDMA if you have certain mental illnesses because it causes like a very bad come down. So, people, through their experiences, share that so that you're aware. And I think that the community of adults takes a very large part in harm reduction through this knowledge dimension. (Scott)*

By viewing other people in the community as a potential "resource" for knowledge, ravers can treat their networks of other ravers as a source of information they can learn from. Since ravers "like to pass down knowledge and experience," the social transmission of knowledge is an easy, organic process. This knowledge sharing is an example of "folk" knowledge because it is not necessarily about sharing scientific information; rather, it is about sharing past experiences and what can be learned from them. Scott learned *through others* to avoid MDMA if you have certain mental illnesses because of the potential to have a "bad comedown." This advice is more than just a concern about negative chemical interactions in one's brain – it is about avoiding the bad experience that could happen. Knowledge of others' negative experiences is folk knowledge because it is grounded in experience.

Another important tenet of folk knowledge is knowing *where* to find trusted information. Like Scott, Maria identifies the importance of knowing how drugs interact with certain mental health factors:

So knowing that I'm on medication, I'm like, extremely careful about what might be a contraindication in terms of legal drugs, and it's just a matter of, I guess, knowing where to find that information. Because they're not ever going to write on the Prozac bottle. Don't take MDMA with this, right? Obviously, so yeah, knowing where to find that information. But I guess even knowing where to find that information came from my friends saying, oh, if you're worried about this, you should look it up in this place.

It is interesting that both Scott and Maria express concerns about mental health and drugs and use these anecdotes as examples to describe their perceptions of harm reduction. While there is a parallel in "harm reduction," there is a crucial difference between the two, exemplified by the framing of their concerns. For Scott, the important point of his anecdote was the potential of a negative experience for those with mental health concerns. For Maria, identifying the need to *know* not to mix MDMA and Prozac is more than just about avoiding a bad experience, but a health concern. While this is still a concern about the chemical interactions in one's brain, Maria knows not to mix these two chemicals because of what her friends told her. While they may not have been the ones to tell her *not* to mix MDMA and Prozac, they did point her in the direction of *learning* this. This is an interesting tenet of folk knowledge transmission. Even if others in one's network do not possess a particular knowledge, they know and will share where it can be found – whether it be an online forum, a book, or a harm reduction organization that can answer questions and share information. As my data show, folk knowledge is not *just* about learning strategies; it is also about learning *what knowledges are legitimate* and how to *access them*.

Folk Knowledge and Harm Reduction

By understanding and incorporating the EDM community's knowledges, harm reduction strategies can better address their needs. By nature, folk knowledge is transmissible, community centred, and grounded in experience and "alternative" ways of knowing (alternative in the sense that they may not be as permissible or accepted in mainstream society) (Clements, 1982). Harm

reduction is, likewise, community centred, grounded in experience and "alternative" knowledges, and becomes effective when it is shared. I therefore argue folk knowledge is *a form* of "harm reduction" in and of itself, as folk knowledge can be represented by the organic sharing of knowledge around harm reduction strategies.

Harm reduction strategies can be learned and transmitted through the community.

Charlene illuminates this when asked how she develops her own harm reduction strategies:

I think it comes with experience and community integration. And like being introduced to the idea that was like, harm reduction. Like, anyone who's about raving, I feel like would be able to answer what harm reduction is, right? Like, maybe not so much. It's like they haven't managed to discover anything beyond like the major shows at the Shaw or, like, maybe Chasing Summer or something if that's all a person has, like explored, then maybe they wouldn't have encountered it. But like, for me, like I had only really been going to raves a lot for like, probably two years when I started to, like meet people who were like, "Hey, man, you don't have earplugs in what the fuck? Go put in some earplugs, okay?" And like, I had a friend once who was like, "you know, you haven't been eating healthy lately. Like, if you're gonna spend your money on tickets to shows and substances to do at shows, you need to make sure that you're taking care of yourself in other aspects of your life as well."

According to Charlene, a key to knowing about harm reduction in the EDM community is integration into the community. She identifies herself as heavily "in" the scene, often attends shows at more intimate venues, and is a visual performer. For her, knowledge about harm reduction is intrinsic as she is so "in" the scene. In contrast, she suggests people who only attend the more "pop" EDM shows and festivals may not be as well versed in harm reduction because their connection to the scene is weaker. As Charlene is so connected to the scene, she has encountered harm reduction principles and strategies enough to confidently say she "knows" about harm reduction. Charlene's vast knowledge is possible because of her connection to the scene.

Charlene also suggests harm reduction for the EDM community is much more expansive than traditional conceptions of harm reduction. Earplugs, for example, are harm reduction in that

wearing them protects the wearer's hearing when attending many loud shows. Maintaining one's general health is a form of harm reduction, as it has the potential to mitigate adverse health outcomes that might result from substance use. This conception of harm reduction in the EDM community is more than just about harm reduction for drug use. It speaks to the "collective" nature of knowledges on harm reduction as an expansive and holistic approach.

Further, this passage also suggests the transmission of folk knowledge as harm reduction is intimately tied to the "duty of care," as detailed in Chapter 3. Those who told Charlene to wear earplugs and eat healthily were looking out for her well-being. Via these instructions, they simultaneously shared their knowledge of harm reduction strategies. Without needing to say, "you need to go grab earplugs to reduce the harms on your hearing," they informed her of what she needed to do to protect her hearing. In this process, Charlene learned there is potential harm (hearing loss) that can be mitigated through a strategy (wearing earplugs) that someone else in the EDM community likely learned via their own experience. They may have experienced negative repercussions from not wearing earplugs *or* may have had another person tell *them* they need to wear earplugs. In this, we can see the social transmission of knowledge perpetuates organic harm reduction.

One participant acknowledges the need for formal harm reduction to address the knowledge gap left when ravers do not have access to people with more experience to share their knowledge with them:

I feel like that it's [harm reduction] been happening a lot more organically in the past couple years, but now that we see a bit more organizations to kind of come in and support, it's really nice to have a more formalized and institutional knowledge at the very least, so that you don't have to know someone because that can be like a huge issue if you don't know anyone and you just decide to do it, then you're kind of pushed as opposed to like a non-profit or an institution that has any information for you.

Scott has identified an important intersection between formal and organic harm reduction and knowledge sharing.¹⁶ When ravers do *not* have a network of people to use as a resource for learning and therefore do not have the opportunity to engage in organic harm reduction in the same ways as those who do, they need a formal resource to be available to them. Formal harm reduction resources at raves often serve as places of information for ravers on drug interactions and chatting with them about harm reduction strategies. Jeremy explains that he learned that a local organization offered these things simply by going up to them:

*I went up to them. I kind of looked at what they were doing and what they were all about, just out of curiosity. Really the thing that I think attracted me the most upon first glance, they had this giant chart of drug interactions and what's good and what's bad [to mix]. And in that moment of curiosity, I was like, actually, it's interesting. I wonder which ones would work? Like what the impact would be. Right? And then, at one point, someone came up and chatted to me a little bit about and what the organization did. [...] I think that helped me understand that **there's a right way to do it and the wrong way to do it.** Okay. And just seeing the chart and being able to see that some of these drugs don't have negative interactions with each other was kind of like this reassurance that this is possible and it can be done. I just need to be prepared for it.*

Not only is Jeremy now more aware of what this harm reduction service offers, but he also learned a harm reduction strategy from them and learned how to be more "responsible" in his drug usage. This is also information he can now share with others.

Another participant speaks to the role of harm reduction organizations in sharing knowledge:

I've actually been seeing recently and a lot of like, I think they're called [local harm reduction organization] is the organization that kind of comes to most raves, especially massives¹⁷ and festivals, and they'll usually have tents set up to kind of relax and also like, nurses on board to kind of help with any issues. And then they also have just kind of like informational boards to kind of see like drug mixes that might be dangerous, and also just general information about drugs (Gary)

¹⁶ In this context, "formal" refers to organized harm reduction services; "organic" refers personal harm reduction strategies people may have.

¹⁷ "Massives" are large, multi-day, multi-artist and often multi-stage raves that host thousands of ravers at a time.

This is interesting to note because these *formal* harm reduction organizations contribute to and draw from the informal, folk knowledge of the community in two ways: a) most volunteers at harm reduction organizations are ravers themselves who can speak from their own experience, and b) the ravers whom they educate can take what they've learned and become a source to their networks. More "institutionalized" forms of harm reduction lend themselves to processes of folk knowledge and contribute to organic harm reduction. Not only have the volunteers likely gotten their knowledge through the social transmission of folk knowledge, but they are also providing other ravers who access the service the opportunity to gain knowledge they can then transmit to others. In this, the more organic forms of harm reduction (i.e., personal strategies shared amongst friends) can be shared across networks and allow ravers to engage in their own forms of harm reduction before needing to access a formal organization.

Stigma, Knowledge, and Harm Reduction

A subculture's norms may stray from mainstream norms. While actions, beliefs, and behaviours may not be considered normative to others, they are within the subculture that practices them (Becker, 2018). A subculture's norms, then, can be defined as an "alternative normativity."

The EDM cultural community influences many ravers' knowledges of raving behaviours. Knowledge of what is normative is formed by being "in" the community. In this sense, then, knowledge about drug use, and its normativity, is created by and grounded in the community itself. A central part of "alternative normativity" for the EDM community is stigma regarding drug use due to broader criminalization. In centring and internalizing folk knowledges, regarding

drug use, ravers can reimagine what "stigma" means and deconstruct their own perceptions of this stigma.

By acknowledging a subculture's alternative norms, the stigmas formulated from mainstream perceptions can be challenged. For example, due to broader society's perceptions of drug usage, stigma *against* drug usage may be internalized by some ravers, especially ones newer to the scene. This can act as a barrier to accessing formal harm reduction, as ravers may be worried about being stigmatized for their drug usage. Stigma is cited as a barrier to harm reduction for multiple groups, including accessing supervised consumption sites for people who use drugs (Urbanik & Greene, 2020), for pregnant women who use drugs and would like to access harm reduction (Wolfson et al., 2021), or for those with mental health concerns (Clement et al., 2015). However, these ravers can unpack these stigmas and shift norms to reflect the subculture better through subcultural knowledge transmission. One participant identified this phenomenon when discussing stigma as a barrier to harm reduction:

*I think they're [people who do not engage in harm reduction] worried they'd be judged. I think they're, they're worried about the stigma, they're worried that someone's going to arrest them, maybe I don't know. Like, I kind of feel bad for them quite a bit. That's how I kind of feel about it. Like I just I feel bad that we kind of exist at the moment with the stigma, so they don't feel safe, and like feel that they can't use these resources that are quite awesome.
(Gary)*

By challenging the stigma surrounding club drug usage for ravers, the subculture redefines what is considered "normative." In this, stigmas that may exist for "outsiders" act as barriers to taking steps to reduce harms for "insiders" if not dismantled. While perceptions of drug usage are shifting throughout Canadian society, and club drugs are generally considered less "taboo" than they used to be, some drug usage (i.e., club drug usage) is still generally regarded as deviant by nature of being illegal. This perpetuates a stigma surrounding drug usage that some ravers may still internalize despite its general acceptance in the EDM community. This then has the potential

to act as a barrier to open discussion about drug use and safety, and as such, may leave those who have weaker "networks" with fewer opportunities to learn from others. By embracing the alternative norms of the EDM subculture surrounding drug use, ravers can more openly speak about their experiences and share their knowledge on substance and safety.

Despite being touted as a generally inclusive scene where outcasts can find community, stigma still exists *within* the EDM community. This stigma has the potential to perpetuate an "us" versus "them" mentality between ravers who view other ravers as less responsible. Stigma in the EDM community has a twofold purpose: i) stigma delineates between "responsible" and "irresponsible" raving practices and ravers, ii) stigma motivates some ravers to learn and practice harm reduction strategies to present as "responsible." In this sense, stigma is used not only to label people and behaviours but it is also used as a social control to encourage people to ascribe to the positively-coded label of "responsible" (see Becker, 1963).

For some ravers, learning others' perceptions of responsibility are key to defining their own substance usage. By learning from peers what is "responsible" and what is not, ravers may internalize these perceptions, informing their own practices. This comes from both interaction with others and direct experience. See, for example, why Katy deems her friends as generally responsible:

I think most of the people that I hang out with are pretty responsible because they're aware of, like, what they're taking and how much they're taking, and they don't get so intoxicated that they're non-responsive or, like, out of it, where you're worried about them. I find some of the younger kids like they'll take one or two pills, MDMA, and they get so messed up that they're sick or really out of it, you know? I think with age people get more responsible, I think the younger kids are a bit more irresponsible.

Katy had been raving for seven years at the time of the interview. She considers her friends as being responsible *because* they know what they are taking and know how much they should take. She suggests this comes from experience, as she implies younger ravers do not have as much

lived experience as ravers who have been in the scene longer. The constructed labels of "responsible" and "irresponsible" are a product of learning from others. This explains how Katy can identify her friends' behaviours as being "responsible" in comparison to someone with less experience. In this, she can then also learn strategies that reduce harms – in this case, knowing how much one is taking to ensure they do not become non-responsive – that will allow her to identify with the "responsible" group.

Crucially, though, Katy also identifies she may not have *always* been "responsible":

I think it's kind of trial and error. A couple times, I have taken a little bit too much, and then that's kind of how I found my limit where, like, I can't take so much next time, I would take less. So I think that's kind of why, like, the younger kids when they're first starting out, they're still trying to find their balance.

So, while Katy can identify that, to reduce potential harms of substance usage at raves, she needs to find her "limit" or "balance," she did not always know or do this. If the group she identifies with now did not also acknowledge their limits, continuing to take "a little bit too much," Katy may have developed a different perception of harm and fallen into the "irresponsible" raver category. While many ravers rely on learning from others, some ravers who *do not* have "responsible" peers in the community have to engage in "trial and error" to learn what is best for them.

Since the group Katy is part of adhered to and shares these particular harm reduction strategies, she *also* learns those strategies to ascribe to what she perceives as the more desirable label – "responsible." As she has met more people in the scene and gained more experience and knowledge, Katy has learned what it means to be "responsible." Katy identifies this particular phenomenon:

*If they [an "irresponsible" raver] take one, they're high, someone else will be like, "Oh, I'm taking another one." And **they'll kind of peer pressure someone** into that, and then they'll take another one. And I find that the important thing is listen to your own body and*

not what everyone else is doing. So I find like if one guy does a pill, another guy does one, and then the other person will do another one, and another person does another one. And I think that people need to be more aware that you can't just do more drugs just because your friends are, you need to be really aware of, like, how it's affecting your own body.

In speaking to the effect of peer pressure on ravers, Katy confirms the importance of knowledge transmission and stigma. In this case, we can identify how stigma operates both in the case of peer pressure but also in the development of the harm reduction strategy of "listen[ing] to your own body." In terms of peer pressure, some people may be influenced to "take another one" to avoid being stigmatized by their friends. They then learn that, for some, consuming more substance "past their limit" is a normative behaviour and has the potential to reshare the knowledge to others they meet or introduce to the scene. The effect of this peer pressure may lead to other ravers confirming the "us vs. them" dichotomy of responsibilization. While not *everyone* in the rave community is subjected to this peer pressure by "irresponsible" ravers, *some are* and are in turn also labelled as "irresponsible" by others.

Katy identifies that to combat potential peer pressure. She knows you must "listen to your own body" and do what is best for yourself to reduce potential harm. In this, Katy can avoid ascribing to the behaviours of those that are stigmatized as irresponsible for their behaviours. Further, though, she can then take this knowledge to others in the scene and pass on this perception of responsibility and the harm reduction strategies (i.e. knowing your limits) to ascribe to this label. The fear, then, of being stigmatized as being irresponsible pushes people to strive to be *more* responsible as they "don't want to be *that* person" and you "don't want that [irresponsible] energy around you" (Alexander).

Arguably, ravers benefit from a process I call "label mobility." Although ravers may *start* "irresponsible" if they do not yet have a connection to "responsible" community members, as

they interact with these members more, they have the opportunity to redefine themselves as being "responsible." Although a new raver may not realize they are "irresponsible," the more they interact with others at raves, the more they can learn about "responsibility" vs. "irresponsibility." As they learn strategies, values, and about the stigmas some ravers associate with perceived "irresponsibility," ravers can learn that they *should* shed that label and *how* to do so to be seen as "responsible." Without the influence of stigma from the rest of the community, ravers may not feel they should become more "responsible" in their usage. One's status as "responsible" or "irresponsible" can be redefined in the eyes of others based on how they implement folk knowledge to inform their behaviour. It is important to note that label mobility is not afforded to many people who use drugs. Their "master status" is set *as* someone who uses drugs, and there are relatively few accessible avenues to change that (Hughes, 1945). The rave community, on the other hand, because of the cultural normalization of club drug use *and* the transmission of knowledge that ravers engage in to encourage others to be safe, *is* afforded the opportunity for label mobility.¹⁸ In other words, ravers are not confined to their master status as many other groups who use drugs are in part due to the influence of the community.

On the other hand, stigma can simultaneously act as a *barrier* to harm reduction. Ravers may *not* access harm reduction services for fear of being stigmatized by other ravers or harm reduction service volunteers. This can be remedied by transmitting social knowledge amongst ravers on what these services' purposes are and what they offer. Ravers may fear being stigmatized by other ravers for needing to access these services. They may also fear being stigmatized *at* the services themselves for consuming illicit substances. Stigma, then, is a double-edged sword as it both serves as a motivator for and a blockade to harm reduction.

¹⁸ It is also important to note that ravers who use club drugs do not experience the same marginalization as other people who use drugs, which likely plays a role in their ability to renegotiate their label.

June identified that ravers do not want to be "that person" who has to access harm reduction services for help:

They're scared of being judged [...] It's kind of known that people are using drugs at raves, but you still don't want to be the person who's singled out, especially as the person who's singled out as not being able to handle it or was irresponsible and took too much kind of deal, right? Like you don't want to be like treated badly because of that.

Here, June points out some ravers have trepidation about going to a harm reduction service if they need help at a rave because other ravers could apply the label and stigma of "irresponsible" to them. This suggests a complex disjuncture between the belief that people *should* access harm reduction if they need it but *should not* need it in the first place. In this case, some ravers may *want* to do the "responsible" thing and access a harm reduction resource but may not because that may mean admitting they are not "able to handle it or [are] irresponsible." This stigma evidences that navigating "responsibility" and "irresponsibility" within EDM can be challenging. Ravers who want to be seen as "responsible" likely want to ensure other ravers do not perceive their actions as irresponsible. In this sense, the stigma is a motivator to engage in harm reduction. Despite this, stigma can also be a barrier to accessing harm reduction resources, as a raver may not want to be perceived as *needing* an external aid to help them because of their own "irresponsibility."

Gary echoed this sentiment in saying that he believes people may be "*worried about the statement,*" and so people may "*feel that they can't use these resources that are quite awesome.*" Gary indicates fear of being stigmatized for accessing harm reduction is a significant potential barrier for ravers' access to harm reduction resources. If a raver is "worried about the statement" that they are using drugs and need help, they are less likely to access harm reduction resources. This is likely in part related to the fear of being stigmatized as being "irresponsible." So, while

they may *want* to "be responsible" in their drug use and access harm reduction if they need it, they may not do so because it would suggest they were "irresponsible" in the first place.

Internalized stigma against drug usage can reinforce a sense of shame if one believes they are perceived as "irresponsible." Charlene goes so far as to suggest why some people do not access harm reduction: "I think [people don't access harm reduction] mostly out of a fear of internal shame, and a fear of judgment." As my data reveal, even the *potential to be stigmatized* for accessing harm reduction is a barrier to ravers' access. Likely influencing this stigma are preconceived stigmas against drug use. Although norms are shifting in broader society, and drug usage – especially club drug usage – is no longer as taboo as it once was, drug use is still "this thing that we've been trained our whole lives is unprofessional" (Charlene). Despite a rave not being a "professional" environment, the "unprofessional" connotation of drug use is a stigma that may inform raver's behaviours and substance usage. As such, mainstream perceptions of drug usage as stigmatized are still held by some ravers, despite their own usage. Although drug use is widely accepted in the scene, the construction of the labels "responsible" and "irresponsible" indicates there are norms of conduct regarding drug usage.

The transmission of knowledge is an effective way to address this fear of stigma. Charlene suggests "through sharing stories," ravers can address the fears people may have around being judged at a harm reduction service. This is likely because they do not know what the harm reduction resource does or that they generally abide by a zero-judgement policy. Through "sharing stories," as Charlene suggests, ravers can *learn* what these services do through hearing about the experiences of others.

In Katy's case, one of her friends is a local harm reduction organization volunteer. Her knowledge that they provide a judgement-free space, and her knowledge of what they do, comes

from knowing her. She suggests if someone does *not* know very much about these services, they may be fearful of being stigmatized at them:

I feel like people might just be scared to or an educated on like what's available [... I know she [Katy's friend] is "one of us." But like, other people, I'm not too sure. Like, they might think "are they gonna judge me if I go in?" Because they don't know, right? So it's kind of one of those things. Like if I didn't know about [local harm reduction organization] at all, like I wouldn't be sure if it's like if you're gonna get judged or not either.

Katy suggests fear of being judged, even by the harm reduction staff, is a barrier to access.

Importantly, though, *not having enough information about harm reduction services is a barrier, too* (in other contexts, see Urbanik & Greene, 2021; Wolfson et al., 2021; Hyshka et al., 2017).

Through sharing knowledge and experience with others, ravers' fears of being judged by the harm reduction staff can be alleviated, reducing the potential barrier to access. As well, Katy identifies that a reason why she knows the volunteers would not judge her if she went to this service is because her friend is "one of us" – she has similar lived experience as other ravers and uses her experience and knowledge of substance usage at a rave to *relate* to clients, rather than to judge them. Since she is a community "insider," she is less likely to judge people for their drug consumption, despite what some newer ravers may fear.

In other words, preconceived stigmas may be the basis of the fears that some people have regarding talking to strangers about their drug use:

I think it's a shame thing, too, because of the stigma of drug usage as well. They're probably too scared to go there because they're admitting that they're on substances.

Gary recognizes, much like Charlene and Katy have pointed out, that people have likely internalized stigma about drug usage, despite their own usage and the general normativity of drug usage in the EDM community. Because of this, they may fear accessing a harm reduction service if they are unaware it is run by "insiders," as they may be concerned it is run by someone who *does not* consider drug usage normative. By "admitting they're on substances" to an

outsider, they are admitting their relative deviance to them and risk potentially being stigmatized by them. An insider, however, would likely not respond this way to an admission of substance usage, and as such, harm reduction organizations do not respond this way.

Alan echoes this sentiment, suggesting that people don't want to seek help from strangers for fear of being stigmatized:

I would say that the most primary reason [people are hesitant to access harm reduction services] is because they don't want to be judged because they don't want to like talk to strangers. But everyone who's gone there knows that there's no judgments and that, you know, everyone is super friendly. So it's probably fear out of like, inexperience that they just don't want to talk to random people. Or to admit that they're, you know, rolling¹⁹ to a random person.

Here, Alan implies that if people do *not* know who is running harm reduction organizations, and if it is a safe space if they need help, they may be less likely to access one. If a raver is unaware of what the service is offering and who runs it, the potential of being stigmatized is a legitimate concern. This can be addressed – ravers may be less hesitant about accessing them if they are more aware of these "shar[ed] stories" of harm reduction services by transmitting folk knowledge based on experience.

It is worth mentioning that not all of my participants spoke entirely positively of harm reduction services. While the majority of them did, I would be remiss to not include the outlying voices. One of my participants, Gareth, indicated that he believed these resources to be a good thing, but he did not know *why* they were there. Gareth questioned the motives of the organizations:

I think it's really nice of them, but I don't see why... like... do they get paid to be there? How do they make income? Because everything's about money like... I don't understand how... like... is it just a volunteer thing? I don't really know what it is. Like they're just really nice, I guess?

¹⁹ "Rolling" usually refers to being high on ecstasy/MDMA.

While Gareth acknowledged that he *does* think they do good work if people need them, he is clearly unsure *why* they are there and how they can operate. This concern indicates that there may be a broader subset of ravers who are wary of these harm reduction organizations, which may be partially due to a gap in knowledge and understanding of their purpose. Further, though, this serves as a reminder that the raver experience is not universal and there are varying opinions on harm reduction in the community.

Chapter Conclusion

My data reveals the relationship between folk knowledge, stigma, and harm reduction is complex. While stigma generally has negative connotations, it is apparent stigma can work in tandem with the ideals of harm reduction, wherein the *stigmatization* of harm serves as a motivator to mitigate it. To reduce harms and avoid personal stigmatization, ravers must learn from others. Through the transmission of folk knowledge, ravers learn *what* is stigmatized and *how* to avoid this stigmatization. However, the negative connotations of stigma are still present in this discussion, as the fear of stigmatization for accessing harm reduction is still a concern for some ravers. Folk knowledge, again, aids in addressing this concern as ravers can share stories and knowledge about their own experiences to destigmatize harm reduction and educate other ravers on harm reduction services to reduce the fear of stigmatization and judgement. Stigma is a double-edged sword for the EDM community, which plays an important role in pursuing organic, personal harm reduction strategies and formal, organized harm reduction services. This requires us to rethink and redefine what "stigma" is.

This provides interesting insight into the boundary work done by ravers regarding their drug use (Lamont & Molnár, 2002; Lamont & Fournier, 1992). In this sense, the "responsible" vs. "irresponsible" boundary is drawn to influence a ravers' self-perception of their identity.

While Lamont & Molnár (2002) suggest boundaries tend to be drawn to assert "superiority" over another, I suggest that in the rave community, boundaries are more efficient at being a mobilizing factor for ravers to engage in safer usage. So, while this boundary has a slightly different purpose than other social boundaries people draw, it is nonetheless socially useful. There is a danger, though, in drawing such boundaries. Alienating others who may *want* to cross the boundary into being seen as "responsible" may have the opposite effect. Instead of encouraging them to be more responsible, some people may further gravitate towards the label they've been given (in line with Lemert's (1951) definition of secondary deviance). While this is still a danger, my data indicates an opportunity for label mobility for ravers to resist their labels.

With this in mind, "stigma" should be considered in a broader scope. This chapter expands on the literature on labels (e.g., Becker, 2018; Lamont & Fournier, 1992; and Lemert, 1951). While labelling is important, it is interesting to note that perceptions of "deviance" often come in the form of the responsibilitization dichotomy for ravers. This dichotomy is importantly socially constructed. I expand on this social construction, suggesting that labels and stigma come from folk knowledge, as people learn what behaviours belong to which labels through social interaction.

Chapter 5: Conclusion

Summary of Research

In summary, through this project, I found that ravers in Edmonton have a complex relationship between informal/organic and formal/organized harm reduction. While both have their benefits, I have focused explicitly on the role of organic harm reduction within the community. In this, I have determined "harm reduction" in the EDM community is an expansive label that includes the community itself. Through connection, knowledge sharing, and a perceived duty to keep others safe and healthy, the community fostered by ravers in the EDM scene is *conducive* to harm reduction *and is* harm reduction. Further, the community is a conduit for folk knowledges about personal harm reduction strategies *and* organized harm reduction. Through the community and the transmission of these knowledges, ravers can determine what their best practices are and determine what is "responsible" and "irresponsible" to do as a raver who uses club drugs. Through this, the threats of "stigma" and "labelling" can be reimagined not as *solely* negative forces but as a potentially *motivating* force to engage in harm reduction and be seen as a "responsible" raver.

In Chapter 3, I explored the role that the "community" plays in harm reduction for ravers in Edmonton. I found that their connection to the community for many ravers allows them to learn from each other and pass on their knowledges about harm reduction practices. Ravers internalize this knowledge and then passed on to others. This connection to the community and a raver's "chosen family" encourages them to follow a code of conduct that ensures they look out for their friends' safety, thus reducing harms. Chapter 4 explored how this knowledge is passed between ravers, informing perceptions of safety and harm reduction. Many of my participants identified what they perceived as a dichotomy between "responsible" and "irresponsible" drug

usage. With this dichotomy in mind, they developed their own harm reduction strategies to ensure other ravers perceive them as the former. This stigmatized perception of "responsibility" is transmitted between ravers the same way their knowledge about harm reduction is shared. Further, knowledge about formal harm reduction organizations is transmitted socially. Through this process, harm reduction organizations become more accessible to people who have concerns about accessing them.

Limitations

A crucial caveat to this project is recognizing that drug usage is contextual and patterns, norms, and perceptions vary regionally and culturally. It has been noted that "club drugs show considerable regional variability," and people who use them present "local trends" specific to the users in selected regions or scenes (Fendrich et al., 2003, pp. 1693-94). Existing studies on drug usage in the party, club and dance scenes, for this reason, "have limited generalizability and require replication in other population-based studies" to accurately represent the experiences of people who use drugs in different locales (Fendrich et al., 2003, p.1700). Like other projects on drug culture, findings from this project may not be generalizable in that it is likely the drug culture of the EDM scene in Edmonton differs from the drug culture in another locale, as well as in other music communities. As such, while the findings and recommendations are *likely* applicable in many locales, they are born out of the specific needs of ravers in Edmonton, and drug availability, legislation, and general culture across locales will likely affect the extent to which they are applicable. Having a broader view of harm reduction across regions will be useful in informing rave hosts of best practices to suit broader raver needs.

This study solely consisted of interviews, as I could not partake in in-person participant observation due to COVID-19. As such, the findings of this project are solely based on participant narratives. I could not corroborate what any of my participants suggested happened at raves through observation. For this reason, I must acknowledge that participants may have presented their answers through a social desirability lens, and I have no way of confirming whether or not these statements are an accurate representation of raver behaviours.

I could only interview other English-speaking ravers, as I cannot communicate effectively in other languages. This limited my participant pool. Future research should include interviews with participants in a wider range of languages. Further, my research sample included 19 people, a relatively small sample of the thousands of ravers in Edmonton. As such, this project's findings must be considered with this in mind, as it is likely there is a much broader array of experiences than I have been able to present here.

An additional limitation is that all my participants believe in the importance of harm reduction. This likely affected my data collection, as they all believed harm reduction and education were important for safe usage. This project, then, is missing the perspectives of those who do not believe in harm reduction. Likely, those who do not believe in harm reduction or are "anti" harm reduction would have different opinions on harm reduction and safety for the rave community. I am missing these voices in my project.

Overwhelmingly, my participants accounts of the EDM scene as exceptionally positive. Any alternative voices whose opinions may differ on the EDM community were not represented in this project. One of my participants suggested that the EDM community is viewed positively by many because alcohol is not as prevalent in the scene. Jeff indicated that when people consume alcohol at festivals “there’s just always fucked up people. There's always fights.

Alcohol is the worst drug in my opinion,” because it increases “aggression” and makes people less “open” unlike the club drugs people often do at raves. For this reason, he suggests people who are more “in” rave culture are more likely to perceive a positive atmosphere as they are part of the “[club] drug scene,” as opposed to people who may be there as “outsiders” who want to party rather than build connections, like Jeff. As I only interviewed people who view the EDM community as generally positive, I am missing the views of people who may have a different opinion or insight on EDM culture. This would be valuable to understand a more nuanced picture of the community.²⁰

Recommendations and Contributions

My thesis contributes to the literature on harm reduction, folk knowledge, labels and the EDM community. I have demonstrated that there is a previously unresearched nuance between harm reduction and community wherein harm reduction is not only a by-product of community, but community *is* harm reduction. While there is much existing research on the characteristics of EDM culture (Weir, 2000; Anderson, 2009; Colombo, 2010; Conner, 2015; Rome, 2001), I have specifically explored how these characteristics offer harm reduction for people who use club drugs. I have also explored and reimagined how stigma, labels, and boundary work operate for ravers – stigma is both a help and a hindrance for ravers who wish to be seen as “responsible” in their drug use but may be unsure of accessing a harm reduction organization. Stigma and labels are developed by sharing folk knowledge, which is an integral part of creating collective perceptions and values of drug use. Lastly, and most broadly, my research explores “organic”

²⁰ This is not to say that all participants unabashedly view the EDM scene as entirely positive. As mentioned in Chapter 3, Charlene is part of a consent team to address sexual harassment and assault in the rave scene. This points to the fact that, like in many spaces, these are pervasive issues the EDM scene is no stranger to. While these types of concerns were not focal for most of my participants when reflecting on their experiences within the community, it is important to recognize that there *are* issues and not everyone’s experiences in the community are uniformly positive.

and "organized" (i.e., informal and formal) harm reduction. Based on my research, I make the following policy suggestions.

Harm Reduction Beyond Drug Use

Harm reduction does not only refer to drug use. While the phrase may often elucidate ideas about mitigating risk specifically for people who use drugs, harm reduction offers risk and harm mitigation principles that can be applied to a broad range of activities. In the EDM community, harm reduction is about more than risk mitigation when consuming drugs. It is about addressing the broader potential for risks within a rave setting. These risks may include sexual assault and harassment, arrest for possession, hearing damage, dehydration/over-exhaustion, and emotional turmoil. Having a holistic understanding of the *scope* that harm reduction for the EDM community must encompass will better allow service providers and community members to ensure collective safety and/or well-being. I recommend that rave venues implement holistic harm reduction services at raves that better address a broader spectrum of harms. As of March 2020, the City of Edmonton mandated that rave venues provide free bottled water and offer quiet "chill" spaces to rave patrons – an excellent start to running these events with a well-rounded harm reduction approach. It remains to be seen how this plays out post-Covid-19, as there have been no official raves held since the implementation of the bylaw.

While existing harm reduction organizations employ holistic views of harm reduction (e.g., by providing earplugs, condoms, bottles of water, granola bars, etc.), they are not at *every* rave, and many ravers do not know they are even there. The onus, therefore, should be on rave venues to both a) book a formal harm reduction organization that addresses and provides holistic harm reduction services to be at the event and b) provide clear messaging at venues about

holistic harm reduction strategies/organizations. Good practices could include handing out earplugs to attendees as they walk in²¹, better signage in hallways and bathrooms encouraging safety, and clearly directing people to water fountains and harm reduction services. Signage promoting safety would need to be tactful and avoid "demonizing" unsafe practices with scare tactics and shaming. Signage should include what harm reduction services are provided at the rave and common tips that ravers share amongst each other (i.e., "start low and go slow,"²² which applies to both licit and illicit substances). This will help the venue exude an image of being open to harm reduction and ensure the environment created is in line with harm reduction principles. As opposed to typical nightlife posters found in bathrooms which often utilize scare tactics to shame people into "responsibility," creating an atmosphere that limits negative stigmatization will be more conducive to a more well-rounded approach to harm reduction.

By encouraging harm reduction in a more holistic sense, venues can promote "harm reduction" without addressing the "drug usage" aspect, which reduces their legal liability and ensures they are not accused of "promoting drug usage" by municipal stakeholders. Rather, they are promoting harm reduction *as a whole* and encouraging people to engage with these strategies and services, which *also* address harm reduction in the realm of drug use.

Suggestions for Harm Reduction Organizations

One of the questions I asked my participants was "What do you think harm reduction organizations should offer to make people want to use them?" I have formulated some

²¹ I would be hesitant to suggest venues simply turn down the volume, as a lot of ravers gravitate towards sets that rely on heavy bass at a high volume, which is characteristic of the genre. By handing out ear plugs, ravers can make their own choices on how they want to enjoy the music.

²² This is also the government of Canada's advice on cannabis consumption (Government of Canada, 2019).

suggestions for harm reduction organizations in Edmonton to increase efficacy with their answers, as insiders, in mind.

First, in a move to broadly normalize "harm reduction," harm reduction resources/organizations should be present in bars and nightlife venues, not just rave venues. One participant, Jenn, suggested that education on what a harm reduction resource offers would be valuable in increasing its uptake. She suggested that one way to do this is to normalize them even further by implementing them into bars, to emphasize that harm reduction organizations are "a safe place for [people] to go" for help if they need it. Bars are, in essence, already supervised consumption sites – individuals consume a drug (alcohol) in a regulated and supervised environment to increase the safety of consumption (Picard, 2019). By including *other* harm reduction resources, "harm reduction" becomes normalized. People can become more familiar with it, so they are more familiar with their service if they encounter one at a rave.

Other participants suggested people are unaware that volunteers at harm reduction services are "insiders" in the EDM community. One participant, Alan, mentioned the volunteers "don't look like medical workers," which he emphasized was important for ravers to identify them as less "intimidating" to go to for help. Ensuring that the volunteers *look* like ravers (i.e. wearing bright colours, kandi, glow sticks, etc.) will likely help ravers feel comfortable with accessing the resource.

On a practical level, June suggested "stickers" or "a wristband with a website that has information on it" would be effective ways for harm reduction organizations to disseminate a) information about what they do and b) information about harm reduction strategies. June mentions that it is unlikely a raver will hold onto a pamphlet all night, but a sticker or a wristband is easy to wear or tuck away, and "ravers love stickers." This is an easy, likely

effective way for harm reductions to spread information. While it may not *necessarily* educate the raver "in the moment" as they are partying, if they are more likely to leave the rave with the item (as opposed to a pamphlet) to look a post-rave, they are more likely to access the information to learn for future raves.

Drug Interaction Information

Some of my participants indicated that one of their personal strategies for harm reduction was being aware of how certain club drugs interact with other substances, including prescribed medication. My following recommendation is that pharmaceutical providers ensure clear messaging about how *any* drug interacts with medication (*including* illicit substances). While many pharmaceutical companies address interactions with *other* prescription drugs and/or alcohol²³ on labels or in informational pamphlets that come in the package, they generally do not provide clear guidelines for illicit substances. Instead, ravers have to rely primarily on folk knowledge regarding the drug-drug interactions between, for example, MDMA and anti-depressants. Making this information easily available falls in line with harm reduction principles that acknowledge people may be engaging in risky health behaviours (i.e., consuming drugs), but there are strategies that should be implemented to make it safer (Marlatt, 1996).

While I have shown value in folk knowledge and independent research for ravers, we cannot deny that it would be more efficient to make this information readily accessible to those prescribed these medications. Although it is not the job of these companies to do this, harm reduction is made easier when all parties involved are part of the conversation and practices to reduce harm. Health outcomes are bolstered when harms are reduced (Emmanuelli & Desenclos,

²³ Interestingly, most medications do not currently provide information on their interaction with cannabis, despite its legalization.

2005). Considering the wide variety of club drugs and pharmaceuticals, this would be a significant undertaking requiring extensive research and collaboration between pharmaceutical companies, researchers, and people who use drugs with lived experience. As a starting point, having *general* interaction information between common party drugs and families of pharmaceuticals will make this undertaking more manageable for researchers. Studies of this nature could be funded by research grants such as those available through the Canadian Institute of Health Research (CIHR).

Not only does this fall in line with harm reduction principles of acknowledging drugs are being used and that they should be used safely, but it also mirrors existing harm reduction practices of some organizations. While harm reduction organizations often do not provide information on interactions between club drugs and prescribed drugs, they provide information on interactions between other drugs. This information comes in the form of pamphlets and posters usually. In them, these organizations provide information on how, for example, MDMA interacts with alcohol, ketamine, caffeine, cocaine, etc. This way, ravers can make more informed decisions and be more aware of the risks they may need to mitigate. Using a similar practice in informing people how prescription drugs, like anti-depressants, interact with club drugs, ravers do not have to rely solely on folk knowledge to learn the potential risks they may need to address (Maxwell, 2005; Roncero et al., 2018). Many ravers may view this information as being more legitimate if shared by a harm reduction organization. I suggest it is important that there is an element of collaboration between pharmaceutical companies and harm reduction organizations to broadly disseminate this information. This will also address the knowledge gap that only includes drug-drug interaction information on medication labels/packaging for people who may consume pharmaceuticals (without a prescription) *and* club drugs.

Safe Supply and Drug Checking

The next recommendations will seek to address the broader structures that make substance use potentially risky in the first place. The first of these recommendations is to implement a safe supply program for all drugs. Safe supply refers to a regulated supply of substances – much like how alcohol or cannabis are regulated in Canada (Canadian Association of People Who Use Drugs, 2019; Tyndall, 2018). Safe supply is usually suggested in the context of the opioid crisis in Canada (Fleming et al., 2020; Ivsins, 2020). To address the potential risk of fentanyl, safe supply is, in reality, valuable for all people who use drugs. Although my participants were not particularly concerned about fentanyl, as they mostly used hallucinogens and stimulants as opposed to substances that mimic fentanyl's effects, they were *still* concerned about other toxins in their substances. Some participants "cut out the middleman" and bought *raw* MDMA "rock" to convert into pills themselves to avoid the drug passing through more hands than necessary and increasing the risk of it being cut²⁴ with a substance they do not want it to be cut with. Most participants indicated that they also never bought from people they *did not know* and brought enough of their substance to not run out at the venue. This, again, is to avoid tainted, cut, or poisoned drugs. As such, I recommend that safe supply programs be implemented across the board for all substances. This will provide those who use club drugs an increased peace of mind that their substance is not toxic or cut with dangerous chemicals.

At the very least, drug checking *should* be a feature at all raves. The vast majority of my participants said that harm reduction resources should offer *more* drug testing/have more drug testing kits available. While ravers *can* purchase their own test strips or test kits prior to the event

²⁴ A substance is "cut" when the purity of the substance is altered – usually this means additional substance(s) are mixed into the pure drug.

to use, these kits are not always effective on all substances and are less precise than spectrometers that some harm reduction organizations have. Some of my participants stated that they *do* test their own substances with a test kit, but quality test kits are cost prohibitive to many.

While a formal drug checking service would mean that rave venues would have to acknowledge that people are using drugs on the premises, which, as mentioned above, many venues are hesitant to do, it *would* provide an important opportunity for ravers to practice drug safety by knowing if their substance is what they think it is. Many of my participants said they believe this is the number one thing not offered at all Edmonton raves that *should* be provided. Festivals like Shambhala in BC already allow this service on their grounds. While this is a legal grey area, it *does* allow ravers to make the most informed choices about their own substance usage and enhances the safety of the consumption at the festivals. Edmonton can accomplish this by more formally addressing the "legal grey area" that places like Shambhala operate in. Currently, many venues likely do not allow organized drug testing/test kits because it is a legal and insurance liability (Mohr, 2018; Garber, 2015). If there was legislation allowing – and *encouraging* – drug checking, this liability can be mitigated, and venues may be more likely to allow these services at their raves. In addition, though, drug checking is expensive. While there *have been* raves in Edmonton that have allowed drug checking by harm reduction organizations, the single-use materials needed to drug check for *basic* substances are expensive, and the cost only goes up with increased substance detection capabilities. Due to the non-profit nature of harm reduction organizations, part of these costs should be offset by the event organizers as this would be a key part of their event safety plan.

Decriminalization

Finally, and arguably most all-encompassing, I recommend full decriminalization of all substances. This would address hesitations and liability concerns of venues to invite more intensive harm reduction to their events. It would also provide an appropriate avenue for ravers to practice safe consumption. Few of my participants were concerned about the legal repercussions of drug usage, although some *did* posit that this fear may be a barrier to others accessing harm reduction. Decriminalization of personal possession of substances would be a major step to address this barrier at the root. If ravers did not fear legal penalties for having substances, they might be more likely to openly admit they consumed substances and seek help if they need it.

Further decriminalization will likely aid in reducing stigma against people who use drugs as a whole, as this may assist to "destabilize the perception of drug use" (Buchman et al., 2017). Criminalization of drugs currently perpetuates and exacerbates a cycle of stigma and trauma against people who use drugs, as the confluence of multiple stigmas may ultimately cause an infringement on one's rights (Buchman et al., 2017; Seear et al., 2017; Wogen & Restrepo, 2020; Livingston et al., 2012). Through the decriminalization of all substances, the stigma applied to people who use drugs for using "illicit substances" will be challenged and unpacked, as will the "structural stigma" that negatively affects people who use drugs (Wogen & Restrepo, 2020).

This is not to say that they will not be stigmatized *at all* – people who use cannabis and alcohol are still faced with stigmas – but the stigma may be changed/lessened (Buchman et al., 2017). With drug decriminalization, rather than being a *criminal* issue, drug consumption would be treated as a *health* issue with very different implications (Wogen & Restrepo, 2020). Through the dismantling of stigma from criminalization, ravers are likely to more openly acknowledge

their substance usage and get help as they need it²⁵ (Hawkes, 2011). As suggested by some participants, the stigma and worry about "the message" of being someone who uses substances is a barrier to accessing harm reduction services. We have seen, in the case of the legalization of cannabis and its subsequent normalization, when the law is no longer a punitive measure against drugs, it becomes more socially tolerated and accepted, leading to *less* stigma (Hathaway et al., 2011; Aranda et al., 2020).

Future Research Considerations

Insider vs. Outsider Dynamics

An interesting thought I had while writing my analysis was how being an insider versus being an outsider affects one's experience as a raver. As being an insider or an outsider affects a researcher (Humphrey, 2007; Montano, 2013), it is logical to assume these labels also affect how one interacts with and experiences the EDM community. It is likely the insider vs. outsider dynamic within the community, specifically considering harm reduction organizations and services, affects one's experience in the community. This could include community integration/connection, access to harm reduction services, *and* perceptions of the legitimacy of a service. Future studies should consider how being an "outsider" (perhaps as a newcomer OR as an agent of harm reduction) influences their experience.

Identity and Harm Reduction

Although I had initially hoped I would address the role that identity plays for EDM fans' relationship to harm reduction, my data did not elucidate this connection. Despite this, I believe

²⁵ This has been the documented case in Portugal post-decriminalization, as cited in Hawkes (2011).

there is likely still an interesting relationship here that should be studied. Future research should explore whether/how race, ethnicity, gender, and sexuality influence ravers' experiences with harm reduction and the EDM community. Questions that can be asked include "How does sexuality shape interactions in the EDM community?" as much of modern EDM was pioneered by queer influencers in the disco scene (Glazer, 2014). It would be interesting to learn how modern EDM communities hold space for LGBTQ2SIA+ identities. Other questions that should be asked here include "How does race and ethnicity not only shape interactions within the EDM community but perceptions of drug usage and harm reduction?" as EDM is a diverse community with diverse needs. A project like this would likely benefit from *in person* participant observation alongside interviews.

Digital Raves and Community

In light of the COVID-19 pandemic, the EDM community has moved online to reduce COVID-19 related harms while trying to maintain community. DJs of varying popularity have streamed their sets on online platforms with chat room features since festivals and shows are cancelled. Not only has the performance moved online, but the social spaces occupied by the audience have as well. EDM fans are now flocking to streaming services such as Twitch –once primarily used for video game streams – and YouTube to watch their favourite DJs perform sets and host "virtual raves" from the comfort of their own homes. While they have lost the physical connection of being present in the community and having in person experiences, parts of the community have found a new, temporary home online. As Hakim Bey says, "'Fight for the right to party' is in fact not a parody of the radical struggle but a new manifestation of it, appropriate to an age that offers TVs and telephones as ways to 'reach out and touch' other human beings,

ways to 'Be There'" (Bey, 1991, p.82). Although technology has progressed to incorporate streaming services online since Bey first wrote this, the sentiment remains the same. In the case of the EDM community, sociality has evolved in the face of the pandemic to utilize the digital sphere.

The shift to the virtual community found in chatrooms has changed the experience of substance usage and the social nature of drug usage in the EDM community. Rather than being high with a group of friends at a rave, for example, fans of streaming DJs may type in the chat room "Who's high?!" and create a digital dialogue with other fans from all around the world who may also be high that was not possible at a live rave. With the introduction of live music, digital communities previously found primarily on Twitter interact with the music and with others in real time. This is an example of a pivot in the community, as there is no way for ravers to connect in the way they used to. By having these conversations on streaming platforms, ravers have the opportunity to stay connected to the EDM community, even if it is through something small like a message in a chat. When an in-person connection is not possible, this semblance of community is "better than nothing" for many.

With this change in the nature of the EDM community, we are likely to see a further evolution of the genre similar to those witnessed in other music communities such as the hip-hop community. Regarding the process of the street code's replication into the virtual sphere through social media (Urbanik and Haggerty, 2018), one must question what similar processes are occurring for the EDM community. Considerations in this regard should include: i) whether/how other ravers may perceive stigma surrounding drug use, now that large group use is not allowed/common; ii) whether/how people are engaging in harm reduction from their own homes; and iii) whether/how the internet is shaping the actions and perspectives of ravers regarding

accessibility, drugs, and community. With this unique digital shift that the global pandemic has facilitated, we have a prime opportunity to pursue a netnography – an online ethnography – to fully understand the new role of social media and the internet have in the EDM community. This will also have the potential to provide insight into the unique and growing methodology of netnography.

I included a section in my interview guide about participant experiences and thoughts on the shift to online raves. I also collected data from "attending" some of these digital events. The majority of my participants had *not* watched these streams as it "wasn't the same" as attending in person. For people used to raving with large groups of friends, watching these streams at home with one or two other people during the pandemic was unappealing. For those who *had* watched them (usually with friends either online or in person), they acknowledged it was better than nothing but not close enough to the real thing to properly replace in person raves. Some participants still agreed, though, they are a good idea because they provide an opportunity for ravers to have an outlet to connect with others in the community and allow artists a new revenue stream in a time when artists are struggling.

Although my data on this phenomenon is not expansive, it does indicate where future research can and should go. As the COVID-19 pandemic continues, countless communities have had to make sacrifices and reimagine how they can foster connection. The EDM community is at the forefront of this task and presents us important lessons on the value of the social. Further, this preliminary data suggests an interesting dichotomy between in-person community and digital community, which proves one *cannot* be substituted for the other, regardless of how "close to the real thing" it is. More research is needed to better understand the nuance and relationships between community and connection during and eventually post the pandemic.

References

- Akers, R.L., Krohn, M.D., Lanza-Kaduce, L., Radosevich, M. (1979). Social Learning and Deviant Behaviour: A Specific Test of a General Theory. *American Sociological Review*. 44(August). 636-655.
- Alam, H. (2018, June 14). Party on: Councillors put off rave moratorium, await harm reduction report. *Edmonton Examiner (Alberta, Canada)*. <https://edmontonjournal.com/news/local-news/committee-to-discuss-temporary-moratorium-on-raves-in-edmonton/>
- Amith, M., Cohen, T., Cunningham, R., Savas, L., Smith, N., Cuccaro, P., Gabay, E., Boom, J., Schvaneveldt, R., Tao, C., (2020). Mining HPV Vaccine Knowledge Structures of Young Adults From Reddit Using Distributional Semantics and Pathfinder Networks. *Cancer Control*, 27(1). 1-16. DOI: 10.1177/1073274819891442
- Anderson, T.L. (2009), Understanding the Alteration and Decline of a Music Scene: Observations from Rave Culture1. *Sociological Forum*, 24: 307-336. <https://doi.org/10.1111/j.1573-7861.2009.01101.x>
- Antoneshyn, A. (2020). Bylaw regulating raves to be reviewed by city council in February. *CTV News Edmonton*. <https://edmonton.ctvnews.ca/bylaw-regulating-raves-to-be-reviewed-by-city-council-in-february-1.4793258>
- Aranda, A.M., Conti, R., Wezel, F.C. (2020). Distinct but not Apart? Stigma Reduction and Cross-Industry Evaluative Spillovers: The Case of Medical Marijuana Legalization. *Academy of Management Journal*. <https://doi.org/10.5465/amj.2018.1460>
- Bandura, A. (1965). Vicarious Processes: A Case of No-Trial Learning. *Advances in Experimental Psychology*, 2, 1-55. Retrieved March 3, 2021, from [https://doi.org/10.1016/S0065-2601\(08\)60102-1](https://doi.org/10.1016/S0065-2601(08)60102-1).
- Beauchemin, M. (2014, September 11). Safe From Harm: Drugs and Festival Culture. Retrieved from: <https://pitchfork.com/thepitch/477-safe-from-harm-drugs-and-festival-culture/>
- Becker, H.S. (1953). Becoming a Marihuana User. *American Journal of Sociology*. 59(3). 235-242. <https://www.jstor.org/stable/2771989>
- Becker, H.S. (2018). *Outsiders*. Free Press. (Original work published 1963).
- Becker, H.S. (2018). *Outsiders*. Free Press. (Original work published 1963).
- Bey, H. (1991). *T.A.Z. : the temporary autonomous zone, ontological anarchy, poetic terrorism*. Brooklyn, NY: Autonomedia.
- Bonuck, K. A. (1993). AIDS and families: Cultural, psychosocial, and functional impacts. *Social Work in Health Care*, 18(2), 75–89. https://doi-org.login.ezproxy.library.ualberta.ca/10.1080/J010v18n02_05
- Briggs, C. L. (2001). Interviewing, Power/Knowledge and Social Inequality. *Handbook of Interview Research*. 1-11. <http://dx.doi.org/10.4135/9781412973588.n52>
- Briozzo, L. (2016). From risk and harm reduction to decriminalizing abortion: The Uruguayan model for women’s rights. *International Journal of Gynecology and Obstetrics*. 134(2016). 53-56. <http://dx.doi.org/10.1016/j.ijgo.2016.06.003>
- Brown, G. (2012). Ain’t I a Victim - The Intersectionality of Race, Class, and Gender in Domestic Violence and the Courtroom. *Cardozo Journal of Law & Gender*, 19(1), 147–184
- Brunson, R. K. (2007), “Police Don’t Like Black People”: African-American Young Men’s Accumulated Police Experiences. *Criminology & Public Policy*. 6: 71–102.

- Bucierius, S.M. (2013). Becoming a “Trusted Outsider”: Gender, Ethnicity, and Inequality in Ethnographic Research. *Journal of Contemporary Ethnography*, 42(6), 690-721. DOI: 10.1177/0891241613497747
- Buchman, D.Z., Leece, P., Orkin, A. (2017). The Epidemic as Stigma: The Bioethics of Opioids. *Stigma & Health*, 45, 607-620. DOI: 10.1177/1073110517750600
- Burrell, M. J., & Jaffe, A. J. (1999). Personal Meaning, Drug Use, and Addiction: An Evolutionary Constructivist Perspective. *Journal of Constructivist Psychology*, 12(1), 41–63. <https://doi-org.login.ezproxy.library.ualberta.ca/10.1080/107205399266217>
- Canadian Association of People Who Use Drugs. (2019). Safe Supply Concept Document. <https://vancouver.ca/files/cov/capud-safe-supply-concept-document.pdf>
- Carr, P. J., Napolitano, L., Keating, J. (2007). We Never Call the Cops and Here is Why: A Qualitative Examination of Legal Cynicism in Three Philadelphia Neighborhoods. *Criminology*, 45(2), 445–480.
- Caulkins, J., Reuter, P. (2009). Towards a harm-reduction approach to enforcement. *Safer Communities*, 8(1), 9-23. <https://doi.org/10.1108/17578043200900003>
- CBC News (2009, May 14). West Edmonton Mall cancels dance parties where teen overdosed. *CBC News*. <https://www.cbc.ca/news/canada/edmonton/west-edmonton-mall-cancels-dance-parties-where-teen-overdosed-1.833047>
- CBC News. (2012, April 30). Edmonton rave sends 29 to hospital. *CBC News*. <https://www.cbc.ca/news/canada/edmonton/edmonton-rave-sends-29-to-hospital-1.1173295>
- Charmaz, K. (2001). 32 qualitative interviewing and grounded theory analysis. In J. F. Gubrium, & J. A. Holstein (Eds.), *Handbook of Interview Research* (pp. 675-694). SAGE Publications, Inc., <https://www-doi-org.login.ezproxy.library.ualberta.ca/10.4135/9781412973588.n39>
- City of Edmonton. Bylaw No. 13138. *Business License Bylaw*. (March 9, 2020). <https://www.edmonton.ca/documents/Bylaws/C13138.pdf>
- City of Edmonton. Bylaw No. 19166. *Electronic Dance Music Event Bylaw*. (March 1, 2020). <https://www.edmonton.ca/documents/Bylaws/BL19166.pdf>
- Clement D.C. (1982) Samoan Folk Knowledge of Mental Disorders. In: Marsella A.J., White G.M. (eds) *Cultural Conceptions of Mental Health and Therapy. Culture, Illness, and Healing (Studies in Comparative Cross-Cultural Research)*, vol 4. Springer, Dordrecht. https://doi.org/10.1007/978-94-010-9220-3_7
- Clement, S., Schauman, O., Graham, T., Maggioni, F., Evans-Lacko, S., Bezborodovs, N., Morgan, C., Rüsç, N., Brown, J.S.L., Thornicroft, G. (2015). What is the impact of mental health-related stigma on help-seeking? A systematic review of quantitative and qualitative studies. *Psychological Medicine*, 45, 11-27. doi:10.1017/S0033291714000129
- Collins, A. B., Boyd, J., Cooper, H. L. F., & McNeil, R. (2019). The intersectional risk environment of people who use drugs. *Social Science & Medicine*, 234. <https://doi-org.login.ezproxy.library.ualberta.ca/10.1016/j.socscimed.2019.112384>
<http://chicagounbound.uchicago.edu/uclv/vol1989/iss1/8> 139-164.
- Colombo, A. (2010). From Disco to Electronic Music: Following the Evolution of Dance Culture Through Music Genres, Venues, Laws, and Drugs. *CMC Senior Theses*. Paper 83. http://scholarship.claremont.edu/cmc_theses/83

- Conner, C.T. (2015). Electronic Dance Music: From Deviant Subculture to Culture Industry. *UNLV Theses, Dissertations, Professional Papers, and Capstones*. 2528. <https://digitalscholarship.unlv.edu/thesesdissertations/2528>
- Crenshaw, K. (1989). Demarginalizing the Intersection of Race and Sex: A Black Feminist Critique of Antidiscrimination Doctrine, Feminist Theory and Antiracist Politics. *University of Chicago Legal Forum*. 1989(1).
- Cristiano, N.M. (2020). Managing Risk Environments: An Ethnographic Study of Club Drug Use and Harm Reduction in the EDM Scene. [Unpublished Thesis]. *York University Electronic Theses and Dissertations (EDTs)*. Toronto, Ontario. Retrieved from <http://hdl.handle.net/10315/37947>
- Davey, Z., Schifano, F., Corazza, O., Deluca, P. (2012). e-Psychonauts: Conducting research in online drug forum communities. *Journal of Mental Health*. 21(4). 386-394. DOI: 10.3109/09638237.2012.682265
- Delamont, S. (2004). Ethnography and Participant Observation. *Qualitative Research Practice*. London. 205-217.
- Emmanuelli, J., Desenclos, J-C. (2005). Harm reduction interventions, behaviours and associated health outcomes in France, 1996–2003. *Addiction*. 100(11). 1690-1700.
- Escoffier, J. (1998). The Invention of Safer Sex: Vernacular Knowledge, Gay Politics and HIV Prevention. *Berkeley Journal of Sociology*, 43, 1-30. Retrieved February 15, 2021, from <http://www.jstor.org/stable/41035535>
- Fendrich, M., Wislar, J.S., Johnson, T.P., & Hubbell, A. (2003). A contextual profile of club drug use among adults in Chicago. *Addiction (Abingdon. Print)*, 98(12), 1693–1703.
- Fernández-Calderón, F., Bilbao-Acedos, I., Lozano-Rojas, O., Rojas-Tejada, A., Vidal-Giné, C., Vergara-Moragues, E., González-Saiz, F. (2014). Harm reduction behaviors among young polysubstance users at raves. *Substance Abuse*, 35(1), 45–50. <https://doi-org.login.ezproxy.library.ualberta.ca/10.1080/08897077.2013.792760>
- Fleming, T., Barker, A., Ivsins, A [Ds:O//dIo: i1.o0r.g1/107.171/1773/510350560862802099444424.](https://doi.org/10.1186/s12954-019-0351-1), Vakharia, S., McNeil, R. (2020). Stimulant safe supply: a potential opportunity to respond to the overdose epidemic. *Harm Reduction Journal*. 17(6). 1-6. <https://doi.org/10.1186/s12954-019-0351-1>
- Fletcher, A., Calafat, A., Pirona, A., Olszewski, D. (2010). Chapter 13: Young people, recreational drug use and harm reduction. *Harm Reduction: evidence, impacts and challenges*. 357-376.
- Frei, M. (2010). Party Drugs and Harm Reduction. *Australian Family Physician*. 39(8). 558-561
- Garber, D. (2015). The Bunk Police Are Risking Prison to Bring Drug Testing Kits to Music Festivals. *Noisey: Music by VICE*. <https://www.vice.com/en/article/wny535/the-bunk-police-are-risking-prison-to-bring-drug-testing-kits-to-music-festivals>
- García-Carpintero, M.A., de Diego-Cordero, R., Pavón-Benítez, L., Tarrío-Concejero, L. (2020). ‘Fear of walking home alone’: Urban spaces of fear in youth nightlife. *European Journal of Women’s Studies*. 1-15.
- Garey, L., Japuntich, S.J., Nelson, K.M., Scott-Sheldon, L.A.J. (2020). Using Social Media to Recruit Youth Who Use Electronic Cigarettes. *American Journal of Health Behaviour*. 44(4). 466-498. <https://doi.org/10.5993/AJHB.44.4.10>
- Gibbs, G.R. (2012). Thematic Coding and Categorization. *Analyzing Qualitative Data*. (London). 38-55. <https://dx.doi.org/10.4135/9781849208574>

- Glazer, J. (2014). Dance Pride: The Gay Origins of Dance Music. *Noisey: Music by VICE*.
<https://www.vice.com/en/article/aeqxwz/dance-pride-the-gay-origins-of-dance-music>
- Golub, A., Johnson, B. D., & Dunlap, E. (2005). Subcultural evolution and illicit drug use. *Addiction research & theory*, 13(3), 217–229. <https://doi.org/10.1080/16066350500053497>
- Goulding, C., Shankar, A., Elliott, R. (2002). Working weeks, rave weekends: Identity fragmentation and the emergence of new communities. *Consumption, Markets and Culture*, 5(4), 261–284. <https://doi.org/10.1080/1025386022000001406>
- Government of Canada. (2019). Cannabis: Lower your risks. <https://www.canada.ca/en/health-canada/services/drugs-medication/cannabis/resources/lower-your-risks.html>
- Haggerty, K. (2004). Ethics Creep: Governing Social Science Research in the Name of Ethics. *Qualitative Sociology*. 27(4). 391-414.
- Hawk, M., Coulter, R.W.S., Egan, J.E., Fisk, S., Reul Friedman, M., Tula, M., Kinsky, S. (2017). Harm reduction principles for healthcare settings. *Harm Reduction Journal*. 14(70). 1-9. DOI 10.1186/s12954-017-0196-4
- Hawkes, N. (2011). Highs and lows of drug decriminalisation. *BMJ: British Medical Journal*. 343(7829). 874-875. <https://www.jstor.org/stable/23052210>
- Henricksen, K. (2000). Harm reduction in the rave community. *Focus (San Francisco, Calif.)*, 15(4), 1–4.
- Hess, A. (2007). Older siblings and sober friends: A qualitative inquiry into DanceSafe and harm reduction. *Conference Papers -- National Communication Association*, 1.
- Holloway, I., Todres, L. 2003. The Status of Method: Flexibility, Consistency and Coherence. *Qualitative Research*, 3(3), 345–357. <https://doi-org.login.ezproxy.library.ualberta.ca/10.1177/1468794103033004>
- Hood, S., Mayall, B., Oliver, S. (1999) *Critical Issues in Social Research: Power and Prejudice*. Buckingham, UK: Open University Press. HN 29 C69 1999
- Hugelius, K., Adolfsson, A., Gifford, M., & Örténwall, P. (2017). Facebook Enables Disaster Research Studies: The Use of Social Media to Recruit Participants in a Post-Disaster Setting. *PLoS currents*. 9. <https://doi.org/10.1371/currents.dis.f4a444e1f182776bdf567893761f86b8>
- Hughes, E. (1945). Dilemmas and Contradictions of Status. *American Journal of Sociology*. 50(5), 353-359. <https://www.jstor.org/stable/2771188>
- Humphrey, C. (2007). Insider-Outsider: Activating the Hyphen. *Action Research*. 5(1). 11-26. DOI: 10.1177/1476750307072873
- Hunt, G., Evans, K., & Kares, F. (2007). Drug Use and Meanings of Risk and Pleasure. *Journal of Youth Studies*, 10(1), 73–96.
- Hyshka, E., Tayler Anderson, J., Wild, T.C., (2017). Perceived unmet need and barriers to care amongst street-involved people who use illicit drugs. *Drug and Alcohol Review*. 36. 295-304. DOI: 10.1111/dar.12427
- iHeartRaves. (2020). How to Trade Kandi at a Rave. [Blog Post]. Retrieved from <https://www.ihearttraves.com/blogs/post/how-to-trade-kandi-at-a-rave>.
- Itzigsohn, J., Giorguli, S., Vazquez, O. 2005. Immigrant incorporation and racial identity: Racial self-identification among dominican immigrants *Ethnic and Racial Studies*, 28(1), 50–78. <https://doi.org/10.1080/0141984042000280012>
- Ivsins, A., Boyd, J., Beletsky, L., McNeil, R. (2020). Tackling the overdose crisis: The role of safe supply. *International Journal of Drug Policy*. 80. <https://doi.org/10.1016/j.drugpo.2020.102769>

- Jerolmack, C. & Khan, S. (2014). Talk Is Cheap. *Sociological Methods & Research*, 43(2): 178-209.
- Johnson, B.D. (1980). Toward a Theory of Drug Subculture. In Theories on Drug Abuse: Selected Contemporary Perspectives, Dan J. Lettieri, Mollie Sayers, Helen Wallenstein Pearson (Eds). US Department of Health and Human Services, Maryland, 110-119.
- JPX. (2016, November 22). A History of the Edmonton Rave Scene in 3,000 Short Words. *E-town Rave History Project*. <http://etownravehistoryproject.blogspot.com/2016/11/a-history-of-edmonton-rave-scene-in.html>
- Jung, A. (2018). Latest stats on raves ‘really troubling,’ city considers temporary ban. *CTV News Edmonton*. <https://edmonton.ctvnews.ca/latest-stats-on-raves-really-troubling-city-considers-temporary-ban-1.3955872>
- Kavanaugh P.R., Anderson T.L. (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>
- Kelly, B.C. (2005). Conceptions of risk in the lives of club drug-using youth. *Special Issue on Club Drug Epidemiology*, 9–10, 1443.
- Khatri C, Chapman SJ, Glasbey J, Kelly M, Nepogodiev D, Bhangu A, et al. (2015) Social Media and Internet Driven Study Recruitment: Evaluating a New Model for Promoting Collaborator Engagement and Participation. *PLoS ONE* 10(3): e0118899. doi:10.1371/journal.pone.0118899
- King, G. (2020). EDM/Rave Culture. *Subcultures and Sociology: Grinnell College*. <https://haenfler.sites.grinnell.edu/subcultures-and-scenes/edmrave-culture/>
- Koch, B. (2018). Project Safe Audience. *Canadian Nurse*, 114(1), 22–24.
- Lamont M, Fournier M. (1992). *Cultivating Differences: Symbolic Boundaries and the Making of Inequality*. Chicago: Univ. Chicago Press
- Lamont, M., Molnár, V. (2002). The Study of Boundaries in Social Sciences. *Annual Review of Social Sciences*. 28. 167-195. doi: 10.1146/annurev.soc.28.110601.141107
- Lemert, E.M., (1951). *Social Pathology: A Systemic Approach to the Theory of Sociopathic Behaviour*. New York: McGraw-Hill Book Co.
- Lenton, S., Boys, A., Norcross, K. (1997). Raves, drugs and experience : drug use by a sample of people who attend raves in Western Australia. *Addiction (Abingdon. Print)*, 92(10), 1327–1337.
- Lenton, S., Single, E., (1998). The definition of harm reduction. *Drug and Alcohol Review*. 17. 213-220.
- Leonardi, P.M. (2014). Social Media, Knowledge Sharing, and Innovation: Toward of Theory of Communication Visibility. *Information Systems Research*. 25(4). 796-816.
- Livingston, J.D., Milne, T., Fang, M.L., Amari, E. (2012). The effectiveness of interventions for reducing stigma related to substance use disorders: A systematic review. *Addiction*. 106(5). 39-50. doi:10.1111/j.1360-0443.2011.03601.x
- Lorenz, N. (2014). The Power of PLUR: EDMC as a Reflection of a New Generation. [Unpublished thesis]. Retrieved from <https://digitalcommons.calpoly.edu/comssp/156>.
- Lowe, A., Norris, A. C., Farris, A. J., & Babbage, D. R. (2018). Quantifying Thematic Saturation in Qualitative Data Analysis. *Field Methods*, 30(3), 191–207. <https://doi-org.login.ezproxy.library.ualberta.ca/10.1177/1525822X17749386>

- Ma, R., Perera, S. (2016). Safer ‘chemsex’: GPs’ role in harm reduction for emerging forms of recreational drug use. *British Journal of General Practice*. 66(642). 4-5.
<https://doi.org/10.3399/bjgp16X683029>
- Marin, A.C., Kelly, B.C., Parsons, J.T. (2017). The Other Side of the Story: Knowledge Transfer and Advice-Giving in a Drug Subculture. *Deviant Behaviour*. 28(5). 514-532. 2017, VOL. 38, NO. 5, 514–532 <http://dx.doi.org/10.1080/01639625.2016.1197030>
- Marlatt, G.A. (1996). Harm Reduction: Come as You Are. *Addictive Behaviours*. 21(6). 779-788.
[https://doi.org/10.1016/0306-4603\(96\)00042-1](https://doi.org/10.1016/0306-4603(96)00042-1)
- Maxwell, J.A. (2012). Designing a Qualitative Study. In *Qualitative Research Design: An Interactive Approach*. 214-253.
- Maxwell, J.C. (2005). Party Drugs: Properties, Prevalence, Patterns, and Problems. *Substance Use & Misuse*. 40. 1203-1240. DOI: 10.1081/JA-200066736
- McIntosh, A. (January 27, 2020). All Albertans benefit from harm reduction. *Parkland Institute: Parkland Blog*.
https://www.parklandinstitute.ca/all_albertans_benefit_from_harm_reduction
- McLeod, K. (2001). Genres, subgenres, sub-subgenres and more: Musical and social differentiation within electronic/dance music communities. *Journal of Popular Music Studies*, 13(1), 59–75. <https://doi-org.login.ezproxy.library.ualberta.ca/10.1111/j.1533-1598.2001.tb00013.x>
- Mohr, R. (2018). Preventing Drug-Related Deaths at Music Festivals: Why the “Rave” Act Should Be Amended to Provide an Exception for Harm Reduction Services. *Chicago-Kent Law Review*. 93(3), 943–969.
- Montano, E. (2013). Ethnography from the inside: Industry-based research in the commercial Sydney EDM scene. *Dancecult: Journal of Electronic Dance Music and Culture*. 5(2). 113-130. DOI 10.12801/1947-5403.2013.05.02.06
- Murthy, D. (2008). Digital Ethnography: An Examination of the Use of New Technologies for Social Research. *Sociology*, 42(5), 837–855.
- Naderifar, M., Goli, H., Ghaljaie, F., (2017). Snowball Sampling: A Purposeful Method of Sampling in Qualitative Research. *Strides in Development of Medical Education*. 14(3). 1-6. doi: 10.5812/sdme.67670.
- O’Reilly, M., Parker, N. 2013. ‘Unsatisfactory Saturation’: A critical exploration of the notion of saturated sample sizes in qualitative research. *Qualitative Research*, 13(2), 190–197.
<https://doi-org.login.ezproxy.library.ualberta.ca/10.1177/1468794112446106>
- Orcutt, J.D. (1987). Differential Association and Marijuana Use: A Closer Look at Sutherland (With a Little Help from Becker). *Criminology*. 25(2). 341-358.
- Palamar, J. J., Griffin-Tomas, M., Ompad, D. C. (2015). Illicit drug use among rave attendees in a nationally representative sample of US high school seniors. *Drug and Alcohol Dependence*, 152, 24–31. <https://doi-org.login.ezproxy.library.ualberta.ca/10.1016/j.drugalcdep.2015.05.002>
- Panahi, S., Watson, J., Partridge, H. (2012). Social Media and Tacit Knowledge Sharing: Developing a Conceptual Model. *World Academy of Science, Engineering and Technology*. 64.1095-1102.
- Park, J. S., (2015). Searching for a cultural home: Asian American Youth in the EDM Festival Scene. *Dancecult: Journal of Electronic Dance Music and Culture*.. 7(1). 15-34.
<http://dx.doi.org/10.12801/1947-5403.2015.07.01.01>

- Pelletiere, N. (June 9, 2017). The Chainsmokers on topping Billboard Charts: 'It's amazing.' ABC News. <https://abcnews.go.com/Entertainment/chainsmokers-topping-billboard-charts-amazing/story?id=47935493>
- Perrone, D. (2006). New York City Club Kids: A Contextual Understanding of Club Drug Use. In B. Sanders *Drugs, Clubs and Young People*. (pp. 26-49). Abingdon: Taylor & Francis Group.
- Picard, A. [@picardonhealth]. (2019, August 27). *Bars are effective supervised consumption sites because they have a safe drug supply and allow alcohol users to consume in the presence of others. People tend to die of overdose when they use drugs alone. #harmreduction* [Tweet]. Twitter. <https://twitter.com/picardonhealth/status/1166356168668798977?lang=en>
- Prodaniuk, P. (2017). "A town that works hard, plays hard" -- Edmonton, Sketchiness and the Early Dance Music Scene/Interviewer John-Paul Wolf-Ferrari [Transcript]. E-town Rave History Project. <http://etownravehistoryproject.blogspot.com/2017/08/a-town-that-works-hard-plays-hard.html>
- Race, K. (2008). The use of pleasure in harm reduction: Perspectives from the history of sexuality. *International Journal of Drug Policy*, 19(5), 417–423. <https://doi-org.login.ezproxy.library.ualberta.ca/10.1016/j.drugpo.2007.08.008>
- Read, D.W., Behrens, C. (1989). Modeling Folk Knowledge as Expert Systems. *Anthropological Quarterly*. 62(3). 107-120. <https://www.jstor.org/stable/3317451>
- reduction: Sydney gay drug using networks. *International Journal of Drug Policy*, 12(4), 321–335. [https://doi-org.login.ezproxy.library.ualberta.ca/10.1016/S0955-3959\(01\)00096-2](https://doi-org.login.ezproxy.library.ualberta.ca/10.1016/S0955-3959(01)00096-2)
- Rekart, M.L. (2005). Sex-work harm reduction. *Lancet*. 366. 2123-2134. DOI:10.1016/S0140-6736(05)67732-X
- Rich, C. G. (2013). Elective Race: Recognizing Race Discrimination in the Era of Racial Self-Identification. *Georgetown Law Journal*, 102(5), 1501–1572.
- Roe, G. (2005). Harm reduction as paradigm: Is better than bad good enough? The origins of harm reduction. *Critical Public Health*, 15(3), 243–250. <https://doi-org.login.ezproxy.library.ualberta.ca/10.1080/09581590500372188>
- Rome, E. (2001). It's a rave new world: Rave culture and illicit drug use in the young. *Cleveland Clinic Journal of Medicine*. 68(6), 541–550.
- Roncero, C., Villegas, J.L., Martínez-Rebollar, M., Buti, M. (2018). The pharmacological interactions between direct-acting antivirals for the treatment of chronic hepatitis c and psychotropic drugs. *Expert Review of Clinical Pharmacology*. 11(10). 999-1030. <https://doi.org/10.1080/17512433.2018.1519392>
- Ruane, D. (2015). Harm Reduction or Psychedelic Support? Caring for Drug-Related Crises at Transformational Festivals. *Dancecult*, 7(1). 55-75. <http://dx.doi.org/10.12801/1947-5403.2015.07.01.03>
- Rukus, J., Stogner, J., Miller, M. (2017). LGBT Novel Drug Use as Contextualized Through Control, Strain, and Learning Theories. *Social Science Quarterly*. 98(5). 1711-1730. DOI: 10.1111/ssqu.12329
- Saleemi, S., Pennybaker, S. J., Wooldridge, M., & Johnson, M. W. (2017). Who is "Molly"? MDMA adulterants by product name and the impact of harm-reduction services at raves. *Journal of Psychopharmacology*, 31(8), 1056–1060. <https://doi-org.login.ezproxy.library.ualberta.ca/10.1177/0269881117715596>

- Saunders, B., Sim, J., Kingstone, T. *et al.* Saturation in qualitative research: exploring its conceptualization and operationalization. *Qual Quant* 52, 1893–1907 (2018). <https://doi.org/10.1007/s11135-017-0574-8>
- Scheub, H. (1996). *The tongue is fire: South Africa storytellers and apartheid*. Madison: University of Wisconsin Press.
- Seear, K., Lancaster, K., Ritter, A. (2017). A New Framework for Evaluating the Potential for Drug Law to Produce Stigma: Insights from an Australian Study. *Journal of Law, Medicine & Ethics*. 45. 596-606. DOI: 10.1177/1073110517750599
- Sheard, L. (2011). ‘Anything Could Have Happened’: Women, the Night-time Economy, Alcohol and Drink Spiking. *Sociology*. 45(4). 619-633. DOI: 10.1177/0038038511406596
- Shernoff, M. (2006). Condomless sex: Gay men, barebacking, and harm reduction. *Social Work*, 51(2), 106–114. <https://doi-org.login.ezproxy.library.ualberta.ca/10.1093/sw/51.2.106>
- Skolnick, J. (January 28, 2020). Why PLUR is important and what it looks like on the dance floor. *EDM IDENTITY*. <https://edmidentity.com/2020/01/28/why-plur-is-important-dancefloor/>
- Smith, T. (1997). Measuring Race by Observation and Self-Identification. *National Opinion Research Centre*. (University of Chicago)
- Solis-Toapata, E., Kirilenko, A., Gomez, C. (2020). Indoor Gardening with Hydroponics: A Reddit Community Analysis to Identify Knowledge Gaps. *HortTechnology*. 30(3). 346-355. <https://doi.org/10.21273/HORTTECH04574-20>
- Song, M., Parker, D. (1995). Commonality, difference, and the dynamics of disclosure in in-depth interviewing. *Sociology*. 29(2). 241-246. doi:10.1177/0038038595029002004
- Soussan, C., & Kjellgren, A. (2014). Harm reduction and knowledge exchange-a qualitative analysis of drug-related Internet discussion forums. *Harm Reduction Journal*, 11, 1–9. <https://doi-org.login.ezproxy.library.ualberta.ca/10.1186/1477-7517-11-25>
- Southgate, E., Hopwood, M. (2001). The role of folk pharmacology and lay experts in harm St John, G., (2006). Electronic dance music culture and religion: an overview. *Culture and Religion*, 7(1), 1–25. <https://doi.org/10.1080/01438300600625259>
- Steiner, B.D., Bowers, W.J., Sarat, A. (1999). Folk Knowledge as Legal Action: Death Penalty Judgements and the Tenet of Early Release in a Culture of Mistrust and Punitiveness. *Law & Society Review*. 22(2). 461-505. <https://www.jstor.org/stable/3115171>
- Sutherland, E. H., & Cressey, D. R. (1992). Principles of Criminology. *Principles of Criminology*.
- Tyndall, M. (2018). An emergency response to the opioid overdose crisis in Canada: A regulated opioid distribution program. *CMAJ : Canadian Medical Association Journal*. 190(2), E35–E36. <https://doi.org/10.1503/cmaj.171060>.
- Urbanik, M-M., Greene, C. (2020). Operational and contextual barriers to accessing supervised consumption services in two Canadian cities. *International Journal of Drug Policy*. 88. <https://doi.org/10.1016/j.drugpo.2020.102991>
- Urbanik, M-M., Greene, C., Wojnarowicz, J. (2020). ‘There’s a Certain Group of Cops that Have Their Own Vendetta’: Resident Perceptions of Notorious Police Officers and ‘Cop Clockin’ in the Inner-City, *The British Journal of Criminology*. <https://doi.org/10.1093/bjc/azaa082>
- Urbanik, M-M., Roks, R. 2020. GangstaLife: Fusing Urban Ethnography with Netnography in Gang Studies. *Qualitative Sociology*. (43). 213-233. DOI: 10.1007/s11133-020-09445-0.

- Urbanik, M.-M., & Haggerty, K. D. (2018). “#It’s dangerous: The online world of drug dealers, rappers and the street code.” *British Journal of Criminology*, 58(6).
- van Langen, P., (2019). Last Dance. *KABK Graphic Design Theses*. (The Hague, Netherlands). <https://kabk.github.io/go-theses-19-peter-vanlangen/#introduction>
- Venturelli, P.J. (2015). Drug Use as a Socially Constructed Problem. In *The Handbook of Drugs and Society*, H.H. Brownstein (Ed.). doi:10.1002/9781118726761.ch9
- Villalobos, L. (2015). *P.L.U.R.: An inside perspective into the American rave culture*. (Unpublished thesis). Texas State University, San Marcos, Texas. Retrieved on March 3, 2021 from <https://digital.library.txstate.edu/handle/10877/6075>.
- Wagner, A.M., (2014) Gettin' Weird Together: The Performance Of Identity And Community Through Cultural Artifacts Of Electronic Dance Music Culture. *Illinois State University Theses and Dissertations*. 131. <https://ir.library.illinoisstate.edu/etd/131>
- Weber, T. R. (1999). Raving in Toronto: Peace, Love, Unity and Respect in Transition. *Journal of Youth Studies*, 2(3), 317. <https://doi-org.login.ezproxy.library.ualberta.ca/10.1080/13676261.1999.10593045>
- Weir, E. (2000). Raves: a review of the culture, the drugs and the prevention of harm. *CMAJ*, 13, 1843-1848.
- Westbrook, C. (July 21, 2013). Avicii’s Wake Me Up soars to No 1 as fastest selling single of 2013. *Metro News UK*. <https://metro.co.uk/2013/07/21/aviciis-wake-me-up-soars-to-no-1-as-fastest-selling-single-of-2013-3892076/>
- Whiteman, E. (2007). “Just Chatting”: Research Ethics and Cyberspace. *International Journal of Qualitative Methods*. 6(2). 95-105.
- Wogen, J., Restrepo, M.T. (2020). Human Rights, Stigma, and Substance Use. *Health and Human Rights Journal*. 22(1). 51-60.
- Wolfson, L., Schmidt, R.A., Stinson, J., Poole, N. (2021). Examining barriers to harm reduction services for pregnant women and mothers who use substances using a stigma action framework. *Health Soc Care Community*. 2021(00). 1-13. <https://doi.org/10.1111/hsc.13335>
- Wu, E. M. (2010). Memory and Nostalgia in Youth Music Cultures: Finding the Vibe in the San Francisco Bay Area Rave Scene, 2002-2004. *Dancecult: Journal of Electronic Dance Music and Culture*. 1(2). 63-78. DOI 10.12801/1947-5403.2010.01.02.04
- Zarwell, M., Ransome, Y., Barak, N., Gruber, D., & Robinson, W. T. (2019). PrEP indicators, social capital and social group memberships among gay, bisexual and other men who have sex with men. *CULTURE HEALTH & SEXUALITY*, 21(12), 1349–1366. <https://doi-org.login.ezproxy.library.ualberta.ca/10.1080/13691058.2018.1563912>

Appendix I: Interview Consent Form

INFORMATION LETTER and CONSENT FORM

Navigating risk: How “ravers” engage in harm reduction when using illicit drugs

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Background

- You are being asked to participate in this study as you have been identified as an individual who consumes substances at raves and has consumed substances while attending at least 5 raves. Further, you have been identified as an individual who either does, or does not access or engage with harm reduction at the rave events.
- You have been selected as an English speaking individual between the ages of 18-26.
- Contact information was obtained through a mutual acquaintance providing you with my phone number/email.
- This research will be used in the completion of my master’s thesis and potential future publications.

Purpose

- This study seeks to understand the relationship between ravers who use drugs, and harm reduction as both a concept and an organized resource. This project will assess the perceptions and understandings of risk related to drug usage, the role of harm reduction, and the choices ravers make when engaging in these activities. This study will be able to inform harm reduction strategies and policies in order to promote the health and safety of substance consumers in the EDM community.

Study Procedures

- This study consists of one-on-one interviews with recruited participants. Interviews will take approximately 60-90 minutes. Participants will be asked if they would be willing to engage in follow up interviews if, after reviewing transcripts, the investigator requires clarification. These follow up interviews will likely take less than half an hour, if necessary.
- Data collection for this study will end by September 2020.
- Participants may be asked to look over sections of the project to verify data, or to approve statements made by the researcher.

Benefits

- It is unlikely that you will benefit directly from participation in this study.
- To compensate you for your participation in the interview, you will receive a \$10.00 Starbucks gift card.
- Through this research, the broader EDM community will likely experience benefit as the findings will be used to help shape and inform policies for harm reduction organizations, rave venues, and municipal policies.
- There are no costs to the participant for participating in the research.

Risk

- There are no physical risks involved in participating in this project.
- As a result of participating in the interviews, participants may be asked questions about sensitive issues which may include, but is not limited to: drug usage, drug possession, drug overdose, positive and negative experiences at raves and with drugs, opinions regarding harm reduction.
 - Participants may be at risk of emotional distress when prompted about/choosing to disclose a "bad trip" experience of drug use.
 - Participants may experience anxiety or paranoia at the thought of potentially disclosing information about illicit activity
 - Participants may feel emotional distress when recounting negative experiences broadly related to harm reduction and substance usage
 - Participants may feel concerned about the perceived stigmas that may be associated with acknowledging involvement in illicit activity
 - Participants may be uncomfortable in addressing negative experiences when talking about stigmatized experiences
- There may be additional risks for the participant that are currently unknown. If anything comes up that might affect your willingness to participate, you will be informed.

Voluntary Participation

- You are under no obligation to participate in this study, and your participation is completely voluntary. You are not obligated to answer specific questions while participating in the study.
- If you agree to participate, but you choose to withdraw your participation, you have 15 days within completing the interview to inform the researcher. If you choose to withdraw your participation within this time frame, your corresponding data (including recorded interviews and transcribed interviews) will be deleted and NOT used in the final study. There is no penalty for opting out and you can keep the gift card.
 - If follow up interviews, questions, or verifications are requested of you, you will have 15 days from that point to request all your data be removed from the study.

Confidentiality & Anonymity

- The data collected in this study will be used in my master's thesis. It may also be submitted to academic journals for publication and be presented at conferences.
- Data will be kept confidential and only the investigator will have access to the data.
- Raw data (including recordings) will be destroyed after 5 years in accordance with University policy.
- Participants will NOT be identified in the report and will all be assigned pseudonyms from the researcher. All specific identifying characteristics of participants will be removed (such as place of work, name, etc.)
 - Concert and festival titles WILL be included in the final report but WILL NOT be linked to any participant.
- All data will be stored on the researcher's personal, password protected laptop. Data will be encrypted.
- Confidentiality and anonymity measures have been put in place so that participants do not have to worry about disclosing information about activity such as possession and consumption of illicit drugs. The researcher is not obligated to disclose this to legal authorities, and will NOT disclose this information with identifying features to legal institutions or authorities.

- In cases that information about child abuse is disclosed in the course of the interview, the interviewer is legally obligated to disclose this information to authorities.
- If participants indicate they would like a copy of the final report, they will be emailed a copy by the researcher. Participants will be given the researcher's email if they have any questions about the project, or if they decide they would like a copy of the project at a later date.

Further Information

If you have any further questions regarding this study, please do not hesitate to contact Jillian Bevan at jbevan@ualberta.ca .

The plan for this study has been reviewed for its adherence to ethical guidelines by a Research Ethics Board at the University of Alberta. For questions regarding participant rights and ethical conduct of research, contact the Research Ethics Office at (780) 492-2615.

Consent Statement

I have read this form and the research study has been explained to me. I have been given the opportunity to ask questions and my questions have been answered. If I have additional questions, I have been told whom to contact. I agree to participate in the research study described above.

Appendix II: Interview Guide

Introduction: Thank you very much for meeting with me today! I appreciate you taking the time out of your day to chat and I'm really interested in hearing your thoughts on harm reduction and raves.

Section 1: Raves: This section is now getting into your raving experience.

1.1 – How long have you been going to raves? *What is your favorite type to attend?*

1.2 – Can you walk me through a typical night at a rave for you?

1.3– Why do you attend raves?

1.4 – Who do you attend raves with? Why?

- Did any of those individuals start going to raves before you began raving?

1.6 - How long have you been consuming drugs? What drugs usually?

- Have you ever overdosed? On what drug?

1.7– Do you consume substances when you are at raves?

- If Yes: Which ones? How do you consume them?
- Do you mix substances when you are at raves?
 - If Yes: Which ones?

1.8 – Do the people you rave with consume drugs at raves? Do they mix them?

- Have they ever overdosed? On what drug? What was that like?

1.9– How would you describe the culture of drug consumption at raves?

- Do other people seem responsible in their consumption? Irresponsible? Why? What does “responsible” mean?

1.10– *Have you ever had a positive experience? If so, why was it positive?*

1.11 – *Have you ever had a negative experience? If so, why was it negative?*

1.12– *How did you decide to start using drugs at raves?*

1.13– Do you have any concerns when using drugs at raves?

- If yes: Why do you feel this way? How do you overcome them?
- If no: Why not?
- Probe: do these harms/concerns differ when using at raves than elsewhere?

1.14– Do you see using drugs at a rave as having consequences? What are they?

- If Yes: How do you rationalize that choice?

Section 2: Harm Reduction: This section is now going to focus now on harm reduction at raves

2.1 – What does harm reduction mean to you?

2.2 – When using drugs at raves, do you have any strategies you use to make it the best OR SAFEST experience?

- Do you engage in any strategies to reduce risk when using drugs at raves?
- How do you reduce the risks associated with using drugs?
- Is this different from your friends? How?

2.3 – *How do you ensure your safety when using drugs at raves?*

2.4 – How often do you notice harm reduction organizations and resources (like Indigo) at a rave?

Probe: Which ones have you noticed? At which raves?

Probe: What do you think of them?

2.5 – Do you access these harm reduction organizations?

- If yes: Why? When do you know you need to? How do you decide?
- If no: Why not? How do you decide?
- Probe: What might encourage you to access one? How could it be made more appealing to you?

2.6.1 – Can you tell me about your experience accessing a harm reduction? OR,

2.6.2 – Can you tell me about an experience where you might have benefitted from harm reduction but did NOT access it?

- Why didn't you?

2.7 – Has anyone in your rave group accessed harm reduction?

2.8 – Do you know people who don't access harm reduction?

- Why do you think they don't?
- What do you think of them not accessing harm reduction?

2.9 – What do you think the role of harm reduction resources at raves are?

2.10 – What do you think about harm reduction resources?

- How did you come to this understanding?

2.11 – *What do you think about people who do/do not access harm reduction (depending on what they answered re: their own access patterns)*

- *Probe: Do you think some people are more likely than others to access harm reduction resources?*

2.12 – Overall, how would you describe your perception of harm reduction (both personal strategies and resources)?

Section 3: General Questions: This last section is now just some broad questions I have for you.

3.1 – Do you see a relationship between harm reduction and drug use? What?

3.2 – How did you come to this understanding?

3.3 – Is there any experience that was significant for you that made you either agree with or disagree with harm reduction?

3.4 – *What would make you want to access harm reduction? What do you think harm reduction resources could include in their services?*

3.5 – Is there anything else that you think I should know after going through this interview? Is there anything else you would like to tell me?

3.6 Fentanyl – is it a concern for you? Have you ever had fentanyl contaminated drugs? Do you think Fentanyl in Alberta creates unique risks? If so, what? Where did you learn about fentanyl?

Section 4 – Online Raves

4.1 – Are you aware of the online “raves” that are being streamed during this period of the pandemic?

If no: Why not?

4.2 – If yes, do you attend them?

4.3 – What do you think of them?

4.4 – Do you consume substances while watching the streams? Which ones?

- Are there risks associated with consuming these substances?
- How do you navigate these risks?

4.5 – Are you with other people while watching these streams?

4.6 – How do you think this move to online is changing the nature of drug usage in the EDM community?

4.7 – How do you think digital raves affect the EDM community in ways different from the other social media EDM communities on platforms like Twitter?

4.8 – Do you participate in the chat rooms? Is there anything that stands out to you about the chat rooms?

4.9 – Are there any ways that the streams or the chat rooms promote safety for the viewers who may be using drugs?

Section 5 - Participant Information: (If not already shared)

5.1– How old are you?

5.2– What race/ethnicity do you identify as?

5.3– What gender do you identify as?

5.4 – What sexuality do you identify with?

5.5 – What is the highest level of education you have obtained?

5.6– Are you currently employed? As what?

5.7 – What class do you identify with? (working class? Upper class? Etc.)

Thank you so much for participating in this project. I appreciate your time today and if you have any questions please don't hesitate to shoot me an email at jbevan@ualberta.ca. As the information sheet says, if you decide to withdraw your participation, please let me know within 15 days from today so that I can remove your interview from the data. Again, all your identifying characteristics will be removed and a pseudonym will be assigned to you in the final report. Only I will know your identity. If, as I am writing, I need to clarify something you have said, do I have your permission to contact you for a brief follow up interview? ___ And, if I require a participant to fact check or review a statement I have made, would I be able to consult you if require? ____

Thank you again! When the report is done, I will send you a copy if you wish to receive one!