



Drugs, alcohol and community tolerance: an urban ethnography from Colombia and Guatemala⁽¹⁾

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1. This paper draws on a chapter from Moser, C and C McIlwaine (2004), *Encounters with Violence in Latin America: Urban Poor Perceptions from Colombia and Guatemala*, Routledge, London.

2. For the UK, see Pearson, G and M Shiner (2002), "Rethinking the generation gap: attitudes to illicit drugs among young people and

SUMMARY: Drug and alcohol abuse is identified increasingly in Latin America as a significant source of insecurity. Yet, there has been little research on consumption and on the social norms surrounding it. This paper explores the nature of drugs and alcohol consumption among urban poor communities in Colombia and Guatemala, where use is widespread. It also looks at levels of community tolerance of drug and alcohol use, and in particular at the complex ways in which these attitudes relate to levels of violence and insecurity. The paper, drawing on the perceptions of the poor themselves, argues for the need to take the issue of community tolerance into account in designing responses which, in order to be effective, should also be linked with wider sustainable development goals.

I. INTRODUCTION

AS EVERYDAY VIOLENCE becomes ever more pervasive throughout urban Latin America, drug and alcohol abuse is identified increasingly as a significant source of insecurity. Yet, attention has focused primarily on the production or trans-shipment of drugs rather than the consumption of drugs and alcohol. In particular, there has been very little research on the nature of drug and alcohol consumption in urban communities with easy access to, and widespread use of, these substances. The primary objective of this paper, therefore, is to explore the nature of consumption among urban poor communities in Colombia and Guatemala. This also raises the important issue of community tolerance – in other words, attitudes of acceptance regarding drug and alcohol use that are part of the social norms of local communities – a consideration of which has been widely neglected in the Latin American context.⁽²⁾ The underlying assumption is that both drug and alcohol consumption are generally considered to be harmful. Yet, is this really the case? Some research has indicated a higher community tolerance for alcohol than for drugs,⁽³⁾ yet this has been largely unsubstantiated to date.

This paper explores the relationship between substance use and community tolerance, especially in terms of its linkages with violence and insecurity. It argues that, while levels of tolerance are partly an outcome of substance abuse, they can also contribute to it by normalizing use. As use becomes accepted, it can lead to greater insecurity and violence. However, this relationship is neither clear cut nor uni-linear. In many cases, high levels of violence and insecurity associated with either drugs or alcohol can lead

to a lowering of tolerance levels. The key issue here is the need to acknowledge community tolerance as an important dimension in understanding the nature of drug and alcohol consumption and its intersection with violence and insecurity. Finally, the paper considers the policy implications of a growing consumption of drugs and alcohol. To date, projects that aim to prevent or reduce substance abuse have tended to be confined to the health sector and to the addicts themselves. This paper suggests that policies related to substance abuse should reflect the views and tolerance levels of community members, and should respond within the larger social and developmental context of community violence, security and poverty. In this paper, these issues are addressed by drawing on a community ethnography highlighting the perceptions of the urban poor themselves. The research on which this is based consisted of participatory urban appraisal (PUA) conducted in 18 low-income urban neighbourhoods in Colombia and Guatemala.⁽⁴⁾

II. THE NATURE OF DRUG CONSUMPTION IN URBAN POOR COMMUNITIES

MOST RESEARCH ON drug consumption in Latin America focuses on estimating the proportion of users nationally.⁽⁵⁾ Formal consumption figures heavily underestimate levels of use when compared with estimates provided by the urban poor. In Colombia, nationally, consumption of marijuana was estimated to involve between 3.3 and 6.5 per cent of the population in 1993, with between 1 and 2 per cent using *basuco*,⁽⁶⁾ and between 0.7 and 2.9 per cent using cocaine.⁽⁷⁾ Yet, in the low-income urban communities where the PUAs were conducted, drug consumption was estimated to be far higher – 60 per cent in the community in Medellín (mainly of marijuana as well as cocaine and amphetamines), and 40 to 50 per cent in 14 de Febrero, one of the communities in Bogotá (primarily of marijuana and *basuco*). Consumption levels were estimated to be much lower in smaller cities and towns – in Girón, in Santander, for example, only 5 per cent were reported as users (mainly of marijuana and *basuco*), while in Yopal, in Casanare, only a “floating population” of 3 to 4 per cent were estimated to be users. Yet, overall, drug consumption levels were considered to be very high; so high, indeed, that a vocabulary had developed, differentiating between those who abstained from drugs (*sanos* – healthy, or *zanahórios* – carrots) and consumers (*colinos* or *sopladores*, as well as the more descriptive *marihuaneros*).

Although 17 different types of drugs were identified in the Colombian communities, marijuana was the most commonly used, followed by *basuco*, cocaine and *perico* (cocaine derivative), amphetamines and solvents such as glue (known by its trade name of Boxer), petrol and paint thinner (known as *tiner*).⁽⁸⁾ Consumption was reportedly highest among young people aged between 15 and 30, two-thirds of them young men. In 14 de Febrero, Bogotá, a focus group of seven community leaders estimated that 20 per cent of users were between 10 and 20 years of age, 50 per cent between 21 and 30, 20 per cent between 31 and 40, and only 10 per cent over 50. This is compatible with national figures for Colombia, which report male youth as the main users, with increasing numbers of female consumers, and a concentration of marijuana, *basuco* and solvent abuse among low-income populations.⁽⁹⁾

In the communities, different drugs were also associated with different

adults”, *Criminal Justice* Vol 2, No 1, pages 71–86.

3. Garrard-Burnett, V (2000), “Indians are drunks and drunks are Indians: alcohol and indigenismo in Guatemala, 1890–1940”, *Bulletin of Latin American Research* Vol 19, No 3, pages 341–356.

4. In Colombia, PUAs were carried out in three communities in Bogotá and one community in each of Cali, Medellín, Bucaramanga, Girón, Yopal and Aguazul. In Guatemala, research was undertaken in four communities in Guatemala City and one community in each of Huehuetenango, San Marcos, Esquipulas, Santa Cruz del Quiché and Santa Lucía Cotzumalguapa. The research was conducted by four teams in each country, together with the authors. The project was funded by the Swedish International Development Cooperation Agency (Sida) and the World Bank, and was directed by Caroline Moser. The authors are grateful to these organizations for funding, and to all the researchers and participants involved for all their efforts. See Moser, C and C McIlwaine (1999), “Participatory urban appraisal and its application for research on violence”, *Environment and Urbanization* Vol 11, No 2, October, pages 203–226; also see reference 1.

5. Pérez Gómez, A (1998), “Drug consumption in Latin America”, in Joyce, E and C Mahamud (editors), *Latin America and the Multinational Drug Trade*, Macmillan, Basingstoke, pages 45–59.

6. *Basuco* refers to cocaine paste (*pasta básica de cocaína* – PBC), which is the product of the first phase of production (usually conducted in the cultivation zone). The paste is smoked once, mixed with tobacco or marijuana. See ADE/GTZ

Aktionsprogramm Drogen und Entwicklung/
Deutsche Gesellschaft für Technische
Zusammenarbeit (2001),
*Drugs and Development in
Latin America*, ADE/GTZ,
Eschborn.

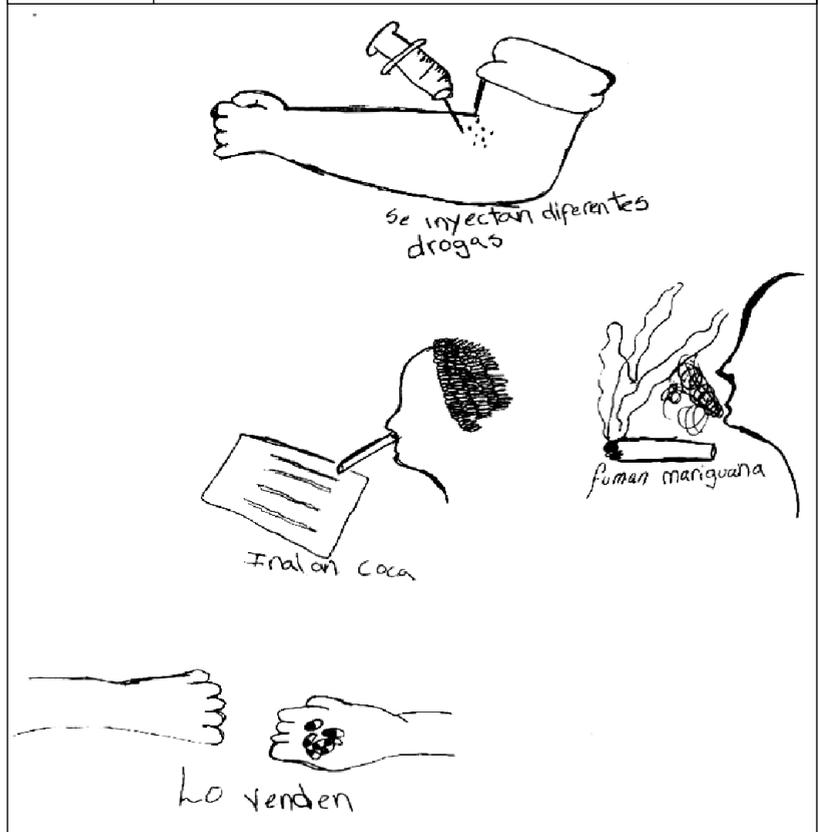
7. See reference 5, page 47.

8. This follows the pattern for Latin America as a whole, where 60 per cent of drug use (based on treatment demand) is cocaine. See UNOCD United Nations Office on Drugs and Crime (2004), *2004 World Drug Report*, UNOCD, Vienna, page 8.

9. See reference 6, ADE/GTZ (2001).

10. DEA Drug Enforcement Administration (2000), "Drug intelligence brief: Guatemala", available on www.usdoj.gov/dea/pubs, accessed 25/5/04. Central America's location between South and North America makes this region particularly prone to international drug-trafficking. See Aguilera, G and C Ogaldes (1996), "La narcoactividad como amenaza a la seguridad", in Aguilera, G (editor), *Buscando la Seguridad: Seguridad Ciudadana y Consolidación Democrática en Guatemala*, FLACSO, Guatemala City.

Figure 1: Young people's drawings of types of drugs available in Guatemala City



age groups. Some children reportedly began to use marijuana at the age of 8, moving on to petrol and glue by the age of 12. *Basuco* then became the preferred drug at the age of 14, with cocaine and *perico*, the most expensive, associated with adults. It was reportedly not uncommon for people to use large quantities of drugs; in Medellín, nine young men from the gang "Los Muchachos" estimated that they smoked ten joints of marijuana a day.

Drug consumption levels in Guatemala were reportedly much lower (perhaps not surprising in light of Colombia's pivotal role in the global drugs industry), but still represented an issue for the urban poor. While data on national levels of consumption are difficult to obtain, Guatemala is acknowledged as one of the most important trans-shipment countries in Latin America, and is experiencing growing levels of consumption.⁽¹⁰⁾ In all the communities, consumption was estimated at between 10 and 20 per cent, with higher levels in the capital compared with the smaller towns. The most commonly consumed drugs included glue, marijuana and, to a lesser extent, cocaine and crack cocaine. Paint thinner and white spirits were a common substitute for glue. As in Colombia, young males were the main consumers. In San Marcos, in the west of the country, young people suggested that around 15 per cent of the male youth took drugs. While some women were identified as users, they were "clandestine consumers", restricting consumption to the privacy of home. Hard drugs such as cocaine were more commonly consumed in the capital, and among the middle and

upper classes because of their expense. Despite lower levels of use overall, the young in particular were very knowledgeable about the different drugs available (Figure 1). As in Colombia, the drugs used varied over the life course: children reportedly began sniffing glue at 10, moved on to marijuana at 15, and turned to harder drugs as adults.

III. COMMUNITY TOLERANCE OF DRUGS

CLOSELY RELATED TO the nature of drug consumption in both countries was the varying level of tolerance among the urban poor (which was assessed in general terms in relation to the views expressed by community members, rather than through any measurable characteristics). Certainly, not everyone who consumed drugs was viewed as problematic and, increasingly, drugs were becoming an integral part of the construction of social relations, with both positive and negative ramifications. In Colombia, in large cities where estimates of consumption were high, attitudes towards use were generally more liberal than in smaller urban centres where estimates were low. In Medellín, drug consumption was so widespread that it had become socially acceptable, as reflected in the words of one young man who regarded drug use as a hobby and a way to "...relax, sleep, pass the time and keep your mind elsewhere." In contrast, in Girón, where estimates of consumption were low, drugs were blamed for many of the community's ills. In this community, intergenerational differences in attitudes emerged as particularly significant; elderly men commonly blamed young people for all community problems based on their perceived drug use and gang activity. They identified the worst offenders as the *muchachas vagas* (good-for-nothing young women) or *muchachas callejeras* (street girls), highlighting the greater stigmatization of young women as compared to young men. This stigma was noted by young people themselves – a group of young women aged between 14 and 17 said that, because they dressed in a sporty style, they were tarred with the same brush as the *muchachas vagas* who, according to an elderly woman, "...smoked marijuana, took drugs, had occasional boyfriends and spent all day in the streets." There were only a small number of true *muchachas vagas* in the community, and most young women felt like scapegoats.

Despite variations between communities, tolerance levels were generally high throughout Colombia. Related to this was the fact that drugs were considerably cheaper than alcohol. One joint of marijuana was cheaper than a bottle of beer – the former cost between 300 and 500 pesos (US\$ 0.19–0.30), compared to 800 pesos (US\$ 0.50) for the latter. A gramme of *basuco* was only slightly more expensive than a bottle of beer, and even a bottle of brandy (US\$ 5.60) cost more than a gramme of the most expensive hard drugs, cocaine and *perico* (US\$ 5 for good quality).

Partly linked to the low cost of drugs was the openness with which some people viewed consumption as a normal part of their lives. In Medellín, for instance, several focus groups included expenditure on drugs when working out their weekly spending patterns. As shown in Table 1, estimates of monthly spending by a group of adults revealed that expenditure on drugs exceeded expenditure on education, and that drugs and alcohol combined were the second largest item after food.

In many communities, however, attitudes could be ambiguous. In 14 de Febrero, Bogotá, where consumption levels were high, tolerance was certainly lower than in Medellín; one 13-year-old young woman there noted

Table 1: Aggregate household expenditure from a mixed group of adults aged 17–40, in Medellín, Colombia			
Expenditure item	Cost per month (pesos)	Cost per month (US\$)	Percentage of total
Food	200,000	124.7	30.7
Services	100,000	62.3	15.3
Rent and credit	85,000	53.0	13.0
Transport	60,000	37.4	9.2
Education	50,000	31.2	7.7
<i>Bazuco</i>	40,000	24.9	6.1
Parties	40,000	24.9	6.1
Alcohol	30,000	18.7	4.6
<i>Cocaine/perico</i>	20,000	12.5	3.1
Gambling	12,000	7.5	1.8
Marijuana	8,000	5.0	1.2
<i>Pepas*</i>	6,000	3.7	0.9
Total	651,000	405.9	100.0

*Pepas** = amphetamines

SOURCE: Adapted from Moser, C and C McIlwaine (2004), *Encounters with Violence in Latin America: Urban Poor Perceptions from Colombia and Guatemala*, Routledge, London, Appendix 10.

11. The nature of drug-trafficking and local distribution is beyond the scope of this paper. Suffice to say that complex, hierarchical systems of distribution had developed within communities, which depended on the use of force for their survival and success. See McIlwaine, C and C Moser (2001), "Violence and social capital in urban poor communities: perspectives from Colombia and Guatemala", *Journal of International Development* Vol 13, No 7, pages 965–984; also see reference 1.

12. There are 100 centavos in a quetzal.

that there were both "good" and "bad" drug addicts – the so-called "good" drug addicts were polite with people, didn't steal and sold things very cheaply, while the "bad" drug addicts mugged people by day and night to feed their habit. Further contributing to the inconsistency in attitudes was the difficulty in identifying drug consumers. In 14 de Febrero, a group of seven community leaders said that, of an estimated total of 500 users, only 50 were "open" and the rest were "closed" – usually adults who consumed drugs in their home. The open users were often drug distributors, known as *mulas* (mules), and were dependent on the closed users for demand.⁽¹¹⁾

People were usually less tolerant of drugs in Guatemala than in Colombia – a function of lower consumption levels and the less sophisticated nature of the drug industry. Drugs consistently were considered a more serious threat in Guatemala City, where consumption was higher, than in the smaller urban centres, and tolerance levels were less varied than in Colombia. However, tolerance was increasing as consumption increased, a trend fuelled partly by the fact that, as in Colombia, many drugs were cheaper than alcohol. In Santa Cruz del Quiché, three young people reported that a joint of marijuana cost 30 centavos (US\$ 0.04) and a tube of glue only 25 centavos (US\$ 0.35), compared with 10 quetzales (US\$ 1.40) for a litre of beer.⁽¹²⁾ Crack and cocaine were much more expensive at 300 quetzales (US\$ 42.90) for a stone of crack and 100 quetzales (US\$ 14.30) for an ounce of cocaine. Hard drugs were much cheaper in the capital, bringing

them more in line with alcohol; in La Merced, for instance, crack cost 15 quetzales (US\$ 2.10) per stone, while cocaine cost 25 quetzales (US\$ 3.60) per ounce.

In both countries, the length of time that consumption had been recognized as an issue influenced levels of tolerance. Colombia has a longer history of drug use but, in both cases, it has been relatively recent. This has been associated with a surplus production of coca paste and cocaine in the region. Difficulties selling the final product on the international market, due to tighter controls on distribution channels, have meant that domestic markets are increasingly exploited.⁽¹³⁾ In Colombia, most communities reported that consumption began in the 1980s and increased in the 1990s, when it became more publicly visible. Tolerance was linked with positive perceptions of the drug-trafficking cartels which, in Cali and Medellín, helped out local communities and provided work through the construction industry. In Medellín, for instance, Pablo Escobar had donated money to build the local basketball court; his capture was viewed with regret by many. As one man noted: *"When the drug traffickers left, the situation became very difficult; everyone was left worse off."* Similarly, in Cali, a marked decrease in the economic fortunes of the study community reportedly occurred with the capture of "Los Rodriguez" of the Cali cartel.⁽¹⁴⁾

In Guatemala, the rise in consumption has been more recent, and attitudes towards drug traffickers much less positive. Many people said consumption had been problematic since the early 1990s, with a marked increase in 1996 when the peace accords were signed. In the eyes of a group of adults from Santa Cruz del Quiché, the peace accords had coincided with the opening of borders and drug traffickers coming from the United States to sell cocaine to local gangs. In Santa Lucía Cotzumalguapa, in the south of the country, a group of six men reported that the *narcos* had emerged as a new phenomenon in 1999, when traffickers paid local farmers to use their sugarcane fields as landing strips for illegal air shipments.

IV. THE NATURE OF ALCOHOL CONSUMPTION IN URBAN POOR COMMUNITIES

ALCOHOL CONSUMPTION WAS not considered by research participants to be as problematic as drug use, especially in Colombia, despite extremely widespread use. Nationally, in Colombia, between 75.6 per cent and 90.6 per cent of the population were estimated to consume alcohol, with the urban poor identifying a similar proportion.⁽¹⁵⁾ Yet, rarely in Colombia was alcohol abuse identified as a problem.⁽¹⁶⁾

Although national data for Guatemala are not available, the PUAs indicated that alcohol consumption was viewed as considerably more problematic than in Colombia. For as long as people could remember, alcohol abuse had been widespread in Guatemala. All the communities in the PUA had at least one Alcoholics Anonymous, and alcohol abusers were called a range of names such as *bolos*, *charamileros* and *chibolas*. The majority of the male population were reported to be alcoholics. In Santa Lucía Cotzumalguapa, three young women noted that 90 per cent of men drank heavily, while in La Merced, Guatemala City, a woman whose husband had been killed in a traffic accident while drunk put the figure at 75 per cent. Although alcohol abuse was predominantly a male activity, some women drank heavily at home rather than in the male-dominated *cantinas* (bars) and *bordelos*. While alcohol abuse was associated with older groups, all age

13. See reference 6, ADE/GTZ (2001).

14. On the complex and reciprocal relationship between drug barons and communities in Brazil, see Leeds, E (1996), "Cocaine and parallel politics in the Brazilian urban periphery: constraints on local-level democratization", *Latin American Research Review* Vol 31, No 3, pages 47-84.

15. See reference 5.

16. People rarely identified alcohol abuse as an issue in Colombia. Therefore, most of the data in this section refer to Guatemala.

17. See reference 1.

18. Harvey, P (1994), "Gender, community and confrontation: power relations and drunkenness in Ocongate (Southern Peru)", in McDonald, M (editor), *Gender, Drink and Drugs*, Berg, Oxford.

19. Madrigal, E (1998), "Latin America", in Grant, M (editor), *Alcohol and Emerging Markets: Patterns, Problems and Responses*, Brunner/Mazel, Philadelphia.

20. See reference 18; also, on Chiapas, see Eber, C (1995), *Women and Alcohol in a Highland Maya Town*, University of Texas Press, Austin.

groups drank, with many young men starting at 12, 13 or 14 years of age.

The types of alcohol consumed distinguished social drinkers from abusers. Beer was the most common choice among the former, and the latter tended to drink *guaro* (rum) or chemicals such as white spirit. In particular, illegal or clandestine alcohol, made from fermented fruit and known variously as *kuto*, *kuxa* and *kusha*, was associated with abusers and was very cheap. In Esquipulas, a bottle of *kuto* cost 2 quetzales (US\$ 0.30), whereas a litre of beer cost 10 quetzales (US\$ 1.40) and a quarter bottle of rum cost 3.75 quetzales (US\$ 0.50). Alcohol abuse was identified as more common among those of Mayan origin. This was related to the use of alcohol in traditional ceremonies, as well as to the widespread experience of discrimination, trauma as a result of the armed conflict, and levels of poverty.⁽¹⁷⁾

V. COMMUNITY TOLERANCE OF ALCOHOL CONSUMPTION

THE ACCEPTANCE OF alcohol consumption in Colombia reflects a common pattern throughout Latin America, where it has become a way of life and has gained a level of social acceptability.⁽¹⁸⁾ Unlike drug abuse, which is often viewed as a threat to social and political order, heavy drinking is seen as a normal activity.⁽¹⁹⁾ Only when alcohol use threatens to undermine the functioning of society, particularly through violence, is it perceived as a concern.

In Guatemala, although it was acknowledged that social drinking could be harmless, consumption levels had become so high and so problematic that it was seen to challenge, rather than support, social cohesion, and had become largely unacceptable.⁽²⁰⁾ Alcohol abuse was consistently cited as a major problem affecting communities. As one woman from Esquipulas noted: "It's the *bolos* that are the problem around here; they create nothing but havoc. In the mornings, you find them lying in the streets after the night before." *Cantinas*, a permanent fixture in all communities along with Alcoholics Anonymous, were negatively viewed. Two shoemakers from San Marcos noted that the only institutional presence in the community was: Alcoholics Anonymous, three brothels and bars, five churches, three schools and one hospital. The low level of tolerance of alcohol abuse in Guatemala was linked, overall, with its close relationship to the perpetration of violence.

VI. THE RELATIONSHIP BETWEEN DRUGS AND ALCOHOL CONSUMPTION, VIOLENCE AND INSECURITY

PEOPLE IN LOCAL communities consistently associated drug addiction and excessive use of alcohol with a host of different types of violence and widespread insecurity. While most research to date has focused on the health effects for individual users, this discussion highlights the much wider social implications of drug and alcohol abuse, focusing on the specific and often unacknowledged ways in which the lives of the urban poor are affected. It also restates the significance of community tolerance: when consumption of drugs and alcohol is linked to violence, communities often react more negatively.

In Colombia, drugs-related violence was considered to be the most important type of violence in local communities (together with robbery).

This was more marked in communities where tolerance levels were lower, such as in Bogotá and Girón. Drugs-related violence was so ubiquitous that people were able to identify 24 different types of violence related to drugs. The most commonly cited was robbery to feed addicts' habits; in Girón, a 13-year-old girl noted: *"The people who take marijuana rob; they rob from houses."* Drugs were also linked to gender-based intimate partner violence and sexual violence.⁽²¹⁾ Young women frequently blamed drug addicts for rapes in their barrio; in most cases, they knew the victims. Drugs were also closely associated with death and murder. Some people killed to obtain drugs, murdered when under the influence of drugs, or were killed by the physiological or psychological effects of consumption. Community members in Embudo, Bogotá, an area notoriously associated with the drug culture and industry, identified two *basureros de muertos* (rubbish dumps for the disposal of dead bodies). In this community in particular, death was accepted as an inevitable daily occurrence.

Drugs-related violence was not given the same priority in Guatemala, reflecting lower levels of consumption. Yet, it was still rated as the fourth most important type of violence affecting communities (after fights, robbery and gangs). While the types of drugs-related violence were less diverse (10 compared to 24), they were no less serious. Tolerance levels were generally low, given the widespread nature of drugs- and alcohol-related violence, primarily associated with robbery and assaults, as well as gender-based violence within and outside the home, especially rape. In the words of one mother from Guatemala City, *"...drug addicts kill, rape and steal."*⁽²²⁾ Drugs were also held responsible for fights among rival gangs over drug-dealing territory that often resulted in the deaths of gang or *mara* members.

The violence associated with alcohol abuse was perceived as less significant, especially in Colombia. However, the actual incidence of alcohol-fuelled violence was invariably underestimated, especially in relation to gender-based violence, which tended to go unreported. In Guatemala, people identified 16 alcohol-related problems that included sexual violence in the streets, intimate partner violence in the home, and violence against children, usually by fathers, but also by step-fathers. Alcohol-related street fights were also common, often involving guns and machetes and invariably occurring close to the local *cantinas*.

a. Drugs and alcohol consumption and the generation of fear

Different types of violence were linked with different types of abuse in various ways, depending on the context as well as the identity and agency of the people involved. Together with other types of threats and uncertainties, this produced a situation of deep insecurity and fear in urban poor communities. Only recently has it been recognized how closely drug and alcohol abuse are intertwined with social and economic disintegration, as well as with the physical and mental health of users.⁽²³⁾

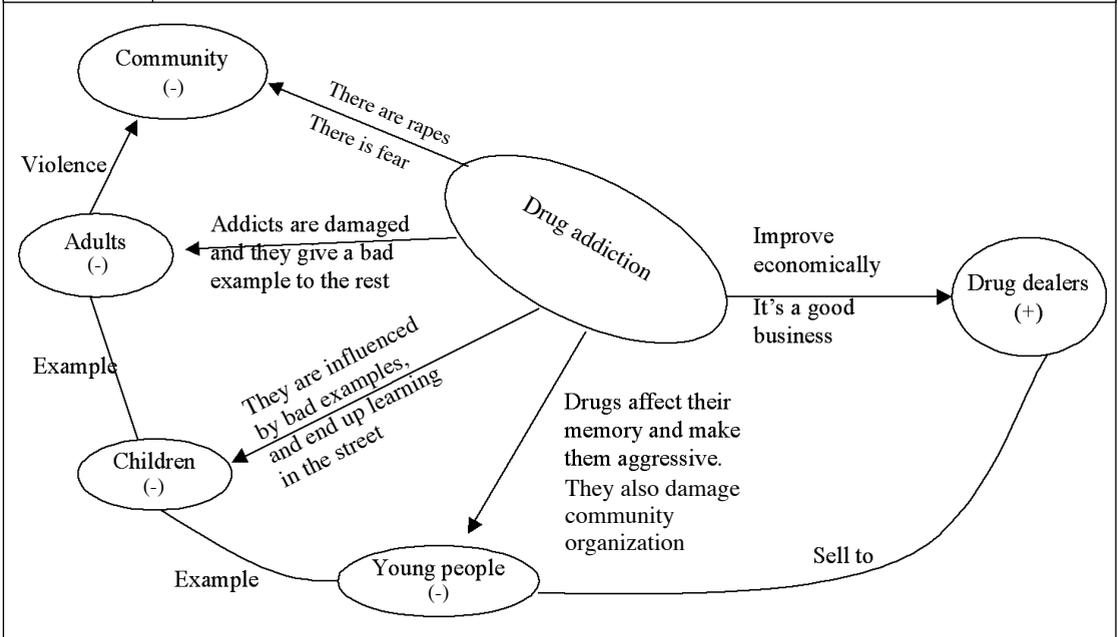
Drug addicts were particularly feared because they were seen as the perpetrators of robbery, assaults and rapes, and also because drugs were illegal. The erratic behaviour of those under the influence of drugs was especially worrying. As one woman from Guatemala City stated: *"When they're drugged, they will do anything; they are violent and dangerous."* All members of the community were affected (Figure 2). Drunken men in Guatemala were feared by women and children, both within their homes and in public spaces. In Esquipulas, alcohol-fuelled street-fighting involved

21. Moser, C and A Moser (2003), "Gender-based violence: a serious development constraint", Background paper for the Gender Unit, mimeo, World Bank, Washington DC.

22. Rape was especially widespread in Guatemala and had much more deep-seated roots than drug and alcohol abuse, particularly in terms of the use of rape as a military tool during the armed conflict. See reference 1 for further details.

23. See reference 5.

Figure 2: Flow diagram of the effects of drug addiction in La Merced, Guatemala City, drawn by two adult women

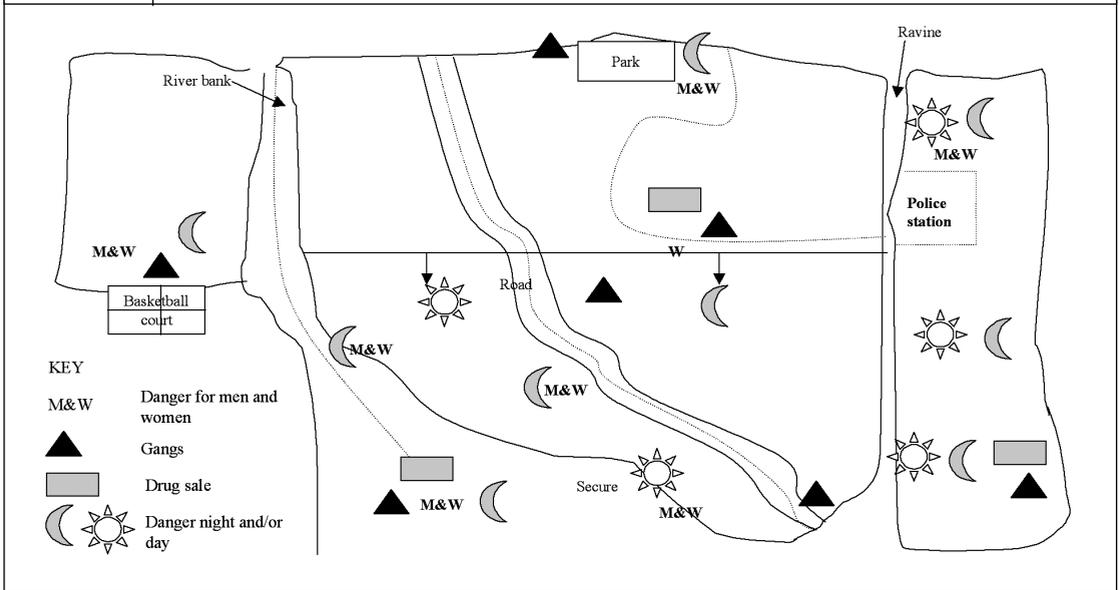


drunken men running around shooting indiscriminately. The *maras* (gangs) were associated with heavy alcohol consumption as well as drugs. In La Merced, Guatemala City, a group of young male gang members reported that, in addition to taking marijuana and cocaine when they could, they consumed large quantities of beer and rum.

There were important temporal dimensions to the fear and insecurity generated by substance abuse, with particular times especially associated with alcohol consumption. In both countries, peak times were festivals and holidays, such as Christmas, Easter, Mother's Day and the Day of Friendship, when large quantities of alcohol were consumed. On another scale, four women from Guatemala City linked the days of the week when men were paid, and thus more likely to drink, with the days when most violence occurred. While Sundays were the main drinking days, on Mondays local *cantinas* prepared a stew of bull meat or shellfish to act as a hangover cure; often, men went to the *cantina* for the stew, or *caldo*, and then ended up drinking heavily again. People were often less careful with their pay when inebriated, which also increased the number of robberies and assaults.

Substance abuse also had spatial effects, severely constraining people's mobility. As one adult woman from Girón, Colombia, pointed out: "People can't go out in the evening ... one can't send a girl or even a boy out alone because they'll get caught up with them [drug addicts]." Fear commonly revolved around areas where drugs were sold or consumed. A map drawn by two young men and two young women in Cali highlighted as most dangerous, by both day and night and especially for women, those areas where gangs congregated, such as basketball courts, and where drugs were sold. (The police station was perceived as dangerous all the time, for everyone) (Figure 3). In Guatemala, riverbanks, cemeteries and bridges were most commonly identified, again because this was where drug addicts congregated. In San Marcos, for instance, the local cemetery was avoided in the evenings

Figure 3: Map of dangerous places in El Arca, Cali, Colombia, drawn by two young men and two young women



because of its association with drug addicts and gangs. These spatial concentrations reflect an important contradiction regarding the provision of open spaces for leisure use. Many young people argued that the lack of organized sports or youth clubs generated the discontent that led them to take drugs in the first place. Yet, the fact that public open spaces were common places for drug consumption made them unsafe for the community as a whole.

Drug and alcohol abuse among the urban poor is undeniably related to violence and insecurity as well as to the construction of fear. This is damaging for social cohesion, or what has come to be known as social capital, within communities which, in turn, has severe implications for wider development goals.⁽²⁴⁾ This also relates to community tolerance of drugs and alcohol consumption: the higher the level of acceptance, the less substance use generates fear and undermines local social fabric. If interventions are to be designed to address this widespread, contradictory and often deeply damaging phenomenon, it is important to consider the underlying causes of such abuse.

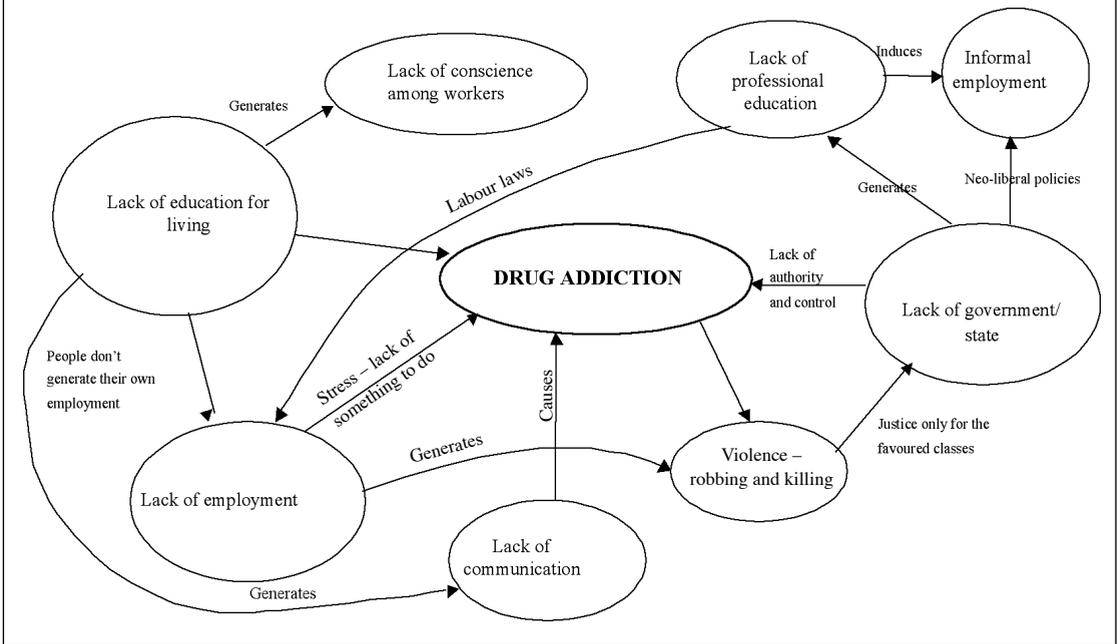
VII. THE CAUSES OF DRUGS AND ALCOHOL CONSUMPTION, AND ASSOCIATED VIOLENCE

THE EFFECTS OF drugs and alcohol consumption on individuals and communities are not simple, and neither is the identification of factors that promote it. Problems associated with consumption are linked to a complex set of issues relating to human agency, including values, attitudes, life experience and social identity.⁽²⁵⁾ Just as the effects of abuse undermine urban security, so too the causes relate to violence and social disintegration in multiple ways. This highlights the importance of broadening the understanding of substance abuse beyond its effects on individuals to include

24. See reference 1; also reference 11, McIlwaine and Moser (2001).

25. See reference 19.

Figure 4: Causal flow diagram of drug addiction, 14 de Febrero, Bogotá, Colombia, drawn by three founders of the community



wider socioeconomic issues.

One of the most commonly cited causes of both drug and alcohol abuse was intra-family violence and conflict, particularly among young people and men, as well as gender-based violence. As a group of “community mothers” (childcare workers) from Girón, Colombia, pointed out, drug addiction was caused by, among other things, a lack of love and dialogue within the family and a lack of comprehension by parents of their children. The women also noted that, while young men were likely to turn to drugs when family life became unbearable, young women tended to get involved in early sexual relationships, often becoming pregnant or turning to prostitution. Similarly, in Guatemala City, a woman identified “...the bad example of the parents getting drunk and hitting them [children] on a daily basis” as a major reason for young people turning to drugs. In Huehuetenango, a group of teachers who showed very little tolerance of drug consumption (as with most teachers) also reported that family problems were the primary cause of drug addiction in their school, together with the influence of television and, according to one, “...a loss of moral values in society.” Some people linked the alcohol abuse of fathers to the drug abuse of sons. Difficult conjugal relations were also cited as significant; a group of five women and one man from Guatemala City, asserted that: “...marriage without love, or premature marriage” could precipitate alcohol abuse.

Peer pressure was seen as another important cause of substance abuse, especially for young people. In Jericó, Bogotá, a group of four 11-year-old girls said that they had been pressured by friends and drug pushers into smoking cigarettes and then into taking drugs (starting with glue). They reported that drug dealers hung around school gates waiting for the chance to sell drugs to schoolchildren; they offered the first consignment for free, charging thereafter. While pressure was said to come from friends, more

surprisingly, parents were blamed by some for introducing their children to drugs and alcohol. While this was reported only in Colombia, the normality of alcohol abuse was extremely important in Guatemala. Alcohol was a major leisure pursuit among male friends, revolving around *cantinas* and brothels. When men lacked the money to go drinking with friends, they would borrow until pay day. In Esquipulas, two carpenters discussed their informal networks of debt relief, with many regularly spending 100 per cent of their weekly earnings on alcohol. This reflects patterns throughout Latin America, where there is widespread social pressure to drink.⁽²⁶⁾

Structural factors, including poverty and unemployment, were also considered important, and were also cited as underlying factors in intra-family conflicts and gender-based violence.⁽²⁷⁾ In Santa Cruz del Quiché, Guatemala, three young men reported that poverty, disillusionment and the inability to find jobs were the key causes of alcoholism. Figure 4, from 14 de Febrero, Bogotá, highlights a range of structural factors underlying drug addiction: lack of employment, education and authority on the part of the state all contributed to widespread addiction, since drugs passed the time and softened the edge of people's despair.

VIII. INTERVENTIONS TO REDUCE AND PREVENT SUBSTANCE ABUSE

THE CONTRIBUTION OF substance abuse to daily violence, insecurity and fear in cities and towns of Colombia and Guatemala makes it imperative to consider interventions. The fact that drugs can hinder peacemaking initiatives, as in Colombia,⁽²⁸⁾ and undermine postwar reconstruction efforts, as in Guatemala, add to the urgency. The increasing acceptance of drug and alcohol consumption also requires immediate attention. Drugs- and alcohol-related violence is also closely associated with poverty and social disintegration, highlighting the links with broader development issues.

In the past, interventions to address substance abuse have primarily been projects run by specialized agencies, targeted at individual abusers and their physiological and mental health. Recently, the need to move beyond a purely health-oriented perspective and to acknowledge the socioeconomic context has been recognized.⁽²⁹⁾ While several exciting initiatives have adopted a more holistic approach, with a focus on youth, such as the PAISAJOVEN in Medellín, Colombia, and the Drug Abuse Prevention in Manzanilla II, in Lima, Peru,⁽³⁰⁾ there is still a tendency to rely on experts to design projects, rather than those affected by the abuse. In addition, projects still tend to ignore the cultural and socioeconomic context of drug and alcohol abuse, especially in relation to levels of social tolerance and associated acceptance.

Interestingly, in all communities, the need to adopt integrated approaches to substance abuse emerged as especially significant. Rarely did people consider it appropriate to rely solely on one type of intervention. Figure 5 highlights a range of different approaches to addressing drug addiction in Embudo, Bogotá, as suggested by two community leaders, including rehabilitation efforts and educational initiatives for all those affected, focusing on the needs of addicts themselves.

People generally discussed two types of intervention: first, developing social cohesion or social capital, and second, educating or training people, or building their human capital. In terms of the first type, people repeatedly mentioned the need to develop better communication within the

26. See reference 19.

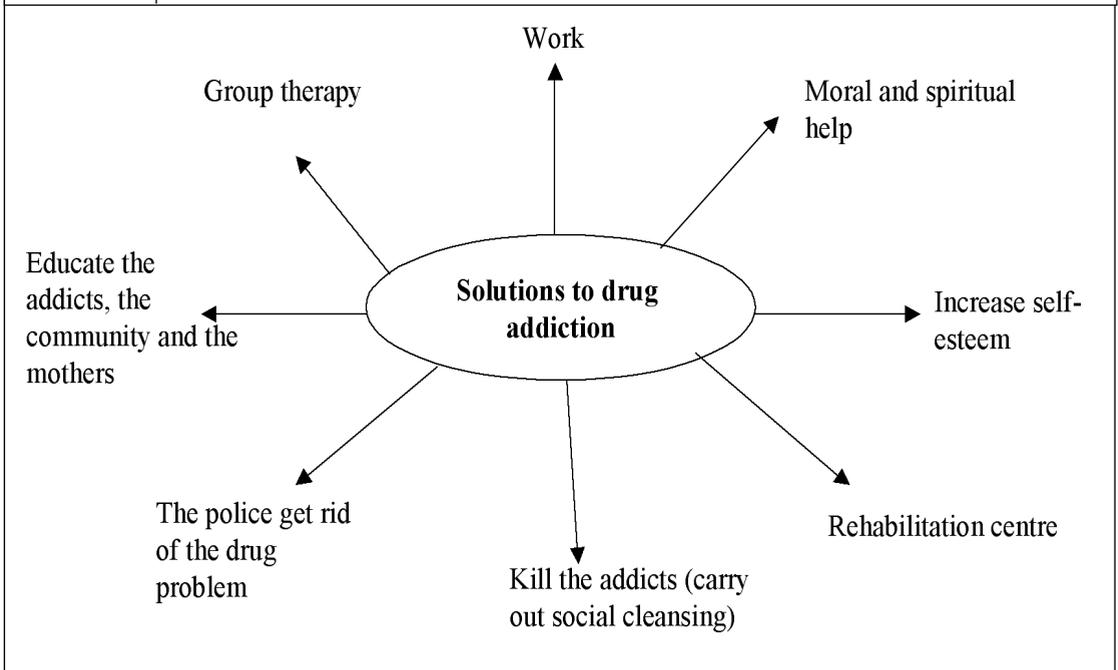
27. See reference 1.

28. Thoumi, F E (2002), "Illegal drugs in Colombia: from illegal economic boom to social crisis", *Annals of the American Academy of Political and Social Science* Vol 582, pages 102–116; also Villamizar, R (2003), "The good, the bad, the ugly and the Colombian peace plan", *Crime, Law and Social Change* Vol 40, No 1, pages 25–32.

29. See reference 8, UNOCD (2004).

30. See reference 6, ADE/GTZ (2001).

Figure 5: Interventions to address drug addiction in Embudo, Bogotá, Colombia, drawn by two community leaders



community, especially within families. In Bogotá, an adult woman suggested that “schools for parents” should be created to foster better relations with their children and to make them aware of the dangers of drug abuse. In Guatemala City, a group of young men suggested training programmes in carpentry, metal-working and car mechanics to prevent drug abuse. Young people, especially in Colombia, were extremely keen to see more drug rehabilitation programmes, extending the remit of existing projects to include young people in general.

Suggested solutions to alcohol abuse followed similar patterns, although there was an emphasis on Alcoholics Anonymous in Guatemala. People believed that it was successful, but should be combined with more educational programmes. Many focused on the need to close down the *cantinas*. Another popular suggestion was for alcoholics to be encouraged to join the Evangelical Church, which had a heavy grassroots presence in all communities; many alcoholics had been “saved” by their ban on alcohol consumption.

While the majority of interventions suggested focused on bottom-up, holistic and integrated programmes, a minority stressed repressive measures. Some of these focused on the need for greater police presence and intervention, especially to address the drugs problem (see Figure 5). Others felt that the state, the police and the army were ineffective and corrupt, and that people had to take the law into their own hands (the “*ley de defensa*” as one man from Bucaramanga, Colombia, put it). The most pervasive form of this extra-judicial justice was social cleansing (killing those deemed “undesirable”), especially targeting drug addicts but also focusing on problematic alcoholics. In Bogotá, a group of teachers discussed the social-cleansing groups that came to the *barrio* when the drug problem got really bad; they

killed the main dealers and addicts, and problems subsided for two to three years. Many spoke in favour of this type of initiative which, in Guatemala, commonly took the form of lynching (usually dousing the accused with petrol). It is essential that programmes raise awareness that this kind of vigilantism is not appropriate either to deliver justice or to prevent abuse. Communities need to recognize that, in fact, vigilantism further contributes to escalating violence, insecurity and fear in cities.

IX. CONCLUSIONS

THE UBIQUITOUS NATURE of drug and alcohol consumption in Colombia and Guatemala reflects a pattern prevalent throughout Latin America, and use among the urban poor tends to be considerably higher than data at the national level suggest. A context-specific approach and an understanding of community tolerance of substance abuse are essential in order to understand local-level consumption. While the acceptance of drug consumption has grown over time, especially in Colombia, the fact that alcohol abuse has been considered normal for many years makes it a more insidious problem. Only when substance abuse threatens the social order, usually because of the links between violence and crime, is tolerance undermined. Indeed, this relationship is crucial in urban poor communities, and was widely substantiated in the research. The violence associated with substance abuse was shown to contribute strongly to urban insecurity, as well as to erosion of social capital in local communities. It is significant that the urban poor related the root causes and implications not only to individual factors, but also to wider socioeconomic issues such as poverty. Thus, the paper argues for the need to develop holistic responses that link projects to wider sustainable development goals, and the importance of taking into account the issue of community tolerance.