Are you sick, poor or just having fun?

A study of drug discourses in the world’s largest cocaine producing country, Colombia

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Abstract

In this study we explore the present discourses on drugs and drug consumption in Colombia, a country known for its drugs, and foremost its cocaine production. Interviewing and analyzing the statements according to discourse theory made by the professional key actors in the country, the study asserts that three discourses are present in the Colombian context, namely the public health discourse, the deprivation discourse and the pleasure discourse. These discourses, it is demonstrated, view the consumer of psychoactive substances from different perspectives and relate consumption to different causes, consequences and solutions. While the public health discourse is closely connected to viewing the consumer as a sick person, and describes consumption mainly as addiction, the deprivation discourse rather speaks of the consumer as a marginalised person consuming to escape a harsh reality. According to the third perspective, the pleasure discourse, it is focal that the consumption is related to socialising and recreation. In the course of the exploration of this context and its discourses, attention is paid to the fact that the discourses are many times described as being in opposition to one another although the respondents commonly refer to different social classes while describing the consumer and that each discourse this way is related to certain groups in society. This study presents different Colombian perspectives on drug consumption, a so far scarcely researched area in the otherwise so scrutinized drug issue, viewed from a social work perspective.

Keywords: Colombia, consumption, drugs, psychoactive substances, professionals, discourse theory
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Acknowledgments

When we first decided to apply for a Minor Field Study grant to carry out our study in Colombia most people we spoke to at home in Sweden told us to be careful, warned us of violence or generally showed their concern. This didn’t stop us from leaving but of course coloured our first impressions of Bogotá and Colombia. Very fast we learnt that these concerns and warnings did not reflect the reality we would meet. Instead we found a genuinely helpful, caring and open people that welcomed us to their lives, made our stay an indeed pleasant one and foremost made our study possible. We do not have much to offer in return except our study and friendship so we wish to thank them from deep within for making this possible. We have also learnt from this to be as helpful as we now have experienced to all new people we meet.

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Introduction

As other questions subject to public enforcement the politics of drugs is a subject of much debate that has taken different directions. This is a relatively new discussion but since the middle of the twentieth century the main understanding in the western world has been that drugs coming from mainly poppy, coca and hemp were to be criminalized. Drugs produced synthetically have gradually been added to the list. National law enforcement differs but the UN conventions on Narcotic Drugs\(^1\) and Psychotropic Substances\(^2\) enforce countries that have signed the treaties and contribute to the means of a collective and stringent global drugs policy.

Colombia has a strategic geographical position as all transport land-wise toward the United States, which is the world’s largest cocaine market,\(^3\) or northward somehow has to pass through the country. Because of a high rate of violence (due to several explanations where illicit drug trade was one of them) the American prohibition campaign ‘war on drugs’ and its Colombian equivalent ‘Plan Colombia’ was implemented in Colombia in 1999.\(^4\) Today statistics are presented by the Colombian government to demonstrate that the ‘war on drugs’ has been successful, e.g. that violence has dropped, that the number of coca plantations has been reduced and that the country generally is safer.\(^5\)

At the same time a commission called “Latin American Commission on Drugs and Democracy” consisting of a number of Latin American co-presidents and intellectuals have submitted a statement concerning drug policy in the whole Latin American region. The statement “Drugs and Democracy: Towards a Paradigm Shift”\(^6\) means that the ‘war on drugs’ has not yielded the desired results but, instead, enlarged the drug problem. It further argues for an in-depth paradigm shift in the strategy to deal with the drug problem in Latin America where the main issue is that drug users should be treated as a matter of public health instead of being treated as criminals.

Drugs as a phenomenon is something that affects a lot of people in Colombia. People come in touch with drugs in cultivation, processing, selling, consuming and the economy of drugs has an impact on society.\(^7\) These aspects have also been of interest in various studies already carried out, though studies of drug consumption in Colombia have not been addressed in the sense of how drugs and drug consumption is regarded and constructed as a problem. For those people in Colombia that are not affected directly in their lives by drugs, the subject is albeit something that is present in everyday life,

\(^1\) United Nations (1961), *Single Convention on Narcotic Drugs*
\(^2\) United Nations (1971), *Convention on Psychotropic Substances*
\(^6\) Casas-Zamora, Kevin (2009), *Drugs and Democracy: Toward a Paradigm Shift*, Washington: Brookings Institution
especially as it today has grown to be a common theme in popular culture. Along with the fact that domestic drug abuse is increasing, it is of great interest to study the question of discourses on drug consumption in Colombia. For us, coming from Sweden, this is also interesting in a comparative perspective (though this is nothing we attempt to carry out) as the law enforcement today is similar in Colombia and Sweden. Colombia’s recent tightening of the law criminalizing all use of drugs, has also taken some inspiration from the Swedish model. In addition to this there is a contemporary Swedish debate about drugs that many different medias have engaged in which enhances the immediate interest of the subject.

**Purpose of study and research questions**

Our aim is to describe and analyze Colombian discourses on drug consumption as articulated by key actors working on different levels in society with the issue. By key actors we mean professionals who in their work in different ways come in contact with the consumption of drugs, e.g. social workers, NGO representatives, police, scholars, public authority representatives and private treatment actors. We are interested in how drugs and drug consumption is described and considered, and more specifically which assumptions are taken for granted and which are not being recognized. Our questions at issue are:

- What are drugs and why do people consume them?
- Who are the consumers and what identities are available?
- What is drug consumption and what consequences surrounds it?
- How should drug consumption be acted upon? Whose responsibility is it?

**Limitations**

When we first set out to do this study we were interested in the Colombian discourses on consumption of drugs. However, during our journey it became clear to us that this might be too big a study to carry out. After discussing the matter with persons who are very familiar with the Colombian discourses we came to the conclusion that our study will be limited to the discourses present in the capital, Bogotá. An employee at the UNODC expressed the discourses to be “from different planets” as Bogotá is a big city with better resources and different social structures, which makes it special in the Colombian context. As we consider these persons to be experts on this issue we will follow their advice and limit the study to Bogotá. However, we became interested in what could be considered as being so completely different and we wanted to hear this for ourselves. We therefore interviewed four persons (one psychologist, one politician, one NGO worker and a person from a treatment centre) involved in an international treatment network called Treatnet that work outside Bogotá. We asked them the same questions as we had asked our other respondents and looking at the answers we actually couldn’t see the great difference that had been described to us. Perhaps the drug discourses aren’t as different

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8 See e.g. Fajardo, Santiago Rueda (2009) *Una línea de polvo. Arte y drogas en Colombia*, Bogotá: Alcaldía Mayor and the TV-series "Sin tetas no hay paraíso" made by Caracol Televisión
as described, or perhaps these persons where representing something unique within the Colombian discourse outside of Bogotá. We have not included these persons in our study as they were not intended to be included from the beginning, but they do in our opinion give us the impression that the results in this study could be generalized outside the Bogotá context. Hence, all our interviews were carried out with professionals working in Bogotá but we choose to consider this a study of a Colombian context. The reason to why we have chosen to interview people in Bogotá is because this is mainly the city in Colombia where ideas are formulated by powerful people and politicians, and hence being the ones that can reach outside the country.

Our Swedish background

It is important to remember the context we ourselves come from because it probably has had an influence on us both throughout the whole study. Since we belong to a different context it could be harder for us to recognize things that are not apparent and we could also risk emphasizing structures that we recognize. On the other hand this could also have had a positive effect as we this way could acknowledge ideas that we otherwise be taken for granted. This is something that we throughout the work have tried to take in to consideration. However we find it important to describe Swedish drug policy shortly so as to make it clear what our pre-comprehension consists of.

The prevalence of drug use is in international comparison small in Sweden. This fact is surrounded by the circumstances of the legal status of zero tolerance where all drugs are treated as equally dangerous. An early and strong civil movement toward alcohol has influenced the condemnation of other types of illegal drugs. The resistance rests in large extent on moral assumptions where the user is treated as a criminal. Drugs are further seen as a threat towards the population whereby the idea of a drug free society is prevalent. Drug addicts are many times regarded as victims of an external threat and youths and women are seen as especially important to protect.

Disposition

We would like to resemble this study to the metaphor of an hourglass lying down horizontally. Because we start off by giving a broad introduction to our subject, this is of great importance also because of our choice of theory (discourse analysis) where the subject is not to be seen as isolated but instead as a part of a larger context. In the middle it narrows down when we describe our findings in the fieldwork we have carried out. After that we broaden the perspectives again and discuss our conclusions in a wider perspective.

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Context

Outsiders often fill connotations to Colombia with drugs, especially cocaine, and violence. Though this of course is not the whole truth we will use these themes to structure this part that aims to put our area of interest in a greater context. The choice of using the term context is based on our theoretical approach social constructionism. In accordance with social constructionism the circumstances around an area of study are important to be able to say something about the more specific which makes the term “context” more fitting in this thesis.

Drugs
Leaves from the coca bush have been cultivated and chewed in the whole Andean region since 2100 B.C. When the colonists came they realized the importance it had for the indigenous peoples so they commercialized the coca leaf, which was sacrilegious to indigenous tradition. With the coca they could force their already exploited indigenous workforce to work harder and longer since the coca has effects that both ward off hunger and fatigue. They also paid the salaries in coca. This practice led to malnutrition among the indigenous, but instead of looking at this as an effect of the exploitation or the lack of means to buy food, the colonists described it as the danger of the coca leaf that was causing drug addiction and was thus restricted and criminalized in the middle of the twentieth century.\(^\text{14}\) In Colombia the indigenous peoples were significantly reduced, much more so than in e.g. Bolivia or Peru, and today they only amount to one percent of the whole population.\(^\text{15}\) Therefore the traditional use of coca leaves is relatively small in Colombia even though around 8 million people chew coca regularly today in the Andean region.\(^\text{16}\)

Not until European chemists invented cocaine from the coca leaves around 140 years ago did western people start using coca. The majority of this consumption did not matter to courts or politicians, instead alcohol was regarded to be the most worrisome mind-altering substance at that time.\(^\text{17}\) However, gradually cocaine was restricted as the law enforcement grew, but at the same time demand for drugs in the U.S and Europe increased during the twentieth century giving Colombia an incentive to start growing and producing marihuana, cocaine and heroin.\(^\text{18}\) In the end of the 70’s Colombia was the greatest exporter of marihuana to the U.S. When their demand switched to cocaine in the 80’s this production began augmenting fast.\(^\text{19}\) On these premises Colombia has today grown to be the worlds largest cocaine producing country and this illegal industry is now present in nineteen of the twenty-two states.\(^\text{20}\) In the 90’s the drug trade and the armed conflict between guerrillas, paramilitaries and military converged. Both the guerrillas and the paramilitaries make use of the drug production and trade to finance their activities.\(^\text{21}\)

\(^{15}\) Utrikespolitiska Institutet (2009), p. 4f
\(^{16}\) Feiling (2009), p. 14
\(^{17}\) Ibid., p. 12, 18-19
\(^{18}\) Buxton, Julia (2006), The political economics of narcotics: Production, consumption and global markets, Black Point: Fernwood Publishing Ltd
\(^{19}\) Utrikespolitiska Institutet (2009), p. 13
\(^{21}\) Utrikespolitiska Institutet (2009), p. 13
'Plan Colombia'

Since the drug cultivation and production has increased several problems connected to social, political and environmental issues has risen in the country. This has lead to much action being taken during the years by the Colombian government to prevent and counter this illegal industry, much of which has been economically and politically supported by the U.S. In 1999 Colombian president Andres Pastrana presented ‘Plan Colombia’, “a modern Marshall Plan to bring peace to Colombia […] worth $7.5 billion”. Economic development, manual coca eradication and improvement of the human rights were the three articulated goals of the plan when presented to the U.S. for economic assistance. However, “the U.S. put punitive drug policy as the centrepiece of the plan along with heavy military and police aid components for rural drug interdiction and massive aerial eradication campaigns” and Colombia accepted the offer and funding of $860 million. The funding was conditioned and over half was directed towards the counter narcotic military assistance and only about one percent was left for distribution to human rights projects and for support of the peace process. During the ‘war on drugs’ fumigation has always been a central weapon for the US and this also became a central element in the U.S. funded ‘Plan Colombia’. The use of aerial fumigation reduced the coca cultivation levels during the five first years of ‘Plan Colombia’, but it has been much criticised for its claimed environmental effects leading to displacement and health problems among the farmers.

If ‘Plan Colombia’ has been a success or not is impossible to answer, it all depends on what perspective you are looking from. The action taken has given some results in diminishing both the coca cultivation and the guerrilla, but the critics are saying that the results are not in comparison with the resources being put into the plan and that the coca cultivation is still at a very high level. The plan has also been much criticized by human rights organisations for training and equipping the Colombian military accused of committing large-scale human rights violations.

Colombian drug policy and consumption

In the 50’s, but foremost in the 70’s, greater law enforcement was made in response to the international restrictions. Until today the Colombian states stance towards how to handle consumption has oscillated between penalization and treatment. This is closely related to statistics presented on the domestic consumption. In the 80’s Colombia experienced the first signs of incipient abuse of drugs, which had earlier mostly been consumed in a more traditional way. This was also when the abuse began including chemical or pharmaceutical substances. Because of an increasing abuse of a lot of legal drugs such as the ones mentioned, and also alcohol and nicotine, the state decided to

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22 For more information about this, see Earlier research
24 Guáqueta (2005), p. 48
26 Guáqueta (2005), p. 48
31 Ibid., p. 43
legalize the consumption of a personal dose of psychoactive substances in 1994. Though things have recently changed and the new law, Acto Legislativo 285 de 2009 Cámara, which was passed at the end of 2009, forbids all possession and consumption of drugs in Colombia.

Before passing the law the government in Colombia did a survey to examine the drug use in the country and found that about 2.7% of the population had been using drugs during the last year. It is mainly men and young people that consume drugs, and the persons described as addicts are mostly found in the lower strata’s. The most commonly used drug in the country is marihuana and the following is cocaine, and they are both perceived as relatively easy to access. Although heroin is far from the most used drug in Colombia, an increase in consumption has been noticed. The daily newspaper El Tiempo reports that this increase is related to the fact that more and more heroin is staying in the country because of the difficulties in smuggling it across the border. Hence, the law was passed after recognising that the consumption had increased and the government themselves describe this as a public health problem. The law is therefore expressed as an act towards better health for the population and is focusing on rehabilitation through pedagogical, prophylactic or therapeutic measures for the drug user. The focal point of the law is not incarceration but rather treatment of the addict that is considered a sick person.

The new law concerns the illegal substances but considering the large amount of drugs being produced in the country the consumption is relatively low. The annual prevalence of cocaine consumption is among the lower of the ones estimated in the world, even Sweden which geographically is very far away from the production of drugs estimates rates of consumption of different substances to be similar or in some cases even higher than in Colombia. Instead alcohol is the substance of choice in Colombia as ninety percent of the population have tried it.

To talk about drug consumption in Colombia is quite a new aspect of the drug issue as focus has been on the production and trafficking. This is still the centre of attention in Colombia but things have started to change, and the fact that consumption of drugs is present in the country is becoming more and more of an issue.

Violence
Trying to understand the conflict in Colombia is not easy. Reading or talking to people, everyone has their own view on what is happening. A professor in peace and conflict studies we talked to at a university in Bogotá told us that not even the Colombians

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32 The personal dose was equal to 20 grams marihuana, 5 grams hasch, 1 gram cocaine and 2 grams of methaqualone. See Salazar (2001), p. 50
33 The population of Colombia is divided into strata’s (estratos) 1-6 depending on income, where strata 1 has the lowest income and strata 6 has the highest.
34 Ministereo de Interior y de Justicia (2009) Proyecto de legislativo – por el cual se reformael artículo 49 de la Constitución Política. Colombia: Ministero de Interior y de Justicia
35 Angarita, Paulina (2010, march, 27) Casos de sobredosis de heroína prenden alerta en Colombia. El Tiempo
36 Ministereo de Interior y de Justicia (2009)
37 The annual prevalence estimated in Colombia is 0.8, while in Sweden it is estimated to 0.5-0.6 compared to the U.S. where the rate is 2.8 or Argentina where it is 2.6. See United Nations Office on Drugs and Crime (2009)
38 Salazar (2001), p. 44
understand the conflict. It is difficult to say exactly what has been crucial but this resume will not go very far back in history.

The beginning of the twentieth century was relatively peaceful in Colombia. A two party system divided by the Conservative and Liberal Parties dominated politics and has done so through modern history. However, the social tensions in society were strong, especially in the rural parts, and when the popular leftist liberal politician Jorge Eliécer Gaitán was murdered in 1948 peoples temper rose. The murder is many times seen as the igniting spark to the ten year long civil war between conservatives and liberals known as “La Violencia” (meaning The Violence) when 300 000 people were killed. Different self-defence and guerrilla groups were organized such as Fuerzas Armadas Revolucionarias de Colombia – Ejército del Pueblo (FARC, meaning Revolutionary Armed Forces of Colombia – People's Army) and Ejército de Liberación Nacional (ELN, meaning National Liberation Army). Paramilitary groups are said to have risen as a resistance movement toward the above mentioned and other leftist groups, though their ties to the Colombian government and military, and also foreign countries governments, have been made obvious time after time. Since 1997 many of them are united in the umbrella organization Autodefensas Unidas de Colombia (AUC, meaning United Self-Defense Forces of Colombia). From the government these armed groups are counteracted by the military.

Killings are common in Colombia, the annual number reach about 25 000 which makes Colombia one of the worlds most violent countries. The direct tie to guerrillas or paramilitaries is only obvious in one of six cases whereby the “ordinary” criminality too is ample.

An international context
There are relatively many recently published books that, from different perspectives, deal with the Colombian conflict and also put it in a bigger context. They are most times critical to how simplistically the problem is described, as if there was a production of illegal drugs conducted by ‘bad’ people and a struggle to combat them by ‘good’ people. Instead they go farther back and, in a postcolonial way, describe the macro politics of what shape many countries were left in by the colonists and how this has become decisive for many of these countries future. What earlier was colonialism is described as a prevailed system by what the international community (mainly the western countries) exclude a lot of countries, though by other means more sophisticated than earlier. Drug trade is described to be driven by poverty, the poverty that has followed of the exclusion from international means of cooperation and control systems. Further, many of them mean that the ‘war on drugs’ was originally a ‘war on communism’, that subsequently changed face to be the ‘war on drugs’ and finally today is named a ‘war on terrorism’. The ways these ‘wars’ are and have been conducted in are put to scrutiny, and even if this feels like an eye-opener it is important to be aware that the authors of these books have a certain anti-imperialist perspective.

40 Ibid., p. 9-10
42 Ibid.
Earlier research

To find earlier research in our area of study we have searched databases\(^4^4\) with the words below in different combinations. Our findings are separated in three parts and start off with the more general toward the more specific. The terms used for searching were: drug*, narcotic*, addiction, drug usage, substance use, consumption, discourse, staff, treatment, problem, definition, policy, system, harm reduction, prohibition, Plan Colombia, Colombia, war on drugs. For our study peer-reviewed articles mainly have been selected since they are considered keeping high quality. We have also chosen articles produced not more than ten years ago to guarantee currency. An examination of the academic research about drugs proves it to be extensive and approached from many different perspectives and angles. Our ambition has been to find research about drugs and more specifically about drug discourses in Colombia. This kind of material has been scarce whereby we have augmented our search grounds to include other contexts to get some kind of guidance in how to carry out a similar study.

Drugs and policy

As drug consumption is considered a problem in almost all societies one of the directions research takes is when focus is laid on policy and legislation. In this field there are two main perspectives, prohibition and harm reduction, and many different countries systems are put to scrutiny from these perspectives.\(^4^5\) Comparative studies are also made between countries, societies, systems, patterns of consumption, ways of treatment and so on and have the ability to deepen the understanding of possibilities and consequences. Unfortunately though these kinds of studies are difficult to carry out because of problems with data scarcity, poor data quality, difference between the definition of terms etc.\(^4^6\) Therefore the United Nations Office on Drugs and Crime (UNODC) annual drug report is not either able to present more than estimations with a lot of gaps and variability in quality.\(^4^7\) The data presented on production in the same report is more reliable due to the progress of UNODC’s Illicit Crop Monitoring Programme (ICMP) where support to and development of monitoring systems in these countries has been made.\(^4^8\) The World Health Organisation (WHO) publish the quarterly journal “WHO Drug Information” that provides an overview of the latest international news and trends of safety, efficacy and quality of medicines, medical products, herbals and biomedicines to regulatory agencies, academic and training institutions, researchers, consumer bodies and pharmaceutical manufacturers. In addition to that a few hundreds of journals taking on the subject of drugs exist worldwide and yet journals of other main subjects that also raise questions about drugs.

\(^4^4\) CSA, NCJRS, EBSCO and Libris
\(^4^6\) For a more in-depth discussion see e.g. MacCoun, Robert; Reuter, Peter (2002), “The Varieties of Drug Control at the Dawn of the Twenty-First Century” in *The Annals of The American Academy of Political and Social Science*, No 582
\(^4^7\) UNODC (2009), p. 293
\(^4^8\) Ibid.
Moreover the subject of drugs is studied from perspectives such as drugs and the acts of crime that can surround it, how to prevent drug use, ways of treatment, reasons of drug addiction, the relation between drugs and social vulnerability, the violent consequences of big illicit drug markets and many more. Since this discussion about how to legislate drugs began about a century ago prohibition has been the dominating way of approaching the subject. In research though, scepticism towards this can be traced many years back. This can be seen as something that has preceded a contemporary discussion at the political level that questions prohibition and argues for other perspectives. A vast political statement can be seen in the statement “Drugs and Democracy: Towards a Paradigm Shift” mentioned earlier. Research that in different ways supports this view is extensive as some examples given above show.

Drugs and Colombia

Most of the research done about drugs in Colombia is about the production, growing of drugs and the drug trafficking. We consider this as a consequence of the fact that this has been the absolute focus in the Colombian drug politics during the past thirty years and that Colombia is the largest producer of cocaine in the world. Plenty of aspects have been in the focal point of this research and we will present two main areas that we see as dominating in this field.

One area of research is that of the relation between Colombia and the US concerning drugs and what is called the ‘war on drugs’ (in the U.S.) or ‘Plan Colombia’ (in Colombia). The ‘war on drugs’ is an American two-way plan of minimizing their own drug problems. From an international perspective the desire is to reduce the flow of narcotics into the country and from a national perspective focus is on lowering the U.S. citizens demand for drugs. It is the international focus that largely affects Colombia and the relation between the countries. Within this research different approaches can be found as to how one can describe the relation between the two countries. Some are arguing that the relationship is strongly asymmetric and based on that the U.S. are and have been imposing prohibitions on Colombia while others argue that this is not quite the whole truth and that Colombia to some extent have been asking the U.S. for aid in the

51 O’Farrell, Timothy J.; Murphy, Marie; Alter, Jane; Fals-Stewart, William (2010) “Behavioral family counseling for substance abuse: A treatment development pilot study” in Addictive Behaviors, Vol. 35(1)
52 Wu, Nancy S.; Schairer, Laura C.; Dellor, Elinam; Grella, Christine (2010) “Childhood trauma and health outcomes in adults with comorbid substance abuse and mental health disorders” in Addictive Behaviors, Vol. 35(1)
53 Thompson, Sanna J.; Barczyk, Amanda N.; Gomez, Rebecca, Dreyer, Lauren, Popham, Amelia (2010) “Homeless, Street-Involved Emerging Adults: Attitudes Toward Substance Use” in Journal of Adolescent Research, Vol. 25(2)
55 See the part "Introduction"
struggle against the illegal drug-industry. Whatever the objective is concerning the relation between the two countries most research agrees that the U.S. foreign policy and ‘war on drugs’ has had a great impact on Colombian politics. Research about ‘Plan Colombia’ is also an area within this field and most of the articles written are very critical of it for failing in trying to diminish the drug-trafficking and notes that it rather can be seen as a counterterrorism strategy dealing with terrorist groups such as FARC.

As a part of the ‘war on drugs’ and ‘Plan Colombia’ different methods for the reduction of the illegal crop-plantations have been developed. There are two main methods used for minimizing the illegal farming, namely aerial fumigation and Alternative Development (AD). Aerial fumigation is a chemical eradication of the plants sprayed from an aeroplane and AD includes the manual destruction of illegal crops while giving an economic alternative for the farmers. These methods are far from uncontroversial and this has been noticed in the academic area of research. The success of aerial fumigation of the illegal crops (the main method for illegal plant-reduction) and AD are discussed in several articles. The outcomes of the methods and the perspectives behind the usage of the reduction methods have been examined and many times criticised. Although aerial fumigation claims to have lead to a short-term success in destroying coca-plantations the method is considered as problematic in most research because of its long-term effects on the environment, the society and the human health. Also the claimed success of the aerial fumigation is questioned.

Colombia is the sole country in the world that produces a significant amount of the three main plant-based illegal drugs (hemp, coca and poppy) and this industry has had dramatic effects on politics, economy and social life in the country. The effect that the illegal drug industry has had on the Colombian society is the second area that has been in the focal point of the research. There is research that examines the general impact that the drug industry and drug policy has had on the Colombian society. Other parts of research have focused on the affects that the drug industry has had on the political life of Colombia, e.g. the influence of the drug cartels on the political life and the link between drugs and terror that have affected the political life through kidnappings and murders of important politicians and judges. Some of the research has focused on the economic

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58 Guaqueta (2005)  
61 Vargas (2005) and Sherret (2005)  
62 Vargas (2005)  
64 Thoumi (2002)  
65 Rubio (2005)  
66 García (2005)
effects of this illegal industry, saying that the short-term effects of it were positive but that it quite soon began to show extremely negative aspects. The decline of trust for the government and the accelerating violence lead to capital flight and speculative investments, that among other things led to a stagnation and slowdown of the Colombian economy. In order to understand why the drug industry has had such an impact on Colombia and how the country could work against it we can also find research about the causes for the Colombian drug problem.

Although there is not nearly as much research done about drug consumption as the drug industry the research that is done mainly focuses on estimating the proportion of user levels. The numbers concerning the amount of people that use and abuse drugs vary in different studies that can be considered as an effect of the difficulties with defining drug abuse and the different methods used in the research. Different kinds of consumption are also being investigated such as the consumption among the young, the consumption of the drugs that are injected, and an inventory of consumption based on the treatment institutions which showed that most of the persons treated are men that have problems with marihuana or basuco (a cheaper cocaine-based drug). There is also some research concerning the social norms and community tolerance surrounding drug consumption that links the attitudes and community tolerance to the amount of drugs consumed in the particular surrounding.

Drugs and discourses

Although there is some research done regarding the social norms surrounding drug consumption, no research has been done in Colombia from the discourse analytical perspective we intend to use in this study. However there are studies done with discourse analytical approaches on drug consumption but they are made in other national contexts. This research varies a lot in methods, studied material, perspectives and contexts but shows the possibility to look at the subject from a discourse analytical point

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67 Humberto Ortiz (2009)  
68 Thoumi (2005)  
70 Rueda-Jaimies et al (2008)  
71 Mejia & Gómez (2005)  
72 Pérez Gómez, Augusto; Patiño, Camila; Trujillo, Angela María; Patiño, María Inés; García, Francisco; Neira, Camilo (2001) “Indirect indicators in the use of drugs: An alternative to the domiciliary survey” in Adicciones. Vol. 13(2)  
of view. Lilja partly studies drug discourses among NGO’s by analyzing interviews she has made with representatives from the organizations. This is very similar to the study we intend to do.

**Drugs and this study**

By the research done in our field of interest we have become aware of the fact that drugs is a relevant issue of vital importance in Colombia. Drugs influence daily life for a big part of the Colombian society since it affects the economy, the politics and the social life. Also, many Colombians are directly affected through their work in the fields with the growing of illegal plants or the refinement processes. Drugs are present in the Colombian context, but the discourse seems to focus on the production rather than the consumption. We therefore ask ourselves how professionals working on different levels in society consider the issue of drug consumption. This is a question and perspective that we lack in the earlier research done in the academic area and that we find interesting, and this is what we intend to answer with this present study.
Theoretical Framework

Our study is based on the social constructionist theory and has a discourse theoretical approach. The social constructionist theory corresponds with our personal ontological and epistemological views on how we consider the world and the way to gather knowledge about it. Since we are also interested in describing and analyzing the drug discourse in Colombia the discourse theoretical approach is relevant. Discourse theory is based on the same assumptions as social constructionism, which is why we find it to be the most relevant theory/method. We have used the discourse theory according to Laclau and Mouffe mainly as described by Winther Jörgensen and Phillips because we find it to be an explicit method with concrete tools for analyzing discourses. In this part we will therefore give an introduction to social constructionism and discourse theory.

Social constructionism

Social constructionism is closely connected to the post-modern way of seeing the world and our knowledge as something bound to context and language. The post-modern theories reject the assumptions that the world can be observed in terms of an ultimate truth and rather sees it as social constructions changing over time. According to Berger and Luckmann’s social constructionist theory they describe reality as something reflexive; it is socially constructed by people and groups within our societies mainly through our language. Hence, reality is context bound and will be constructed in different ways in different societies, groups and cultures.

Social constructionism is not one theory but rather a common name for several theories about the society. However, according to Burr there are four characteristics that can be viewed as common within these theories. (1.) The social constructionist theory is critical to the assumptions that our knowledge about the world can be viewed as an objective truth. (2.) Therefore, social constructionism is considered anti-essentialist and the people, the world we live in and the knowledge we have about it could have been different and could change over time since we are always culturally and historically constructed and affected. (3.) The way we act and react contributes to constructing our social world and also preserves certain social categories while some disappear. (4.) These social processes and (sometimes) struggles create collective truths about our world, and ourselves and make some acts natural while others are considered as deviant or even unthinkable.

Discourse Theory

We use discourse analysis as theoretical framework. Discourse analysis has taken different directions but is founded on the work by Michel Foucault and his assumption about discourse as something that creates a temporary truth and at the same time

75 Winther Jörgensen, Marianne; Phillips, Louise (1999), Diskursanalys som teori och metod, Lund: Studentlitteratur
76 There may be some confusion concerning the difference between social constructionism and social constructivism as some argue that there is no or little difference between them while others say there is. However, that is another discussion not relevant in this context. In this thesis we will use the term social constructionism.
78 Winther Jörgensen & Phillips (1999), p.11
establishes how we think. This means that when a discourse is created we construct a fixed definition on how to see the world. Since this definition becomes “real”, other ways of looking at the world becomes deviant, forbidden or sick and therefore the definition of the world holds a great deal of power. Discourse analysis is considered as both a theory and a method and our aim here is to outline the basics of the theory in general as well as this theory described by Laclau and Mouffe since we will be using their approach as our method.

Defining discourse
In general terms discourse can be described as “a specific way to talk about and understand the world (or an extract of the world)”.

Language is in the focal point of the discourse and is not seen as something neutral that we use for communication. It is rather seen as a social activity that is both constituted by the social context as well as constituting of social phenomena. However, the concept of discourse can be described through various traditions within the discourse analysis. We will more specifically define discourse according to Laclau and Mouffe’s theory, whose discourse is viewed in a broader perspective. Although Laclau and Mouffe assume that the linguistic part of the discourse is of essence, a discourse is seen as all social phenomena. In their definition of discourse Laclau and Mouffe also emphasizes the struggle rather than the common within the discourse:

The discourse constructs the social world of meaning and that meaning can never be locked down because of language's basic instability [...] Different discourses - each of which represents a specific way to talk about and understand the social world – are constantly struggling to achieve hegemony, to establish the importance of language in its own way.

Laclau and Mouffe and discourse theory
The political theorists Ernesto Laclau and Chantal Mouffe have presented a discourse analysis that we, in accordance with Winther Jörgensen & Phillips, have chosen to call discourse theory. One of the main assumptions according to this theory is that a social phenomenon can never be considered as stable and that discourses never should be seen as definitely fixated. The discourse theory emphasizes the discursive struggle between different actors about who are trying to establish their definition of a phenomenon. It is this struggle that the researcher should study according to the discourse theory:

Hence, the aim of the discourse analysis is to identify the processes where we struggle about how the meaning of the signs should be defined and where some fixations of definitions become so formalised that we perceive them as natural.

Thus, Laclau and Mouffe illustrate how different positions fight to make their description of reality the accepted one, and how the fixation of a certain description makes other

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80 Börjesson & Palmblad (red.) (2007), Diskursanalys i praktiken, Malmö: Liber, p. 12
81 Winther Jörgensen & Phillips (1999), p. 7 (authors translation)
84 Winther Jörgensen & Phillips (1999), p. 13 (authors translation)
85 Laclau & Mouffe (1985)
86 Winther Jörgensen & Phillips (1999), p. 32 (authors translation)
realities impossible. The fixation could never be permanent but rather a temporary stop in the constant changing of definitions and it is bound to change within time since there is a constant struggle to define reality. Identities are also perceived as something socially and verbally created in discourse theory. The individual is not autonomous or sovereign and has no essential meaning without the discourse. Laclau and Mouffe describe how the individual, the subject, is tied to act in certain ways through the positions they have been given by the discourse. The positions are also fragmented, meaning that you can be positioned within several discourses and thus several subject positions. Collective identities and groups are defined in the same way by a temporary fixating of the group in a certain position, making no other interpretations available. Hence, the collective identity does not get meaning until it is positioned against “the other” and when differences within the group are ignored.87

Discourse theory may be seen as somewhat of an exercise in remembering terms and definitions. Because of the many different tools used to describe and analyze discourses according to Laclau and Mouffe we find some of them not of relevance to this study, which is why we have decided to not mention them. However, the ones that will occur in our analysis are explained below. This is done with consideration of the aim of the discourse theory (see above).

Since the discourse theory aims to identify the struggle about how the discourse is defined we need to know what we mean by discourse. The discourse can be described as the fixation of a certain definition (for a more specific explanation see the part Defining discourse) and therefore also a reduction of possible ways to interpret the reality. Within the discourse there are temporarily fixed signs that have been assigned their meaning by their differential positions within the discourse. These signs are called moments. While the moments have a temporarily fixed meaning through the way they differ from the other signs elements are signs yet to have their definition to be fixated; they are signs with ambiguous meaning. Some signs have a privileged status within the discourse; these key concepts are called nodal points. The other signs are gathered around the nodal points and get their meaning through their status in the discourse. The nodal point gets its specified meaning by the signs that are linked together which create lines of associations, this is called equivalent chains.88

Different discourses are struggling to reach hegemony over a certain discursive terrain by trying to fixate a specific meaning to some nodal points. This is called the discourse order (and is a term borrowed from Fairclough).89 These nodal points are called floating signifiers and are the signs that the different discourses are trying to give meaning to in their specific way.90

Critique
Discourse analysis as a theory and method has been considered as somewhat problematic since the theory does not recognize that there is a real world “out there” of which we can make objective observations. (This is also a critique that has been directed towards all of

87 Laclau & Mouffe, (1985) and Winther Jörgensen & Phillips (1999), chapter 2
89 Winther Jörgensen & Phillips (1999), chapter 2
the social constructionist theories.) Discourse theory only recognizes that there are different versions of the world that we perceive through our specific place within a discourse. This leads to the question of why our specific version should be considered as more relevant than others. We want to meet this critique by admitting that our version of the world whilst shaping and describing it also questions what usually is seen as something “taken for granted”. We think that the discourse theory can be used to question some descriptions of the world and to reveal power structures by deconstructing them. When this is done we can stop viewing these versions of the world as something natural and rather see it as something that is political and created.\footnote{Compare to Winther Jörgensen & Phillips (1999), p. 151}
Method

Our method is based on discourse theory and this part presents a detailed description of how our study has been carried out and how we have analyzed our material.

The key actors

Since we come from another context than the one we set out to study we had to start our work by trying to locate the key actors in drug consumption within the Colombian context. We didn’t quite know where to start and therefore spoke to everyone we came in contact with about our study and asked for their opinion on the issue and who they considered to be interesting actors within the field. We talked to persons at universities, friends and their friends, people at bars and nightclubs, authors of books we were reading about the subject and so on. Most of the contacts were established this way, through the snowball effect. For example, talking to a girl at a bar lead us to talking to her friend that recommended us to talk to his friend that worked for an NGO that we later came to identify as a key actor that we also interviewed. To come in contact with the private rehabilitation centres we searched the Internet for these kinds of organisations and contacted everyone we found via e-mail (totally fifteen organizations), two of them answered and those were the ones we came to interview.

However, with great help from a professor in social work at the university Externado and employees at the UNODC we managed to finalize the picture of which actors where important. They were also kind enough to help us come in contact with these institutions. All in all in this field we found the key actors to work within six different positions and levels in society; international agencies, public authorities, municipal social welfare, private treatment foundations, non-governmental organizations and scholars. Hence, the selection of respondents is not based on a randomised selection but rather on coming in contact with one of the persons at the institution working with drug consumption. Since we have a discourse theoretical method randomised selection of respondents is not of great importance since everyone we have interviewed is part of the discourse we are trying to describe.

Data collection

We conducted all interviews together, taking turns asking the questions respective taking notes. This structure of the interview was made clear for the respondent before starting so as to be transparent and more comprehensive. The interviews were recorded and transcribed. The transcriptions were made by both of us separately to make sure that we could understand the interviews and that the transcriptions were made correctly. When we had difficulty understanding words or expressions help was taken from fluent Spanish speakers.

The written material ended up being approximately 35 000 words. In order to make this extensive data manageable and to facilitate the analysis we made a concentration of the meaning of every interview. This was done by both of us to ensure that our understandings of the statements were similar and to come as close to the core meaning as possible. Because of the linguistic importance of a discourse analysis we have used the same words or expressions as the respondents in the meaning concentration. Some parts of the statements that were not of relevance for our study were left out.

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We have chosen three different themes in our interview guide\(^{93}\) that we thought of as vital to the subject; drugs and policy, society and prevention, and people and treatment. We consider these themes as helpful when trying to understand our field of interest. Our intention was to try to keep the questions as general as possible since we strived at getting the respondents to talk somewhat freely about the subject. This is of great importance since we are doing a discourse analysis and we don’t want to steer the answers to fit our Swedish way of talking about drug consumption. That is why we included questions as “What do you consider as drugs?\(^{93}\)”, which allowed the respondent to give us his/her view at the same time as providing us with material so that we could analyse how the respondent talks about drugs.

**Data analysis**

To analyze the material we used a simplified model of the discourse theory according to Laclau and Mouffe as described by Malin Wreder\(^{94}\) that was found to be fitting. It provided a rough estimate of what discourses are at work in the Colombian drug treatment and policy system. Three step model:

1) Identify what signs (moments, elements) that the statements are centred around.
2) Describe what discourses can be seen by finding the nodal points and how they are linked to other elements (equivalence chains).
3) Examine what the discourses include or exclude (through the discourse order and floating signifiers).

Analysing the statements according to this model made us able to centre the material around three main discourses. These became clear through a hermeneutic reading of our interview texts. We read these texts several times to get a general understanding of their meaning and content. We then returned to certain themes and expressions that we found to be in common among many of the respondents to try to interpret their meaning. This way we alternated between the complete texts and the fractions and could locate three central terms defining the consumer, namely sickness, marginalisation and recreation. With these terms at hand it became obvious what other terms that could be related to each understanding of consumption. This way our three discourses took shape and we could further understand which statements could be associated to which perspective. These discourses were later analyzed in relation to each other to get a better understanding of the whole picture and how they differ in their reasoning.

**Validity, reliability and generalization**

In a strict post-modern perspective the question of validity, reliability and generalization would be of no interest for this study, but would rather be seen as an old fashion positivist way of looking at research. However, our view on research is more laid-back and we will therefore consider all of these aspects and how they can relate to the qualitative research interview.\(^{95}\)

In this perspective the question of validity is present during the whole period of the study. In fact, this process had already begun when we chose what to study, where it should be carried out, what themes should be present in our interview guide and so on. Our ambitions have been to critically scrutinize all parts of our study to counteract

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\(^{93}\) See appendix 1

\(^{94}\) Börjesson & Palmblad (red.) (2007), Diskursanalys i praktiken, Malmö: Liber

\(^{95}\) For more in dept discussion about this see Kvale (1997), chapter 13 as our arguments will rely on this.
selective perception. This is of special importance since we have been doing our study in a different context than the one we live in. So as to not interpret our material according to a Swedish comprehension we have during the whole process discussed and tried to control all empirical material in relation to a certain rendering. It is also important to stress the fact that we have not been looking for “the truth” in our material but rather the lived experience of the respondents.

One validity issue that we have made an effort to be extra careful with is the linguistic part of the study. Since language is of great importance and we have not interviewed our respondents nor written the study in our native language these translations could have caused validity problems. To ensure a high linguistic quality we have both been present at all interviews and done all the transcriptions and translations together. Another linguistic validity issue is related to the Spanish language. In Spanish there is no grammar form free of gender, which results in when speaking about more than one person the group always ends up being linguistically masculine. These translations are not very often possible but we have tried to come as close as possible to the original meaning of the quote.

We have also been careful when doing our interviews so as to not lead the respondents into accommodating their answers to our expectations. To try and counteract this we tried to think of as neutral and open questions as possible. But to make reliable interviews the work doesn’t stop with the questions, we also had to think of how we responded to the questions answered, so that our reaction didn’t seem to be evaluating. To improve the reliability of our analysis we coded our interviews together. To ensure transparency for the reader we constructed a table showing the discourses and what they are linked to.

We hope that our study can contribute to the academic research in some way, and we therefore intend for our study to be able to say something general. Although it isn’t based on statistical generalization with a randomized population we consider generalization as something else when a qualitative study is at hand. With this we mean that the discourses we have found to be present in Bogotá are most probably present in the rest of Colombia, and parts of them could likewise probably be found in other countries and contexts. By using discourse theory our study can also exemplify how discourses are constructed and work. Hopefully our study furthermore can give guidance in similar situations or in a similar context as our study is carried out in.

**Ethical aspects**

Although our respondents were all willing to state their names in our study they have been assigned confidentiality to make sure that they won’t suffer any unpleasant consequences. We have therefore made sure that all recorded material has been deleted after transcription and all material was coded in such ways that no one is able to recognize the respondent.

We have handed out a letter to every respondent that explains the purpose of our study and why we wanted to make the interview. With this at hand we could make sure that the respondent was well informed before consenting to an interview.

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96 See appendix 1
97 This is what Kvale (1997) defines as *analytic generalization*.
98 See appendix 2
Table 1. The key actors and respondents

<table>
<thead>
<tr>
<th>Respondents</th>
<th>N</th>
<th>Institution and work description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Public Authorities</td>
<td>3</td>
<td><strong>•Direccion de Antinarcoticos (Diran), Area de Prevención:</strong> A police department working with drug issues such as eradication, dismantling of drug trafficking, controls at harbours and airports and prevention among children and adolescents, mainly in schools. Our respondent works within the prevention department.</td>
</tr>
<tr>
<td></td>
<td></td>
<td><strong>•Ministerio de Proteccion Social, La Dirección de la Salud Publica:</strong> A public national ministry that works with identifying and mitigating risks within the social and work life as well as in health issues. Our respondent is a representative working with public health issues regarding substances, such as the reduction of drug demand.</td>
</tr>
<tr>
<td></td>
<td></td>
<td><strong>•Direccion Nacional de Estupafacientes (DNE), Observatorio de Drogas:</strong> A public national ministry that works with different aspects of the drug issue with the goal to stop the supply of illicit drugs, such as seizing goods from drug traffickers and investigating and informing about the amount of illicit crop cultivating and drug related problems in the country. Our respondent is a representative from this drug investigation department.</td>
</tr>
<tr>
<td>International Agency</td>
<td>1</td>
<td><strong>•United Nations Office of Drugs and Crime (UNODC):</strong> An international UN agency working in Colombia in close connection to public authorities such as the Ministerio de Proteccion Social and NGOs with issues regarding drug prevention, alternative development and organized crime. Our respondent works with the prevention of drug consumption in close cooperation with the Ministerio de Proteccion Social.</td>
</tr>
<tr>
<td>Municipal Social Welfare</td>
<td>1</td>
<td><strong>•Hogar de paso:</strong> A municipal organisation that works with homeless persons and serves among some things as a shelter with places to sleep and pass time during the day as well as giving medic care and drug treatment. Our respondent is a social worker at the organisation.</td>
</tr>
<tr>
<td>Private Treatment Foundation</td>
<td>2</td>
<td><strong>•Foundation 1:</strong> A private treatment foundation working with all kinds of addiction, but only with persons who themselves are seeking help at the foundation. The foundation has an estate just outside of Bogotá used for detoxification and treatment. The treatment is a three part program working with the physical, psychological and spiritual part of the person. They also follow the Minnesota-model. Our respondent is the founder of the foundation.</td>
</tr>
<tr>
<td></td>
<td></td>
<td><strong>•Foundation 2:</strong> A private treatment foundation working with all kinds of addiction. The foundation has an estate just outside of Bogotá used for detoxification and treatment as well as a meeting room in the city for AA/NA-meetings every day. Our respondent is one of the founders of the foundation.</td>
</tr>
<tr>
<td>Non governmental organisations</td>
<td>2</td>
<td><strong>•NGO 1:</strong> An NGO working in three areas of the drug issue; prevention, harm reduction in youth consumption and political activities to legalize personal use of drugs. Our respondent is a sociologist and one of the founders of the organisation.</td>
</tr>
<tr>
<td></td>
<td></td>
<td><strong>•NGO 2:</strong> An NGO that through harm reduction strategies and social networks works with homeless and marginalised persons to help them cope with substance use and HIV. The organisation also has a Centro de Escucha (Listening Centre) where everyone is welcome during the day. The activities vary from medical help to hairdressing, but the most important thing is that everyone gets a chance to talk and be listened to. Our respondent is working within the organisation as a community stakeholder.</td>
</tr>
<tr>
<td>Scholar</td>
<td>1</td>
<td><strong>•Scholar:</strong> Our respondent is an academic working with research on behalf of public and international authorities about substance use and consumption.</td>
</tr>
</tbody>
</table>
Results

In this part we present the results from our interviews with the different actors presented above. Shorter extracts from the respondents exemplify how they reason and are organized in accordance to what discourse we find them belonging to.

Public health discourse

This discourse relates drugs to danger and describes drug consumption in health related terms looking at the consumer as a person with a sickness to be cured within the healthcare system. Consumption is strongly related to addiction, a sickness that stays with you through life, even after several years without consumption. The main focus is laid on the individual and also includes the family, both as a reason to the problem and as a part of the solution.

Drugs

[...] substances, that when you introduce them in the body cause some sort of dependency or addiction. But the drugs can be legal or illegal. (Diran)

The drugs that are accepted by the society are not, within quotes, that dangerous. The synthetic drugs, these that are made in laboratories are extremely dangerous because they are there to produce a total and immediate addiction [...] (Foundation 1)

Drugs are considered as psychoactive substances and include all substances whether illegal or legal. This means that substances such as alcohol or tobacco are included in this way of reasoning and the main distinction that is made is that some are socially accepted and some are not. This follows the juridical status of the substance. All substances are considered dangerous and this danger, related to the consumption, is closely connected to addiction or dependency. These consequences are some of the first things that are stressed in the description making it focal in the idea of what drugs are and lead to.

The consumer

It is a health problem, it’s no other thing, and we need to treat it in this way. There are addicts, and this we can’t deny, and these addicts need to get treatment and they must be conscious about the disease.

- Foundation 2

The genetic part is, I think, the most, the most significant, what is most repeated in the medical history of the patients that we have attended.

- Foundation 1

The problematic consumer is described as a sick person that is in need of medical care. This is in contrast, related to being seen as a criminal, which implies that other people see them as criminal or that they earlier have been seen as criminals. This means that the addiction is considered as a sickness, and therefore the person with a problematic consumption should not be sent to prison but rather to a hospital. The addiction, when seen as a sickness, should not lead to any discrimination since sick people are not to be blamed for their situation. As an addict you need to come to insight about that your consumption is a problem before you can treat it, you need to admit having a sickness. Once you have got the sickness it is something that you carry with you through your
whole life and you can not consume again after recovering. If you do, it is considered a relapse and this also requires you to have medical attention. This sickness is, as many others, regarded as something genetic that is passed on within the family.

Causes

[…] aggression within the family, the heads of the households, the married men, the husbands, they drink a lot, or at least here in Colombia. And this produces a bad family environment that in the long run also can evolve into ‘a factory of addicts’. This is where the addiction comes from, with the… the aggression within the family. […] Regarding the family and in dysfunctional families that lack a head of the household, usually it is the dad that has abandoned the household. Therefore the home is left only with the mum, and the mum has to act like the dad and she doesn’t do the two roles well on her own. Therefore the lack of the dad becomes visible in the lack of norms, in the lack of boundaries, in the lack of good knowledge about how to raise the children.
  - Foundation 1

While talking about the consumption of psychoactive substances the focal point is addiction and the main reasons explaining this kind of problematic consumption are described to be found within the family. Dysfunctional families are given as a reason why things start to go in the wrong direction for young people that in the long run can lead to addiction. It is above all the lacking of a parent, most often said to be the father, which is related to consumption. The father is described as fundamental in the household, and with his absence comes the loss of norms and values and appropriate role models to guide the children through life, and also the good knowledge of how to raise the children. The father is perceived as the parent giving structure to the family and the children so that their well-being is guaranteed, e.g. that the children go to school and not associate with the wrong people. If the children do not get this guidance they can end up consuming psychoactive substances and become addicts. Hence, one parent is not perceived as enough to manage the daily life and the structure of the family nor pass on suitable norms and boundaries to the children. Even in the cases when the father is present in the family there are certain ways he cannot act, e.g. aggression and violence of a father is harmful for the family structure. The violence is many times perceived as a consequence of the consumption of alcohol that in the long run creates a risk for the children ending up as addicts which implies that addiction is something that can have both psychological and genetic cause. The father is the only adult in the family spoken about in both good and bad terms, and the role of the mother does not seem important. Hence the man is also the only visible consumer of drugs.

Consequences

[…] the person that… that can’t control the desire to consume and ends up, getting closer and closer, almost consuming ever day and then life is determined. They have already left their studies, they don’t come back to the kids, they have left their home, they abandon everything, they end up in the street.
  - Foundation 1

Therefore a person that consumes certain types of substances, and because of its addictive power, can generate an addiction so strong that you will end up having very serious social problems. For example if you are a person that consumes marihuana you are not a person that is going to end up on the street, you are not going to end up stealing, like committing criminal acts, right. While a person that
consumes heroin and that consumes basuco is a person that can easily end up in
criminal behaviour because of the type of drug, for the physical need and the
addictive power of the drug.
   - Foundation 2

Physical and social deterioration is referred to as the main consequences of a problematic
consumption of psychoactive substances. Some of the substances are seen to create such
a strong physical dependency that they steer the behaviour of the consumer. The physical
need is a part of the addiction that can lead to doing socially unacceptable things such as
criminal acts, leaving your family or ending up in the street. However the consequences
are perceived as being different depending on the addictive power of the substance. Not
only is the consumer affected socially but also physically and mentally.

Solutions

[…] we work with the addict as a sick person that needs the hospitalization, so the
person is hospitalized to first of all work on the physical part, release them from the
drugs so that the body doesn’t need drugs. Afterwards comes the psychological part
that psychologist works with, to explain to the person why and for what reasons he
is consuming. […] But if the person recuperates and stops consuming but continues
living a bad life, the person fall back into consumption, do you understand? This is
very important, to clean the environment, to protect his environment for it to be
more viable for him, so that it’s a healthy environment. You have to change friends
and you can’t go back to where you were consuming. You have to change a lot of
things.
   - Foundation 1

The change that the government is making in our country toward considering the
addict as a sick person is very important. It’s necessary to include them in the
government’s national health care plans, so that they are attended to. In this we are
making progress, in that there is no harassment but instead that help is offered, is
that clear? That these people are not sent to prison but instead sent to a hospital, to
treatment, so that they can receive detoxification.
   - Foundation 1

To help a person get well from the addiction treatment is described as a necessity. The
treatment needs to include detoxification, to release the body from the physical need. It
also needs to include a psychological treatment since the explanation to the consumption
is considered to be found in the mental health. The person who is going to get well needs
to be away from the drug environment that is perceived as being bad and unhealthy
opposed to the healthy environment of the family that is part of the solution. You need to
change your life around not to relapse into an addiction, not only your physical
environment but also your friends and your lifestyle. The focal point for solving the
problems of an addiction is interventions only directed toward the individual consumer,
each addict has to seek treatment and solve the family problems. Included in this solution
lies the fact that a person with a sickness should not be stigmatized implying that this
also is an important part of the recovery.

Deprivation discourse
This discourse relates drugs to social and political aspects in society. Consumption is
explained by structural faults such as poverty and inequality, things that affect
individuals so to the extent that they are turned into consumers. Therefore the reasons
and solutions are also believed to be found in social changes on a very high societal level.

**Drugs**

The cocaine and all that, each do their work, each drug breaks down the persons health, at whatever moment and in whatever situation. But it’s not that one is more dangerous than the other, no, all have harmful consequences, internally and impossible to heal. Impossible to heal. It is what I have seen with so many health cases.

- Hogar de paso

Drugs are described as psychoactive substances and include both legal and illegal substances as substances that are used improperly. They are all perceived as dangerous regardless of their legal status and the danger is related to physical and social deprivation. Hence, the substances are related to a harmful consumption that creates a physical and mental deterioration and in the long run also social problems.

**The consumer**

[...] in the study of consumption in home environments we could see that although the alcohol and the consumption of alcohol is almost the same in all of the socioeconomic classes the problematic use, abuse and dependence is higher in the lowest social classes [...].

- DNE

[...] they disturb the society that wants to be well off, within quotes. It’s a word that is very... ‘they are a disturbance’. It is a prejudice assumption. [...] these drug consumers are seen as this part that a lot of people say is the damaging part of society, does that makes it clear? But at the same time they have got long lasting consequences from how they have been treated by their family, from how they have been treated by the state. There are no job opportunities, no opportunities to study and if you see to the personal part, if they have been molested, if they have been thrown out of home, or are orphans or something like that. They have to do something [...].

- Hogar de paso

The consumer is described as a marginalized person coming from the lower social classes in society. However consumers are said to be found in the whole society but the problematic consumption is mainly found here. The reasons to these peoples consumption is linked to other kinds of external difficulties that stem from their marginalized position in society. Although personal difficulties are seen as one reason to consumption it is not this that is the focal point in the discourse, it is rather the way societies are structured. The lack of opportunities such as jobs, education and other resources are perceived to drive people into drug consumption, and living with these difficulties is also seen as a valid reason. Though when these drug consumers are described from how the main part of society sees them, they are portrayed as a disturbance that interrupt their image of the community they prefer to identify themselves with.
**Causes**

[...] it is the salary you have, and not how you are as a person. And this also explains a bit about what generates vulnerabilities from a social point of view. And if you take a good look at the economic situation, it’s like, if you don’t have another way of supporting yourself and you feel there are no possibilities of evolving your life project, you see, well, the option is to traffic drugs [...].

- Ministerio de Protección Social

I have read that since Santa Fé de Bogotá was founded there has been war, war, war, hunger, homelessness, plagues, [...] and the rich people, the foreigners, they were the ones who owned the city, and therefore we, or our ancestors, who were from the lowest classes, and because of that they didn’t have the possibility even to study, or to… from here it begins, this whole situation.

- Hogar de paso

Before it was easier for the drug traders and for the guerrilla and for all those groups to take out the drugs from the country. But now, as there is so much, lets say so many controls, not only here but also in other countries. Therefore a lot of the drugs are not being exported. And they won’t leave this business, instead they start selling it internally.

- UNODC

Drug consumption is argued to be a way to escape different kinds of harsh realities. That the country is in a state of war and that people live in poverty without any real opportunities in life is stated as reasons for wanting to escape the reality with psychoactive substances. This harsh reality exists especially for those in the lower social classes that have not got a social network or a job to support them. This lack of opportunities and jobs is also stated as leading to people joining the illegal drug business that eventually also will lead to consumption. The unequal structures that produce this poverty in the country are described as coming from the society that the conquistadors/colonists created in Colombia. The problem with drug consumption is in this way related to the violent history of the country and is traced back hundreds of years to the establishment of a hierarchical social structure that someone else, the colonists, are found guilty of. Consumption is also highly related to the access of drugs in the country. Illegal drugs have become a larger problem, as they are easier to get hold of today due to international interventions to stop the traffic of drugs. The legal substances are also perceived as a big problem since they are available to everyone and among these, alcohol is seen as especially problematic as it is also part of the culture.

**Consequences**

[...] the consumption of drugs has become a problem for the, for the society. Because people end up, the drug, the addiction of the drug results in difficulties, in social exclusion, in family problems, in work problems.

- NGO 2

[...] if the decision to consume is a decision that only has an individual impact, or if it has further impacts? Why doesn’t everyone ask themselves, well, the consumers in Europe, why haven’t they asked themselves once where the drugs come from. These drugs are produced in Latin America, and these drugs are produced in Colombia,

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99 Santa Fé de Bogotá is the official name of the city Bogotá.
what impact have they had for democracy? And above all, something that is very important for us, what impact have they had on the environment?
- Ministerio de Proteccion Social

The consequences of the consumption of psychoactive substances are explained from a structural level being seen as mainly different effects of social exclusion and political implications. The social consequences that affect the population are described as homelessness and problems with family and work. The lack of job opportunities is perceived as the reason for entering into the illegal drug business, since there is nothing else to do for the people living under these harsh conditions. This is also described as political consequences where the war and poverty creates a lot of displacements leaving people desperate for something to live on. On a more general level the drug consumption is perceived as augmenting the production of illegal drugs influencing the democracy, politics and environment in the country, e. g. leading to corruption, a democratic deficiency, security issues and severe environmental effects. In other words the consequences are traced both to the consumption so as to the production, traffic and trade of drugs.

Solutions

The concept of vulnerability also applies perfectly on the supply, a lot of our, of our traffickers, small traffickers, are peasants. They are persons that have found an option of making a living in the production and cultivation of drugs. And they are considered criminals, but we should work with them in processes of social inclusion to create other legal options of making a living […].
- Ministerio de Proteccion Social

Where the state does not allow the trade of drugs, where the trade is profoundly forbidden, the sale, the consumption, the traffic of drugs, where are they going to get it? They wont get it. […] You always have to get to all drug business from above.
- Hogar de paso

And as you are from Europe, I have to make the call that I ought to. I believe in the shared responsibility, it should be a concept that has to be much more developed. I think it is wrong to consider countries as either producers or consumers, I don’t believe that there are any countries that only produce nor that only consume. […] We have started to find synthetic drugs that are not produced in Latin America. The production is mainly situated in Europe, the question is then if Europe also is a drug producer?
- Ministerio de Proteccion Social

Significant changes that contribute to social inclusion and jurisdiction are described as fundamental for some kind of solution. To come to terms with the unemployment and the political problems leading to exclusion for certain groups in society is understood as of great importance in the preventive work. Hence, prevention should not only be directed towards the specifics of consumption but rather to improving the social situation for the people. Legalization is explicitly not seen as an alternative, instead laws are seen as a fundamental instrument and more restrictive jurisdiction is called for. This is described as an important mechanism for creating norms in society that will prevent the consumption and raise the awareness among the citizens about the harmful effects. The responsibility of the state in this question is emphasized, though the work done today is criticized and both preventive work and work directed toward the consumption instead of mainly the production, traffic and economy of drugs is wanted. The categorization of
consuming and producing countries is questioned and an international shared responsibility is both stressed and desired.

**Pleasure discourse**
This discourse lays focus on a recreational consumption of psychoactive substances and it often speaks about a consumption that is unproblematic. It also has a desire to normalize consumers and makes little difference between legal or illegal substances.

**Drugs**

[…] there are some substances that are more dangerous than others, not like some are more dangerous than others, but that the danger is in direct relation with the level of consumption, with how often you consume and if you abuse the substance.
- NGO 1

The moral and the law is the only difference between alcohol and other illegal psychoactive substances. Like substance they do the same harm […]
- NGO 1

Drugs are described as psychoactive substances and can both legal and illegal as substances that are used improperly. The difference perceived between the substances is the moral and law, meaning that the legal and illegal substances are considered to have similar consequences and being used for the same purposes. The illegal substances are the ones that have moral implications, that are connected to judgement and criticism from others, and also juridical implications. But as substances they are similar, it is more about how you consume them. The substances are related to recreational consumption and to having fun rather than addiction and danger.

**The consumer**

[…] the users of substances are feeling more and more like normal persons, like they function, that they are not crazy or sick, not criminals, and that they don’t do any harm to nobody and at the same time that they can, that they will defend their rights and change the reality of drugs.
- NGO 1

[…] the dependencies are very complicated, but one knows when you are dependant on something. There is a limit, of course, or at least you can know this […].
- Scholar

The consumer is described as a person whoever, ‘a normal person’, who chooses to consume psychoactive substances because they wish to have an extraordinary experience in life. The consumption of psychoactive substances is therefore something that individuals decides for themselves and is not considered to be influenced by other circumstances such as a harsh reality. The consumers are seen as capable of defending their own right to consume and to work for a change of the public opinion. Hence they are thought of as rational persons with their own ideas and capacities and with the capability to acknowledge and act when consumption gets out of hand and becomes a problem. This also implies that the persons are educated, have time and in this society, in Colombia, that means that they are from the middle or higher social classes. Many times they are also spoken about as curious youths, wanting to experience more in life.
Causes

[…] if my parents have split up. If my mum and my dad, and my three siblings have been attacked and are dead, I’m not going to tell this person ‘hey look, get yourself a Wii’, no, no no. Well, you need to go drinking a month, yes, two months already. You’re brave to live through a situation like this. Or if you just broke up a very passionate relationship, you need to get drunk!

- NGO 1

People want to have fun while they are using psychoactive substances. People want to experience different sensations than the ones that your normal life produces. It is the same reason why people go on a rollercoaster […] People think about the pleasure, to look better, to dance more, to have better sex. If people are thinking, it is about the good things. And this is the reason why people consume substances, and this is what the world forgets.

- NGO 1

Well, if you go to Putumayo100 you will find people doing yage101, but these persons aren’t addicted, they use the yagé with finesse, in rituals and for spiritual reasons. The addictive consumption is a very western phenomenon, it is not from the ancient cultures.

- Scholar

It is complicated in a country that is as poorly educated to legalize the drugs. […] And I think that the people here are poorly educated if you understand me, they can’t control this kind of, their own consumption, so they ask for a legalization of drugs while they themselves are very poorly educated when it comes to drugs.

- Scholar

The reasons for consumption of psychoactive substances are mainly seen as different kinds of recreation. It is focal here that people use these substances to have fun, to feel good and to have an extraordinary experience in the everyday life, e.g. to party or to have better sex. The consumption in Colombia is also seen to be influenced by the good quality of the substances in the country making people more anxious to take them and also creating a drug tourism meaning that foreigners travel to Colombia mainly to consume different substances.

The consumer can also use the substances for self-medication, meaning e.g. to feel better when you are going through a rough period. However, normally the substances are described to be used for socializing and not to be consumed when you are alone or depressed. In these cases it can be considered on the verge to abuse. The causes of consumption are also perceived differently depending on your social context. If you for example belong to an indigenous group the consumption of psychoactive substances is considered to be something spiritual and is closely linked to history and culture. This consumption is described as enriching and conscious, while the consumption in more ‘western’ societies is rather considered to be something recent that traditionally does not belong in that culture and therefore is not really regarded as respectful.

100 A department in southwest Colombia.
101 Also Banisteriopsis caapi. A psychoactive decoction prepared from different plants by the indigenous peoples in Amazonian Colombia.
**Consequences**

Nobody consumes the psychoactive substances alone, unless they are in a stage of abuse. But all the earlier stages of the consumption have to do with socialization, with relating to other people. Therefore there doesn’t necessarily have to be any harmful consequences for it to be a problem. [...] If you for example have taken ecstasy you become very happy and very excited and you meet someone and you don’t have any condoms, and you have sexual relations with a condom... eh, without a condom. Hence, the limit doesn’t necessarily have to be that you have a bad life or that you... But rather that you start to put yourself in risk situations. We who consume alcohol, if you consume alcohol and you know that you can’t drive, that you can’t have a car, and you still go driving, well, this is a risk situation.

- NGO 1

The thing is that, the thing about drugs being illegal is very complicated because if you consume an illegal drug you have to hide to consume it, and in this way when you hide to consume this drug, well you can come to know other drugs, right. You come in contact with other risks that are a product of the illegal context.

- Scholar

The consequences of consumption are perceived to be mainly personal safety risks such as traffic accidents, venereal diseases, street violence and so on. In the long run abuse of the substances is seen as a risk but the consequences spoken of are primarily risk situations that you put yourself in because the substances makes your judgement fail. The substances are described to weaken your perception of reality making it easier to take the wrong decisions and expose yourself to dangerous situations. Hence, the risk lies not in the health deprivation because of the use of the substance but because of the situation you have put yourself in. However, an extensive consumption of psychoactive substances is described as abuse or dependency (but not as an addiction).

The fact that the law criminalizes some substances is perceived to enhance the risks of the consumption of these substances, this because hiding can put the person in contact with other illegal activities and substances. The law is also seen to affect the consumers since they can be considered as criminals and end up in prison, and then it is not the substance that is perceived to be affecting the consumer but rather the politics.

**Solutions**

The main problem is that there doesn’t exist any possibilities for regulation. If the substance could be regulated, if we could have educational campaigns, if we could have control over the quality, if we could have guarantees, then we could have security over what we consume, right. I think it is the main problem with these substances, that they aren’t legal and that you can’t regulate them.

- NGO 1

Because it is a break for the body with this substance that is already a dependency. And also the psychological part is very strong. Let’s say that it has some very strong consequences for the head. And also you are stuck with the fear that you can’t go back and try these substances ever again. Because you believe that the day that you try it again that you are going to fall, this is the thing about alcoholism, with the alcoholics anonymous. ‘I will never again.’

- NGO 1
[…] like a person that has a, that is living with a problem, but that like all human beings, has the capacity and the responsibility to resolve it. Therefore, this is neither a protectionist nor a welfarist vision, not at all.

- UNODC

The solutions are seen to be found in different actions that are easier to carry out if the consumption of psychoactive substances is legalized. If this was the case information could be given to minimize the harm so that people are made aware of what they consume and what consequences it has. This way the substances could also be regulated and controlled so they are not of bad quality and the purchase could be monitored. Legalization is also regarded to have great implications for today’s production and trade of illegal substances. Legalizing this economy would make profits from the illegal drugs for outlaw groups impossible and as a lot of violence in Colombian society comes from this it would probably also have an impact on marginalizing the activity of violent groups.

The current strategies toward psychoactive substances are described to have failed and instead more preventive work is called for so that as few people as possible initiate consumption. In both preventive work and rehabilitation the individual is seen to be capable and responsible, meaning that help not only should be given but that the consumer has to be part of the own treatment. Following this the treatment should be carried out in the consumers own environment, and does not necessarily have to include a detoxification outside this environment, but rather gradually weaning off the consumption by slowly reducing it which is regarded to be more salutary for the human body.
Analysis

In this part we present the analysis of our material. Reading the statements according to our model made us able to centre the material around three main discourses. In accordance to these we identified the floating signifiers that each discourse strive to give meaning in the discourse order. We then identified the key concepts, the nodal points, within each discourse and the signs linked to them, the equivalence chains. The three discourses are divided in the areas where struggles to reach hegemony over certain definitions are carried out (the floating signifiers drugs, the consumer, causes, consequences and solutions). The table below is constructed to be read from left to right.

Table 2. Three discourses on drug consumption. Nodal points and equivalence chains in relation to floating signifiers.

<table>
<thead>
<tr>
<th>Floating signifiers:</th>
<th>Drugs</th>
<th>The consumer</th>
<th>Causes</th>
<th>Consequences</th>
<th>Solution</th>
</tr>
</thead>
<tbody>
<tr>
<td>Public health discourse</td>
<td>Nodal points:</td>
<td>Psychoactive substances</td>
<td>Person with a sickness</td>
<td>Addiction</td>
<td>Physical and social deterioration</td>
</tr>
<tr>
<td>Equivalence chains:</td>
<td>Legal</td>
<td>Illegal</td>
<td>Addiction</td>
<td>Relapse</td>
<td>Addict</td>
</tr>
<tr>
<td>Deprivation discourse</td>
<td>Nodal points:</td>
<td>Psychoactive substances</td>
<td>Marginalised person</td>
<td>Escapism</td>
<td>Social exclusion and political implications</td>
</tr>
<tr>
<td>Equivalence chains:</td>
<td>Legal</td>
<td>Illegal</td>
<td>Physical deprivation</td>
<td>Difficulties</td>
<td>Lack of opportunities</td>
</tr>
<tr>
<td>Pleasure discourse</td>
<td>Nodal points:</td>
<td>Psychoactive substances</td>
<td>Normal person</td>
<td>Recreation</td>
<td>Personal safety risks</td>
</tr>
<tr>
<td>Equivalence chains:</td>
<td>Legal</td>
<td>Illegal</td>
<td>Moral</td>
<td>Consumption</td>
<td>Higher classes</td>
</tr>
</tbody>
</table>
We have structured the analysis for it to be as transparent as possible according to the floating signifiers and within them discuss what the discourses include/exclude, how they relate to each other and what is taken for granted.

**Drugs**

Coming from another context we took for granted that one spoke about drugs when speaking about illegal substances such as cocaine or marihuana. Especially since the impression of Colombia is that the greatest problem in the country is the presence of these substances. However, we had to rethink our definition of drugs after realising that every one of our respondents spoke about psychoactive substances that also included legal substances such as alcohol and tobacco. The biggest problem was not, as we were thinking, the consumption of illegal substances but of one legal substance in particular, namely alcohol. So now when we speak about drugs or psychoactive substances we use the definition that our respondents have given us.

Hence, the floating signifier *drug* is perceived as psychoactive substances in all discourses, what differ between them are the connotations they bring. The public health discourse describes drugs as dangerous and something that leads to addiction. In resemblance to this the deprivation discourse also sees drugs as dangerous but rather relates the danger to physical deprivation and social exclusion, than to addiction. This implies that neither of these discourses recognizes the social and unproblematic consumption or else all consumption is considered as equally dangerous and problematic.

In opposition to this the pleasure discourse describes drugs as substances that can be consumed without further consequences. Of this follows that opinions such as the ones expressed by the other discourses are merely seen as morally condescending. On the other hand the pleasure discourse chooses not to focus on the problematic consumption.

**The consumer**

The nodal points make it clear that distinct groups of *consumers* are address in the different discourses. It becomes especially visible when comparing the deprivation discourse to the pleasure discourse since these perspectives so apparently speak about consumers from different social classes following disparate status and opportunities in life. The deprivation discourse speaks of the consumer as a marginalized person lacking means to evolve their lives while the pleasure discourse explicitly mean to recognize the consumer as a normal person. Though these people are more specifically described as educated and rational which implies that these people have the resources to make their own choices and that way create a life wanted.

The public health discourse sees the opposite and describes the consumer without possibilities to make choices because of the addictive power of the drugs. This person is considered to be sick and as other sicknesses it is not a question of choice but instead a health issue that is not controllable. The consumer is explicitly described as a sick person since consumption is considered to be genetic and chronic. In this discourse as in the deprivation discourse the consumer is most often spoken of as a male. The pleasure discourse doesn't relate the consumer to a certain sex but rather to a younger population. Hence it seems like the different discourses each acknowledge completely different groups of the population when they describe the consumer and that way give this person different characteristics. This is emphasized as most respondents change discourse while speaking of different kinds of consumption or people from different social classes.
Causes
The causes for drug consumption are described differently between the discourses and are closely related to whom the consumer is identified as. In the public health discourse addiction is the nodal point since it is explained as the main reason for consumption. In turn the addiction is perceived to stem for problems within the family, this way mixing a health care perspective with a somewhat psychodynamic one looking for explanations in childhood and family. Hence, making it unclear if the social heritage is recognised or if it is replaced with a genetic way of receiving the problem. Relating this to the deprivation discourse they also explain the consumption stemming from problems but instead on a macro level, and the main reason is described as escaping the hard reality coming from the construction of the society. By explaining consumption with these external reasons (such as poverty and unemployment) the consumer is both made free from responsibility and without a will of their own. In direct opposition to these opinions stands the pleasure discourse which focus on a recreational consumption that is chosen foremost for amusement and social and spiritual occasion. Hence, it is not related to problems as the other discourses. As these don’t really speak of recreational consumption it makes it difficult to explain this within their discourses, we therefore ask ourselves if this is because all consumption is considered problematic or if it is a neglect in acknowledging the social consumption.

The way the public health discourse describes consumption, as stemming from an addiction, is not recognised by the pleasure discourse which does not at all use the term addiction but instead speaks of consumption and abuse. Since consumptions is seen as a choice made by a rational person we interpret this as a way of dissociating from the idea of consumption as a sickness or as a way of escaping the harsh reality, both of these standpoints partly relieving the consumer from their own personal responsibility. Consumption of psychoactive substances is in the pleasure discourse spoken of as if giving the impression that consumption should not be judged by the society nor interfered with. However, this is related to specific ways of consuming such as consuming with other people and for pleasure. In this way a recreational consumption is normalized implying all other ways of consumption as abnormal. Relating this to the other discourses clarifies that there are certain ways of distinguishing between the different populations spoken about which makes clear that the pleasure discourse also recognizes a problematic way of consuming when it’s not done in the ‘proper’ way. There is reason to believe that the pleasure discourse’ this way align themselves to the other two discourses way of describing a lot of consumption as abnormal or undesirable. Another way of consuming in an acceptable way according to the pleasure discourse is with a spiritual aim. This is however reserved for ancient cultures doing it their traditional ways. This implies that the way psychoactive substances are consumed in the western world, for recreational purposes, is actually incorrect and un-cultural.

Consequences
The floating signifier consequences is described mainly as health and social problems within the public health discourse. The deterioration of the physical person and its social surroundings are considered as the most severe consequence. The pleasure discourse is also emphasized on the consequences for the individual consumer but in a way that is less concerned about what physical implications the drug has for the body. Instead focus is laid on what kinds of dangerous situations the consumer can end up in due to clouded judgement. Hence it is not the drug itself that has consequences but the behaviour that the consumption can lead to. Compared to the deprivation discourse these stands are more personal and family oriented since the deprivation discourse is rather focused on the
The consumption is meant to have consequences for the individual in terms of marginalization and social exclusion, which implies that it is how the rest of society treats a consumer of psychoactive substances and not the physical affects that the actual drug has. The deprivation discourse also means that it’s not how vast the consumption is that results in negative consequences, but it is rather the social and economic situation of the individual consumer that is decisive. On a larger scale the consumption mainly of illegal drugs is also seen to cause democratic and environmental problems because the consumer when buying illegal substances supports an illegal drug economy. This economy has proved to cause both corruption within the state and ecologic damage during both product processing and destruction of the crops.

Solutions
The solution regarding consumption of psychoactive substances is closely connected to the consequences described within each discourse. The health care discourse call for an enlarged treatment system directed toward the individual consumer. The treatment is perceived as most effective when conducted away from the environment where the individual was consuming, and detoxification is vital. Although the pleasure discourse also focuses on the individual it stands in direct opposition as it pleads for legalization that would allow harm reduction and regressive transitions. By also emphasizing the importance of giving treatment in the consumer’s own environment and the consumers own responsibility to act if they are abusing, an explicitly position is very clearly taken against a public health perspective. This way it is the discourse to take in consideration the consumers own capacity.

The deprivation discourse raises the horizon by looking for solutions in juridical and social interventions, and keep to a level where the state responsibility is focal for solving the problems. Laws are seen as vital and in contrast to the pleasure discourse legalizing is not seen as an option since society is considered to have a responsibility to create norms against consuming psychoactive substances. The pleasure discourse does not just see legalization as a way of being able to augment preventive work but also as a way to minimize stigmatization since the consumption of legal substances does not raise the same amount of attention. Both the public health discourse as well as the deprivation discourse also describe how a certain way of viewing the consumer helps to prevent stigmatization. Though the public health discourse describes this as a part of looking at the consumer as a sick person and the deprivation discourse claims this would be minimized if the society could recognize that people consume because of the lack of opportunities to evolve their lives.

All three discourse are critical of how the government currently spends resources on issues regarding drugs and wish for more supplies to develop the preventive, informative and rehabilitation work. Both the deprivation discourse and the pleasure discourse are explicitly critical of the ‘war on drugs’ that is carried out since neither production nor consumption of drugs has diminished.
Conclusions

Our key findings in this study are that we not only have been able to find one discourse on drugs and drug consumption in contemporary Colombia, but rather three different discourses as articulated by key actors in the field. Each discourse can in some way be seen as influenced by what kind of consumer and consumption the respondents are working with and on what level in society. Depending on which consumers and consumption that are acknowledged the reasons, consequences and solutions are perceived in different ways. Almost all of our respondents relate to more than one discourse throughout the interviews depending on what kind of consumer they are speaking of, but during the majority of their reasoning they all tend to remain within one.

Methodological discussion

The aim of this study was to describe and analyze contemporary Colombian discourses on drugs and drug consumption based on the social constructionist theory and a discourse theoretical approach. One of the biggest advantages we noted regarding our choices of method and theory was that it allowed us to have an ‘open’ approach toward the material. By not having to fixate a way of working with certain parts of the material but rather the parts we found to be central, things that we did not expect to find could be taken into consideration. Although our background and the context we come from has most probably influenced us, our perception is that when this happened it became apparent to us and was something we could alter. One example that we have already mentioned was the fact that we took for granted that using the term ‘drugs’ would mean the same thing in Colombia as it did in Sweden. But when it became clear to us that our respondents used the term differently we also had to change our way of approaching the rest of our material. On the other hand, being from another context than the one we chose to study gave us the advantage of being able to discover things that otherwise could have been taken for granted. We consider us to some extent more able to ‘stand outside’ the discourse since we usually do not belong to it which made it easier for us to study it than if we would have done the same thing in Sweden. Of course, the Colombian and Swedish societies are not totally different and this means that we most certainly have not been able to see all the nuances in the discourses since there surely are similarities.

Something that has given us a bit of trouble during the study has been the fact that the discourse theoretical method is not always very clear on how one should categorize important and central terms. An effect of this was that when we were having trouble analyzing our material we found that it was not always easy to lean back against a clear method for advises on how to advance. When we needed guidance we therefore had to read other scientific texts using the same method as us. This has lead to that our discourses may not always be what other persons would have found within the same material, and this mainly because there not always are clear cuts between where one discourse ends and another one starts. Also related to this is the fact that while coding our respondents’ statements and creating categories we are at the same time creating the reality that we try to study. To handle this problem we have tried to nuance the discourses so that they are not made more homogenous than they really are. However, since we had a very vast material this lead us to having to condense it to a great extent, which might have had a simplifying effect on our interpretations of the discourses.

The vastness of our material also lead to that there was much of it that we could not use, which is something we see as a disadvantage with the method. A lot of interesting facts
about the drug consumption in Colombia had to be left out of our analysis since it really
did not fit the purpose of the study, with another method it might have been easier to find
its place. On the other hand we are very pleased with the fact that we could conduct so
many interviews during such a short period of time and on the whole this has brought
more good things to the study than bad. When we were locating respondents for the study
we were hoping to get at least six interviews, but instead it resulted in fourteen interviews
(of which we used ten). Although we wished we could have had more time to research
and locate the key actors in the Colombian society, this was not a choice at hand and we
had to a large extent rely on the opinions of experts on the subject. A great risk with this
is that the actors we later came to interview not really are the most important in
Colombia, but rather the most important according to our informants on the subject.
However, as we consider them experts on the issue we decided that their opinions were
important and we tried to variegate them with other people’s observations.

The linguistic part of the study has made it far more challenging than it would have been
if we conducted it in Sweden. Because of Spanish not being our native language we are
aware of the fact that we might have missed things or that meanings have got lost in
translation. With this in consideration we do feel that the language spoken during our
interviews many times resembled one another and this made us gradually more sensible
to the meaning of the statements made by our respondents, and although some things
might have gotten lost we do not see it as anything affecting the study at large.

**Empirical discussion**

The respondents that mainly keep to the public health discourse work with treatment,
close to the consumer, and their philosophy is inspired by the Minnesota-model
(Alcoholics Anonymous) that considers addiction as a sickness. By the way of referring
to oneself as an addict within this model even though the person in question has not been
consuming for years it seems to function as a strong identifying characteristic. At AA-
meetings where people come together to speak of themselves and their addiction and
gain strength to stop the abuse you are considered an addict which confirms and
strengthens this identity. We interpret this as a way of simply giving the consumer an
identity as a way of controlling the abuse, but ask ourselves why this mark of
identification has to be constant? Are there no other roles available for identification, or
are other options this way neglected? What function does an identity of an ex-addict fill
for someone who has not consumed for years? Anyhow as this model is widely
recognised and practiced and can provide legitimacy to the treatment of the foundations,
which could be one of the reasons for this discourse. Viewing the consumer as a sick
person minimizes the stigmatization. This can be another reason for why this discourse is
fitting for the private treatment facilities that are trying to attract costumers, as it makes it
easier for the consumer/addict to enter a treatment that does not judge you. This is also
one of the reasons given why it is important for this discourse to reach hegemony in
defining the consumer. The government is also trying to establish this discourse all over
the country with the introduction of the new law forbidding all personal use
of drugs. This discourse is very similar to the methods of Alcoholics Anonymous and fills many of
the nodal points that we have recognized with the same content as this philosophy does.

The respondents that mainly keep to the deprivation discourse do predominantly work
with homeless people or on a more bureaucratic level with consumption of psychoactive
substances, not having any contact with the consumers. That they rather perceive
consumption as something related to the structures of society could be seen from two
different perspectives. The persons working with homeless people meet marginalised
consumers and therefore relate their consumption to their position in society. The conclusions they reach about drug consumption can be interpreted as a consequence of whom they come in contact with in their line of work, and since this is the consumption they meet this is also seen as the main problem. On the other hand the respondents working on the bureaucratic level by and large come to the same conclusions being able to look at drug consumption from an above perspective. They have access to all the empirical data and relate this to the responsibility of the state. However, these respondents are more bound to change discourses when they are speaking about different groups in society, since they also relate consumption to persons who are not homeless or marginalised but rather belong to the higher social classes. When speaking about this kind of consumption these respondents tend to change perspective and speak more in relation to the pleasure discourse.

The pleasure discourse is otherwise to a large extent a discourse formulated by the two of our respondents, namely the scholar and the representative from NGO 1. They do not have anything specific in common that can give them a characteristic that separates them from the other respondents but both see consumption much more as a personal choice than the other discourses, and they mainly address educated people from the higher social classes in society when they relate to consumption. In contrast to the public health discourse the consumption is not regarded as a marker of identity but instead seen as a part of a normal life. By this comprehension they tend to neglect the consumption among marginalised groups such as homeless persons, and when they do acknowledge it they tend to change discourse and describe consumption from the deprivation perspective. Relating to different types of consumption is nothing unusual, as other studies suggests it is possible to relate to diverse kinds of consumption such as the use among the young or among people injecting. What these discourses tend to do however is to neglect some types of use. The pleasure discourse seems to be grounded in opposition to the public health discourse and many times explicitly describes their opinions as being in direct contrast to their way of seeing consumption as addiction and addiction as a sickness. The reason for this can be interpreted as a way to make consumption possible without having to be pictured as something else than a person whoever. This discourse is also the only discourse that really recognizes the consumers’ own responsibility, the other two consider the consumer as a victim of external circumstances or of genetics.

All of the three discourses ascribe the consumers of psychoactive substances different identities, and to simplify it they can be described as if the public health discourse sees these people as sick, the deprivation discourse sees these people as marginalised and the pleasure discourse sees these people as whomever seeking recreation. Several of our respondents change between the discourses while relating to different kinds of people, e.g. if they speak about people from lower social classes they tend to adapt to the deprivation discourse and when speaking of people from higher social classes they rather look at consumption from a pleasure perspective. This means that in some way several different reasons can be found for consumption and that they to a large extent depend on your place in society. The distinction between social classes may be easier to make in Colombia as the social strata’s divide the population very clearly from strata 1-6. In another context it might be harder to distinguish the consumers this clearly. However, when the consumers are described from different discourses they also receive different features depending on what perspective they are seen from. This has implications for the consumers since the identity they are assigned results in different consequences for example concerning treatment or if you are considered able to consume psychoactive substances again. Hence, the consumer is treated in different ways depending on what
discourse is present. We see the reason for the existence of three struggling discourses to be that no discourse has reached hegemony in the Colombian society. This is probably affected by the fact that the question of consumption is relatively new in Colombia and that it is not considered the most important issue regarding drugs. However, as mentioned earlier the government is right now trying to establish the public health discourse in the country with passing the new law against a personal use of drugs that relates to the consumer as a sick person. This means that they in some way have the power to inflict sickness onto the consumers, a sickness that will never leave your body even if you stop consuming in a problematic way.

If stretched the three discourses could be seen to represent three different kinds of politics. The pleasure discourse could be perceived as a liberal one since it speaks of legalizing, because of the consumers own responsibility and the lacking consciousness of the societal consequences. In relation to this the deprivation discourse speaks of the consumer’s responsibility for the implications inflicted on society when buying illegal substances. This discourse may well be recognised as a more social democratic way of looking at consumption since it speaks about the states responsibility in relation to the drug issue. The public health discourse has, similar to the pleasure discourse, a much more personal perspective. Rather than seeing the personal freedom and responsibility they see the family’s (especially the fathers) responsibility, which could be interpreted as a more conservative political opinion.

Not all of our respondents speak about the sex of the consumer but when they do they speak of the consumer as a man, probably because the statistics tell us that it is most commonly men who consume in Colombia. Though no one problematizes the fact that it is mainly men that are consumers and we get no further explanation as to why men are more bound to consume. However, we interpret this as a masculinity problem. With this we mean that it could be a problem that has to do with the social interpretation of manhood. When we relate this to the fact that some of our respondents talk about the consumption of psychoactive substances, especially alcohol, as a cultural thing, we recognize that the male problematic consumption is a behaviour embedded in the Colombian structure. This culture does not only lead to consequences for the consuming male but can also have further implications for women with a problematic consumption, firstly because they become harder to discern and secondly because they are not normally acknowledged as problematic consumers. This could also result in the treatment for problematic consumers being adapted to the male consumers.

It seems almost self-evident to assume the consumption of psychoactive substances, and especially of cocaine or other substances produced in the country to the extent as in Colombia, to be more ample than that of other populations. But the production seems to have little to do with this, maybe these illicit drugs mainly are considered to be a commercial product for export? Instead alcohol is statistically proven to be the substance of choice in Colombia and is also recognized as the most problematic psychoactive substance by the professionals we have interviewed. This makes the question of consumption of psychoactive substances to seem to be a somewhat confusing subject. As alcohol is something that apparently is neglected by the law and a lot of preventional work seems to be directed in first hand toward illicit substances, efforts to combat drugs can be interpreted to be of a double nature. It seems as if the problematic domestic consumption has not been enough recognized and at least partly abandoned. We perceive this lack of attention from society to bring both advantages as disadvantages. The downsides of this being that it leads to a lack of resources and that people have
considered it as a problem only existing outside of Colombia. But on the other hand the lack of focus makes it easier to try new and experimental ways of working with the problem.

As the efforts have been directed toward an illegal drug economy the current work toward drugs in Colombia can be interpreted as being influenced by Europe, and especially by the U.S since they also contribute economically to the work towards drugs carried out in Colombia (through 'Plan Colombia' for example). It does not seem, further concluded by a lot of critical authors and investigators, too far fetched to assume that Colombian drug politics is somewhat created to fit foreign preferences. These actors have furthermore identified the production of illicit drugs to generate problematic drug consumption far away from the origin when smuggled over boarders. In this way all consumption is considered problematic and can be interpreted as not having other genesis than the actual access of the substance. But usually the markets way of working is explained the other way around, i.e. that the demand is what controls it and not the supply. This makes it not only tempting to question who is controlling the drug politics of Colombia but also the way of how Colombia is looked upon in terms of what part they play in the global drug problem. Is it, as a few of our respondents mean, incorrect to consider some countries as merely consumers or producers? Is there, as the “Latin American Commission on Drugs and Democracy” suggests, a need for a paradigm shift influenced by voices from the south? We also ask ourselves, is one group of key actors in the discourses on drugs and drug consumption actually actors outside the Colombian context? Maybe the standards of how consumption of psychoactive substances should be considered are set, or at least at large influence by professionals in the U.S and Europe.

Areas for further investigation
We have found the topic of our study to be highly relevant in this country, and specifically at this point of time. Things are changing both in the rising consumption levels but also in the government’s perception of how the consumers of psychoactive substances are considered. It is obvious that the matter of drugs is an always-present matter of interest in Colombia, but since the last couple of years the interest of consumption has also started to prosper. We believe that several interesting studies could be carried out in relation to this and to the results we have reached in this study. From our personal experiences in Colombia we have become interested in knowing more about the consumers. The people we have met and the friends we have made are many times from the higher social classes with well-paid jobs and many of them consume illegal drugs from time to time and we wonder how they do perceive themselves? Do they define themselves as consumers and which, if any, of the discourses we have found would they relate their consumption to?

We would also like to know more about what consequences the perception of producing and consuming countries results in and what it is based on. For example why is Europe considered a continent where only consumption is carried out when the greatest part of the synthetic drugs are produced there? And does this division create a politics against drugs based on false premises?

A study that would be interesting to carry out further on would also be to see what consequences the new law and the attempt by the government to establish a public health discourse brings, if the affects for the consumers will be different and if the public opinion on drug consumption will change. Also, will it have the affect of lowering consumption and raising the public health in the Colombian society?
A topic that lies a bit further away from our study that we consider as highly interesting is the drug tourism that exists not only in Colombia, but also in other Latin American countries such as Peru and Bolivia. We think that it would be interesting to understand whom these consumers are, why they decide to go to another country with the main purpose of consuming drugs and if their consumption is generally extensive or if it changes when outside of their own country. All in all we find numerous subjects of further interest to study considering the consumption of psychoactive substances, as the area is both recent and in some way neglected.
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Appendix 1

Interview guide

Drugs and policy
What do you consider as drugs?
Do you regard that there are differences between different kinds of drugs?
   - e.g. some are more dangerous than others?
Do you regard that there is a difference between alcohol and drugs?
   - in that case, what?
What do you regard as the main issue concerning drugs?
   - do you see any solutions to this?
Do you think the production of drugs in the country affects the consumption?

Society and prevention
What do you regard as the main issue concerning drugs for society?
   - do you see any solutions to this?
How would you say drug consumers are looked upon?
How would you say that society treat people who consume drugs?
Do you think it is important to try to prevent people’s use of drugs?
Do you think that the laws concerning drug use/abuse fulfil their purpose?

People and treatment
Do you think that there is a difference between peoples way of consuming drugs?
Do you think that there is a certain point when drug consumption is to consider as a problem?
What do you regard as the main issue concerning drugs for the individual consumer?
   - do you see any solutions to this?
How do you think that people with drug problems should be treated?
   - are there any differences between treating different people?
Do you think some interventions are missing among actions taken today?
What do you consider the main cause of people’s use of drugs?
Estimado Señor/a,

Somos dos estudiantes de la Universidad de Estocolmo en Suecia. Estamos en Colombia para concluir nuestros estudios de trabajo social. Para hacer esto queremos ver la situación para drogadictos en el país, y vamos a intentar a comprender como consideran los drogadictos. Es por eso que queríamos hacer entrevistas con gente que tengan contacto con este asunto en alguna manera. La participación es voluntaria.

Las entrevistas serán confidenciales. Nadie será capaz a identificar Usted después de la entrevista se realiza.

Si Usted tiene preguntas, no dude en contactarnos en el futuro.

Saludos,

Josefin Månsson y Meilin Hedén

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