

Research paper

Attitudes towards drug policies in Latin America: Results from a Latin-American Survey[☆]

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ABSTRACT

Background: In recent years Latin American countries have increasingly rejected the traditional prohibitionist paradigm of drug policy, reflecting its failure to reduce either consumption or trafficking. The extent to which these policy trends currently command public support is unclear, however. This article goes some way to filling this gap, providing a snapshot of public attitudes towards drug policies in nine Latin American countries.

Methods: The 2014 Annual Survey of the Observatory of Drug Policies and Public Opinion, which has representative population samples, was used to measure public opinion. Country comparisons are made using descriptive and inferential statistics.

Results: Countries fall into three groups: Peru, Bolivia and El Salvador are the most conservative countries on drug policy and perceptions of risks of cannabis use; they also score lowest on Human Development Index. On the other hand, the public in Chile and Uruguay are more likely to support drug policy reform. The remaining four countries (Argentina, Colombia, Mexico and Peru) tend to occupy the middle ground between these extremes. In addition, cannabis legalization is explained by its recreational use, being this the main meaning attached to cannabis policy among Latin American citizens.

Conclusion: There is a significant heterogeneity in attitudes towards drug policies in Latin American countries, which suggests that people are questioning the policies that set the norm in Latin America without achieving any consensus regarding future measures for each country.

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Introduction

Drug policies in Latin America have focused on the prohibition of drug consumption and trafficking since the early 20th century. Cannabis is the most commonly used illicit drug in Latin America (with the possible exception of coca leaf in some countries) with prevalence rates between 4% and 13% (Comisión Nacional Para el

Desarrollo y Vida Sin Drogas, 2012; Comunidad Andina, 2013; Fleiz, Borges, Rojas, Benjet, & Medina, 2007; Gobierno Nacional de la República de Colombia, 2014; Instituto sobre Alcoholismo y Farmacodependencia, 2012; Observatorio Argentino de Drogas, 2010; Observatorio Interamericano sobre Drogas, 2011; Observatorio Chileno de Drogas, 2013; Observatorio Uruguayo de Drogas, 2012). Cannabis is certainly the most commonly used psychotropic drug world-wide (United Nations Office on Drugs and Crime, 2014).

In most of the countries of the region, trafficking of most psychotropic drugs is illegal. All nine countries covered by this study – Mexico, Colombia, Perú, Bolivia, Uruguay, Chile, Argentina, Costa Rica and El Salvador – are signatories to the 1988 United Nations Convention against Illicit Traffic in Narcotic Drugs and Psychotropic Substances, and all have legislation that criminalises

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the production and distribution of drugs listed in the three UN conventions. However, many South American countries tolerate chewing of coca leaf – and most accept this among indigenous groups – and the Bolivian President, Evo Morales, in particular has called in 2009 and 2011 for the removal of chewing of coca leaf from the list of proscribed activities in the Single Convention of 1961.

The legal status of drug possession (or consumption) varies: in El Salvador, Colombia and Bolivia it is still a criminal offence—though there may be some informal decriminalisation.¹ In Argentina too, possession is prohibited by law, though the relevant legislation was declared unconstitutional in 2009 (Monroy, 2013). Mexico has decriminalised possession of small amounts of cannabis, cocaine and other drugs listed by the UN conventions. Uruguay never criminalised possession of cannabis for personal use, but has legalised cultivation, distribution and use of cannabis, accompanied by a firm – but only partially implemented – regime of state regulation (Pardo, 2014), following the reform process driven by the former president José Mujica. Legalisation or decriminalisation is under consideration in Chile, where possession of small amounts of some drugs is already informally decriminalised and where the biggest medical cannabis farm in Latin America is located. Peru has a statute that specifies volume thresholds below which possession of a single type of drug is decriminalised. Costa Rica appears to have decriminalised possession for personal use of small amounts of cannabis.

Thus there is a very clear direction of travel across Latin American countries towards forms of liberalisation of the drug laws. The main underpinning argument for reform has been that the prohibitionist approach has proved inefficient and ineffective (Pardo, 2010), with a sustained international growth of drug trafficking, and the progressive enrichment of drug-dealing organizations (Cartay, 1994). The other main argument used by reformers relates to the systemic violence that accompanies trafficking, contributing to the high rates of homicides and other indicators of violence in countries like Mexico, Colombia and Bolivia. In Mexico, during the presidential term of Felipe Calderón, violence increased despite tough drug enforcement strategies (Shirk, 2011). A commonly used argument is that prohibitionist policies increase the competition between criminal organisations, which in turn triggers violence. The empirical evidence supports this argument² (Werb et al., 2011).

This article focuses on public attitudes towards cannabis use, as this is clearly the drug where there is the most realistic prospect of reform. The article proceeds as follows. First we consider what is already known about public opinion in Latin America about cannabis and its control. We then set out the aims, and (in brief) the methods of the study. We then present the headline findings, first comparing opinion across the ten countries towards legalisation. We then present findings on perceptions of relative risks of cannabis, alcohol and tobacco, and findings on enforcement strategies. A further section examines the demographic and country predictors of attitudes. The paper concludes by setting the finding in an international context and drawing out the policy implications.

¹ We use the term decriminalisation to include any form of non-enforcement that falls short of legalisation. Decriminalisation can be informal (where police simply 'turn a blind eye' to offences), or can be subject to formal rules. Some jurisdictions use depenalisation to mean the same thing.

² Among the countries that took part of this research, El Salvador and Colombia show the highest homicide rates, with 41 and 31 homicides for every 100,000 inhabitants respectively (The World Bank, n.d.). In the rest of the countries, Chile, Argentina, México, Bolivia, Peru, Uruguay and Costa Rica, homicide rates are 3, 6, 22, 12, 10, 8 and 9 respectively.

Public opinion on cannabis in Latin America

Historically, two interrelated strands of opinion can be identified in Latin American opinion about cannabis (and illicit drugs more generally). The first dimension relates to the perceived value of the 'war on drugs', that is, efforts to reduce the production, trafficking and consumption of drugs. The second dimension relates to the risks to users of drug consumption, strategies for reducing use and reducing the damage done by drug use and local drug markets to communities in terms of personal health and community safety (Arriagada & Hopenhayn, 2000; Hopenhayn, 2002).

The dominant popular image of cannabis that emerged in Latin America in the 1970s, and continued certainly until the turn of the century, was of a highly destructive threat that demanded urgent action. The threat was mainly associated with youth and crime, and consumers were stigmatized (Del Olmo, 1989; Folgar, 2003). It was also considered to be a major social problem – along with corruption and political violence – and a growing problem—even though prevalence statistics do not indicate this (Arriagada & Hopenhayn, 2000).

Since 2000 there have been signs of a progressive shift away from this negative view of cannabis, and from the view that prohibition and tough enforcement is the solution to trafficking and consumption (Sanjurjo, 2013). The debate on drug policy, especially in Chile, Mexico and Uruguay, has moved gradually from the image of drug use as a disease that corrupts the social fabric, to a perspective based on harm reduction and on the need for liberalization of cannabis legislation. There has been a shift towards an approach that respects the autonomy and integrity of individuals who choose to use cannabis and rejects the prohibitionist approach (Sanjurjo, 2013). The clearest example of this shift can be found in Uruguay's decision to legalise and regulate production, supply and consumption, and thus undermine illicit drug markets (Rovira, Decia, & La Rosa, 2014).

Another factor that has influenced changes in the perception of cannabis and other drugs is the status of different countries as producers of drugs. In the 1990s, for example, support for prohibitionist policies among the Colombian public was increased by terrorist atrocities associated with the drugs trade, but eroded by evidence of political corruption and complicity with the drugs trade within the justice system. Traffickers had a degree of success at this time in delegitimizing the regime by pointing to widespread violation by politicians or officials of laws and regulations (Thoumi, 1995). More recently, however, the sheer scale of violence associated with the drugs trade and with enforcement action against it has been a more important factor in turning Colombian public opinion against prohibitionist policies (Restrepo, 2013).

Peru, one of the largest producers of the drug industry, represents a different situation because major drug traffickers have not been closely integrated into society, and have no leverage over public opinion; and thus there is no special sympathy towards them (Castro, 2005).

There is enough research on public opinion on cannabis and other drugs to chart the basic dynamics of attitudes. Historically, across Latin American countries prohibitionist policies drew support from public concern about the threats posed by illicit drugs—but this support has waned in the face of evidence about ineffectiveness of enforcement strategies, and growing evidence that prohibitionist strategies amplify the violence associated with trafficking. What is lacking, however, is a proper comparative account of contemporary public opinion in Latin America, at a time when political thinking is shifting quite rapidly towards liberalization of cannabis legislation.

Aims and methods of this study

The overall objectives of this study are: to provide reliable comparisons across the nine countries of the public appetite for legalizing or decriminalizing cannabis use; to describe attitudes towards the risks presented by cannabis use, relative to tobacco and alcohol use; and to chart attitudes towards enforcement and control of cannabis use.

Methodology

Analyses are based on the data from the 2014 Annual Survey of the Observatory of Drug Policies and Public Opinion, which was carried out in Buenos Aires (Argentina), Sucre (Bolivia), Santiago (Chile), Bogotá (Colombia), San José (Costa Rica), San Salvador (El Salvador), Ciudad de Mexico (Mexico), Lima (Peru) and Montevideo (Uruguay). For each city, probabilistic samples were used, with a total of 8.952 respondents. In the first stage, blocks were selected randomly. In each block, ten households were selected, selecting a house using systematic sampling. In each of the ten households, a subject whose age was equal or more than 18 years was selected using a Kish grid. For the whole sample, the sampling error was $\pm 1.0\%$, with a 95% confidence interval.

Interviews were conducted face-to-face in the home. The interviewer explained the objectives of the survey and emphasized that the data were anonymous and confidential. In Buenos Aires 988 respondents were surveyed, in Sucre 995, in Bogotá 991, in Lima 986, in Montevideo 981 and in Santiago de Chile, San José, San Salvador and Ciudad de Mexico, 1.000. Half of the sample (50%) were women, and respondents' average age was 34.6 (SD = 13.57).

The questionnaire had a modular structure, covering a range of topics, including well-being and perceptions of police legitimacy, but the analysis presented here considers only attitudes towards drug policies. This module consisted of a battery of nine questions, the main topics being³:

- *Attitudes towards legalisation:* Considering production, selling, therapeutic and recreational use of cannabis
- *Perceptions of risks associated with cannabis use (including comparable items on alcohol and tobacco)*
- *Attitudes to police and military intervention, and prosecution of drug consumers:* Considering perceived effectiveness of military intervention and the role of the police.

We compared countries largely using descriptive statistics. Chi square tests were used to analyse the association between categorical variables and t tests and analysis of variance (ANOVA) were used to compare means between interval variables.

Results

Attitudes towards legalisation

Respondents were asked if they had ever consumed cannabis, to provide context for interpreting attitudinal differences between countries. Fig. 1 shows an evident difference in cannabis use between countries ($\chi^2 = 534,797$, $p < 0.001$), with Argentina and Chile having higher proportion of people who have tried cannabis, and Bolivia and Peru having strikingly lower lower levels. Differences between countries in experience of cannabis use will surely be reflected in collective knowledge about cannabis, which may explain some of the differences that emerged in attitudes towards legalisation.

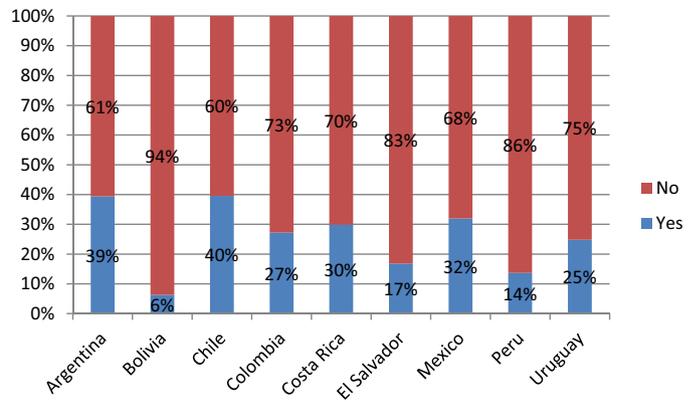


Fig. 1. Consumption of cannabis.

Notes:
Question: "Have you ever consumed cannabis?"
Unweighted n = 8945.

Questions on legalisation took two forms. First, respondents were asked if recreational use of drugs should be a personal right. Fig. 2 shows large and highly statistically significant difference between countries ($\chi^2 = 464.581$, $p < 0.001$). Large majorities in Uruguay and Mexico see recreational use as a right, compared with under a third in El Salvador and Bolivia.

Respondents were then asked about the legalisation of cannabis, first in general, and then in relation to recreational and therapeutic use. Fig. 3 shows the percentage of respondents "agreeing" or "strongly agreeing" with the statement "Cannabis should be legal" and Fig. 4 shows support for therapeutic and recreational use of cannabis on a 10 point scale. Country rankings are similar (but not identical) to the question about recreational use as a right. In all countries there is more support for legalising therapeutic use than for legalising recreational use, which has more support than overall legalisation. Based on an ANOVA test, the differences between countries are statistically significant, with $F = 153.128$, $p < 0.001$ ("cannabis should be legal"), $F = 102.451$, $p < 0.001$ (therapeutic use of cannabis) and $F = 102.451$, $p < 0.001$ (recreational use of cannabis). These differences are similar when separating those who have tried from those who have never tried cannabis (Fig. 5).

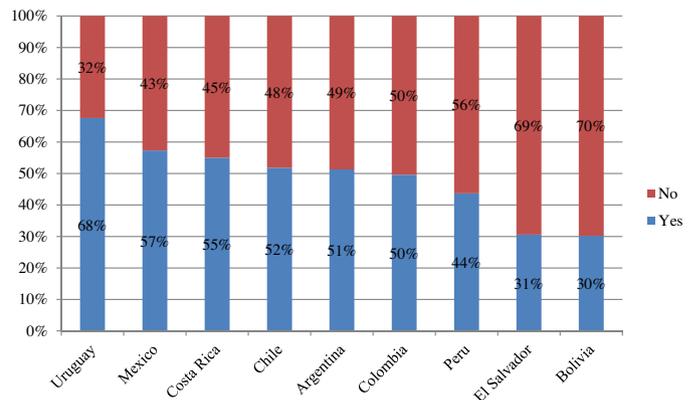


Fig. 2. Agreement with recreational use of cannabis.

Notes:
Question: "Do you think that recreational use of drugs should be an individual right?"
Unweighted n = 8952.

³ The full questionnaire is available on request from the authors.

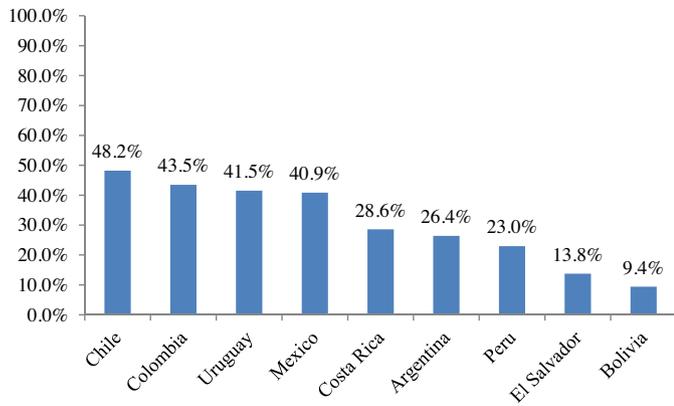


Fig. 3. Percentage of respondents agreeing that cannabis should be legal.
 Notes:
 Question: “How much do you agree with the following statement?” Cannabis should be legal.
 N = 8693.
 Scale runs from 1: strongly disagree to 5: strongly agree. Only 4 and 5 considered.

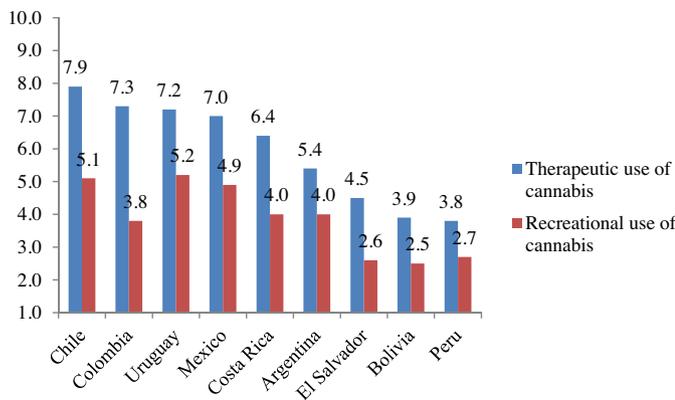


Fig. 4. Support for therapeutic and recreational use of cannabis.
 Notes:
 Question: “How much do you agree with the following statement?” Therapeutic use of cannabis/recreational use of cannabis should be legal.
 N = 8696, 8696.
 Scale runs from 1 = strongly disagree to 10 = strongly agree for therapeutic use of cannabis/recreational use of cannabis.

Perceptions of risk

Respondents were asked about the risks of cannabis, alcohol and tobacco use, enabling comparisons to be made of perceived

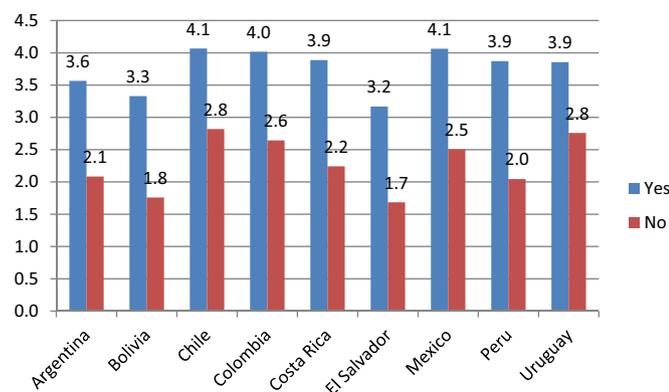


Fig. 5. Support for legalization of cannabis (have tried/have not tried).

relative risks. The results are surprising, given how previous work has found that people in many Latin American countries associate cannabis with serious risks. Fig. 5 shows that the average score for risk of cannabis is lower than for both alcohol and tobacco in six of the nine countries, and are higher than both alcohol and tobacco only in Peru and Bolivia. Majorities in all countries rate risks for all three drugs as high, however, at least by reference to the theoretical means of the scales. Despite these fairly homogeneous results, there are statistically significant differences between countries in perceived risks of cannabis ($F(8,8683) = 107.550, p < 0.001$). There are also statistically significant differences in perceived risks associated with the three drugs. When comparing alcohol and cannabis, the difference between their means is statistically significant, $t(8698) = 10.792, p < 0.001$; the same occurs when comparing cannabis and tobacco, $t(8707) = 11.385, p < 0.001$ (Fig. 6).

A question about the links between cannabis use and crime showed very large variations across country. In El Salvador and Bolivia, large majorities (70% and 68%) saw a direct connection between cannabis use and committing a crime, while in Uruguay and Argentina quite small minorities (24% and 29%) did so only did so. There is a relationship between country of origin and thinking there is a connection between cannabis use and committing a crime with $\chi^2(16, N = 8952) = 1170.247, p < 0.001$.

Attitudes towards police and military intervention

Table 1 summarises attitudes towards police and military intervention as ways of tackling drug use. Regarding police intervention and prosecution of illicit substance users, respondents in Mexico were more likely than others to declare that it is “a policy that is not effective for reducing drug use”, at 51%, followed by Colombia (47%) and Chile (41%). By contrast, a large majority of Bolivians (80%) thought that police enforcement strategies were moderately or very effective. There is a statistically significant association between the country of origin and this variable, with $\chi^2(24, N = 8952) = 878.429, p < 0.001$.

Regarding military intervention to tackle drug trafficking, large minorities in Chile (49%), Colombia (42%), México (41%) and Uruguay (40%) thought that this was “a policy that is not effective for reducing drug use”. By contrast, around a third of respondents thought that military intervention is “the most effective way for reducing drug use” in Bolivia (35%), El Salvador (31%) and Peru (28%). There is a statistically significant association between the country of origin and this variable, with $\chi^2(24, N = 8952) = 949.935, p < 0.001$.

4. Discussion

In the introduction of this paper, we referred to a ‘clear direction of travel’ in reform of cannabis legislation in Latin America. The results of this survey show that this direction of travel is not reflected in a uniformity of public attitudes towards cannabis across the nine countries included in our survey. There were large variations across country in support for cannabis legalisation, and conversely in support for police and military enforcement strategies. At the liberalising end of the spectrum, depending on which question one focuses on, are Chile, Uruguay and Mexico. Opinion tended to be much more conservative in Peru, Bolivia and El Salvador. The only question where we found marked consistency across country related to the relative risks associated with cannabis, tobacco and alcohol—where most people in most countries rated cannabis as no riskier than licit drugs. Even then, there were statistical differences between countries. There is also a striking – if unsurprising – relationship between toleration of cannabis use and the consumption of it: countries that more liberal

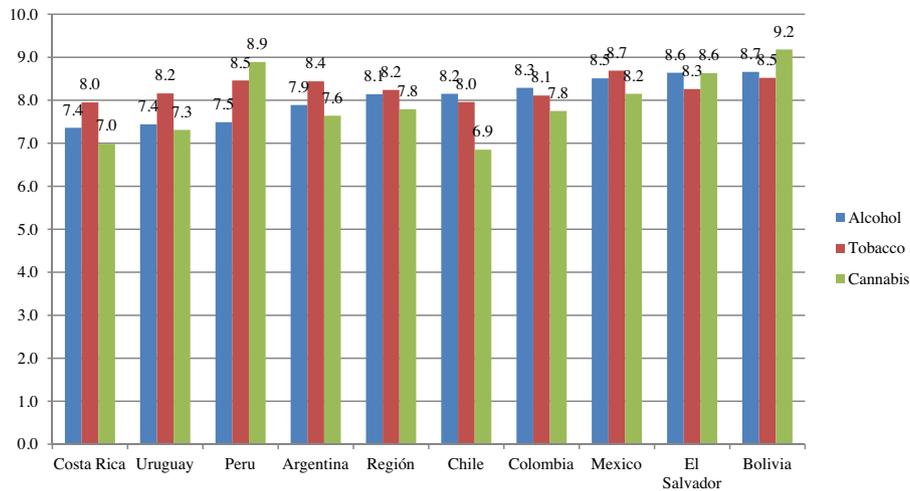


Fig. 6. Perceived risks of alcohol, tobacco and cannabis.

Notes:

Questions: On a scale from 1 to 10, where 1 means “not dangerous at all” and 10 means “totally dangerous”, how dangerous do you consider consuming [Alcohol, Tobacco, Cannabis].

N = 8859, 8852, 8717.

Scale runs from 1 = not dangerous at all to 10 = totally dangerous.

Table 1

Enforcement policies as ways of reducing drug use.

	Police intervention/prosecution of drug consumers ^a			Military intervention to tackle drug trafficking ^b		
	Not effective (%)	Moderately effective (%)	Most effective (%)	Not effective (%)	Moderately effective (%)	Most effective (%)
Argentina	40	46	15	32	48	20
Bolivia	21	59	21	16	49	35
Chile	41	47	12	49	37	13
Colombia	47	44	10	42	47	11
Costa Rica	37	58	6	39	53	8
El Salvador	37	36	27	33	36	31
Mexico	51	44	5	41	51	8
Peru	16	44	20	15	57	28
Uruguay	38	51	11	40	41	19

Questions: (a) “What do you think about police intervention and prosecution of drug consumers as a policy with the objective of reducing drug consumption?” (b) “What do you think about military intervention in order to support the solution to drug trafficking?”

N^a = 8902, N^b = 8825.

tend to have higher levels of use (above 25%) and countries that are less liberal tend to have lower rates of use (under 17%). It might be tempting to relate this to the fact that at the time of this survey governments in Chile and Uruguay were from the left wing. However, Bolivia’s government was also from the left wing and Mexico’s government was from the right, so there appears to be no obvious or direct relationship with the politics of the parties in government. There are, however, associations between public tolerance of cannabis use and political initiatives reforming drug legislation: Uruguay has legalized cannabis and this is also under discussion in Chile and Colombia. It is beyond the scope of this paper to say whether legislative reform drives public opinion, or whether opinion shapes reform—though in all probability there is likely to be a dynamic interaction between the two. It is interesting to note that the peace process in Colombia between the government and FARC is intertwined with initiatives to tackle drug trafficking; and trafficking is still a significant issue in Mexico, where, according to our results, public opinion on cannabis tends to be more liberal.

The countries where public opinion is most conservative and resistant to liberalisation – Bolivia, El Salvador and Peru – have the

lowest Human Development Indexes among the countries included in the survey; and at a country level there was a marked correlation between support for legalization of cannabis and scores on Human Development Indexes ($r(9) = 0.772$; $p < 0.01$). This apart, we did not identify other country-level factors that clearly predicted conservatism in relation to drug policy. These three countries were not outliers on homicide rates and victimization rates, for example. However, it is noteworthy that countries with high levels of systemic violence associated with drug trafficking, such as Mexico and Colombia, have low levels of public support for military and police enforcement strategies. This suggests that in countries where trafficking is evidently problematic and resistant to enforcement solutions, people are prepared to contemplate reform. However, similar support for reform was found in Chile, whose trafficking problems are relatively low.

In all countries, support for legalization of cannabis is mainly associated with recreational use, and secondly, to therapeutic use. There is less support for total legalisation. Thus, citizens from the nine participant countries essentially refer to recreational use when they are asked about cannabis regulation policies. This finding is important for an accurate understanding of the debate in

Latin America about drug policy reform. Therefore, in assessing public opinion, policy makers should be mindful of how the general public conceptualise the issues. These results suggest that people are increasingly questioning drug policies in Latin America, but that there is no public consensus regarding future policies and measures for each country. Drug policy seems likely to develop and evolve – towards liberalisation – but it would probably be wrong to assume that public opinion will, at least for the time being, drive such changes.

It is worth noting that that results regarding support for legalization are lower than the ones observed by the Observatorio Latinoamericano de Políticas de Drogas y Opinión in previous years (2012) where support for legalization was 28% in El Salvador, 39% in Colombia, 42% in Bolivia, 54% in Mexico, 71% in Chile and 73% in Argentina. However it is impossible to say whether the difference represents a real trend, or is simply an artefact of different methodologies.

Comparisons with the United States and Europe

It is tempting to compare these results to findings from the United States and Europe. There are problems of comparability, and what we have concluded here is tentative. However, it would seem that public opinion in Latin America seems broadly comparable to that in the US and Europe on several dimensions.

First there is significant support for legalisation of cannabis in both the US and Europe. In the United States, support for legalization of cannabis stood at 48% in 2010 and 55% in 2014 (Smith, Marsden, Hout, & Kim, 2015). In Europe, a 2006 survey of the general population showed that 68% opposed the legalization of cannabis in Europe, compared with 26% that agreed (European Commission, 2006). Secondly, there are large variations within Europe by country (and the same is very probably true for US states). Support for continued prohibition stood at 86% in Romania and 72% in Latvia and Cyprus, compared with the European average of 68% (European Commission, 2006). Finally, and predictably, the correlates for support for liberalisation seem consistent across continent, with stronger support among young people and the better educated (European Commission, 2014; Smith et al., 2015).

Further research into Latin American public opinion

Clearly the picture that we have presented here needs to be developed and fleshed out. We included only nine countries out of a total of nineteen mainland Latin American countries; a notable gap is that we have no findings for Brazil—an important Latin American country in terms both of the percentage of the population in the region and its economic scale and political scale. It should also be stressed that we used city-level samples, rather than nationally representative ones. Although all samples are representative at a capital city level, it seems probable that opinion in less urban areas could be more conservative, especially in countries where production of drugs is higher, such as Mexico, Bolivia or Perú.

Secondly, the quality of survey design in this field can almost certainly be improved. Responses have been shown to be context-dependent, and heavily susceptible to wording effects (cf Rise & Halkjelsvik, 2015). Our wording of questions, which asked questions along the lines of whether drug use should be *allowed*, may have elicited lower support for liberalising reform than questions asking whether drug use should be *forbidden*. Clearly, there is a role for more experimental variation of question format in survey research in the field, as well as qualitative work doing cognitive testing.

Finally, this is clearly a topic on which public opinion is likely to change rapidly, both in response to policy developments and as different forms of drug become more or less popular. It is clearly important to ensure that there is reliable trend data about Latin American opinion.

Conflict of interest

The authors have no conflict of interest to declare.

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