



The Drug War Across Borders: US Drug Policy and Latin America

How is Latin America affected by the U.S. war on drugs?

The war on drugs is fought on two fronts: at home and abroad. On the domestic front, policymakers attempt to reduce American drug use through the criminal justice system by coercing and punishing people who use or sell drugs. On the international front, the U.S. sponsors military and police efforts to combat the production and export of illegal drugs from other countries. These strategies are known, respectively, as “demand reduction” and “supply reduction.”

Latin America, which produces nearly all of the heroin and cocaine consumed in the United States, is the principal target of U.S. international drug war efforts. Over the past 15 years, the United States has spent more than \$25 billion on the two main supply reduction methods: interdiction and crop eradication. Interdiction refers to attempts to seize drugs at the border or while they are en route to the United States. Eradication refers to attempts to eliminate drug crops – the plants used to make cocaine and heroin, for example – while they are being grown. The most controversial method of eradication, employed principally in Colombia, is “aerial fumigation” – the spraying of poison from military-escorted airplanes onto farms that grow coca (the plant from which cocaine is derived) or opium poppies (from which heroin is made).

Does source-country “supply reduction” work?

No. The drug war has consistently failed to reduce the supply of drugs from Latin America. Despite decades of aggressive policies in Latin America and at the U.S. borders, illegal drugs such as heroin and cocaine remain cheap, pure and readily available on U.S. streets.

Though eradication may temporarily reduce drug crop production in one particular area, it almost always leads to increased production in other countries and areas. This is known as the “balloon effect”; pushing down production in one place simply pushes it up in another. Undiminished demand for drugs, combined with the nearly inexhaustible supply of cultivatable land and extremely high levels of poverty found throughout Latin America assure that new producers will arise to fill the void. For instance, in the mid-1990s, U.S. efforts led to a 66 percent reduction of coca cultivation in Peru and a 53 percent reduction in Bolivia while cultivation doubled in Colombia. The net amount of cocaine exported by the region as a whole was not significantly changed.

Does interdiction at the U.S. borders work?

Interdiction schemes largely fail. The sheer scale of the U.S. borders and the constantly improving tactics of profit-driven drug smugglers make illegal drugs a very tiny needle in a very large haystack. It is a nearly hopeless task to prevent easily concealable substances such as heroin and cocaine from coming in through more than 12,000 miles of shoreline, 300 ports of entry and more than 7,500 miles of border with Mexico and Canada. By optimistic estimates, interdiction efforts only seize 10 to 15 percent of the heroin and 30 percent of the cocaine coming into the United States.

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Furthermore, increased interdiction attempts at the border drive drug importing toward more potent versions of drugs. In order to reduce the risk of detection, drug exporters have an incentive to create versions of drugs that can be compacted into smaller spaces or to import drugs that naturally have a higher potency. This provides the greatest “bang for the buck” while lessening the chances of detection. Often these more concentrated versions are more dangerous and potentially addictive than their less concentrated counterparts.

What harmful effects does drug prohibition have within countries in Latin America?

U.S.-enforced drug control efforts in Latin America help fuel violence, lawlessness, corruption and instability throughout the region. Drug prohibition creates a vast illegal market for drug production and distribution, enriching and empowering organized criminals, corrupt government officials and warring factions. The staggering levels of crime and corruption generated by the illegal drug trade in Mexico are among the most dramatic examples of social crises caused by prohibitionist policies. In Bolivia, the violence and economic hardship caused by the military suppression of coca production have threatened the country’s fragile democracy. And in Colombia, nearly all of the armed actors in the brutal, decades-old civil war have derived profits from the drug trade. The list is very long.

What harmful effects does supply-reduction in Latin America have on environmental and human health?

Anti-drug fumigation, such as that carried out with U.S. financial and military support against coca and poppy crops in Colombia, has caused documented harm to human and environmental health. Though it is intended to affect only drug crops, the spraying is too imprecise to ensure that people, livestock and food crops are not affected. The label of Roundup, an herbicide produced in the United States by Monsanto Co., warns the user to “keep herbivore animals such as horses, cows, sheep, rabbits, turtles, and birds out of the treated area for at least two weeks.” Disregarding these warnings, thousands of gallons of Roundup are sprayed in the diverse and fragile Colombian jungles in order to eradicate coca and opium poppy crops.

The devastating effects of such spraying on the human populations include respiratory problems, skin rashes, vomiting, premature births and miscarriages. In addition, eradication often leaves desperately poor farmers – who never see the large profits enjoyed by traffickers – with few economic alternatives to support their families.

What harmful effects does drug prohibition have on immigration policy and U.S. immigrant populations?

Many immigrants and their families have fallen victim to a 1996 immigration law mandating deportation for non-citizen immigrants with any criminal conviction, including for low-level nonviolent drug offenses, even if the convictions took place prior to the law’s passage. Since 1996, thousands of immigrants have been deported, many for decades-old drug convictions. Families are faced with a near-impossible choice: to lose loved ones or to leave their homes.

U.S. interdiction efforts increasingly threaten the lives and livelihood of Mexican day laborers. Heightened border security measures, made even tighter due to the war on terrorism, have turned daily trips across the border to work – a years-long practice for some – into a life-threatening exercise.

Aside from the increasing number of border-crossing workers being detained, the crossing itself has become more dangerous. Many suffer from heat stroke and heat exhaustion or even die of dehydration caused by staying in overheated trucks for too long without water or from having to cross the border in areas without cover because they are not under as heavy surveillance as others. Many people who need work have taken to crossing the border by vehicle. Aside from the financial cost of such transport – often resulting in substantial debt – people are increasingly required to carry drugs as part of the cost of their passage. Often described as “mules,” workers run the risk of criminal and/or Immigration & Naturalization Service sanctions, as well as potential health ramifications when the drugs are transported within the body.

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Where should the United States focus its drug control efforts?

U.S. domestic drug-related problems are exactly that: U.S. problems. U.S. drug policies should focus on developing effective approaches to reducing the demand for and abuse of drugs at home through effective drug treatment and education strategies, not failed and harmful interventions at the border and abroad. The long-term goal of drug policy reform is the adoption of a hemispheric drug control philosophy based on public health and regulation rather than prohibition and punishment. Such a philosophy would abandon the failed supply reduction/demand reduction strategies of today, acknowledging that drugs and drug abuse have persisted and will persist, both in the United States and in Latin America, for the foreseeable future. It would replace the relationship of antagonism and blame between North and South with one of genuinely productive cooperation. And it would be based on the same principles reformers advocate domestically – a commitment to reduce the harms of both drug use and drug policies as effectively as possible while maintaining a strong commitment to individual and national sovereignty.

Latin Americans should be supported in their efforts to reduce the harms caused in their countries by drug prohibition and drug abuse – not punished by U.S. drug warriors looking for someone to blame. They must have all options, including decriminalization or taxation and regulation of the drug trade, open to debate. A short-term goal of drug policy reform in Latin America is to broaden and amplify such a debate among the press, public and policymakers.

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