

Nationalism, immigrants and attitudes towards drugs

Arthur Gould *

Department of Social Sciences, Loughborough University, Loughborough, LE11 2HD, UK

Received 30 September 1997; accepted 31 December 1997

Abstract

A number of writers on drug issues have commented upon the link between attitudes towards drugs and attitudes towards immigrants and ‘the foreign’. This paper summarises some of this literature and goes on to provide recent survey evidence of this link. In a discussion section, it is suggested that the ‘banal’ but deep-rooted nationalistic fears which underpin international and national drug policies need to be challenged. While researchers and policy-makers can try to ‘normalise’ attitudes towards drug-taking, ultimately it is drug-takers themselves who must take a political stance. © 1998 Elsevier Science B.V. All rights reserved.

Keywords: Immigrants; Nationalistic fears; Political stance

1. Introduction

In her book about cancer, Sontag wrote:

“Any important disease whose causality is murky and for which treatment is ineffectual, tends to be awash with significance. First the subjects of deepest dread (corruption, decay, pollution, anomie, weakness) are identified with the disease. The disease itself becomes a metaphor (Sontag, 1991).”

While the status of ‘drug addiction’ and ‘drug abuse’ as diseases may be a matter of dispute, there is no doubt that for many people they are just that. As ‘illnesses’ their causality is ‘murky’, the treatment for them is often ‘ineffectual’ and they are certainly ‘awash with significance’. A principle justification for the prohibition of drugs is the fear that drug abuse will spread throughout society like an epidemic. In this paper, I would like to argue that illegal drugs have become a metaphor for our fear of the ‘foreign’. While it may be unfashionable and even illegal to criticise immigrants and refugees for ‘flooding into our country’ and for ‘destroying British culture with their strange cultures and alien ways’, it is perfectly legitimate to attack foreign drugs for the same reasons.

* Tel.: + 44 1509 223363; fax + 44 1509 223944.

In the first part of the paper, the observations of a number of writers-made in different countries at different times-concerning the association between illegal drugs and fears of the foreign, will be discussed. In the second part, the results of the recent British Social Attitudes survey will be presented as hard evidence for this association. Finally, it will be suggested that Western societies should adopt a more rational approach to drugs and drug problems, rather than retain international and national policies based upon irrational and nationalistic assumptions.

2. Illegal drugs and fears of ‘the foreign’

A number of writers, from a variety of countries have commented upon the links between attitudes towards foreigners/immigrants and illegal drugs. This paper will not attempt to present a comprehensive account of the existing literature but rather select some apposite and illustrative examples.

Musto, writing about drug control in the United States, provides numerous illustrations of the way in which Mexicans, ‘Negroes’ and the Chinese were portrayed as corrupting American youth and values. In a report on opium to the US Congress, it was stated that:

“cocaine is often the direct incentive to the crime of rape by Negroes of the South and other sections of the country (quoted in Musto (1987) p. 43).”

By 1914, Musto claimed, leading figures in the media, politics and medicine associated opiates and cocaine:

“with foreigners or alien sub-groups. Cocaine raised the spectre of the wild Negro, opium of the devious Chinese, morphine the tramps in the slums: it was feared that the use of these drugs was spreading into the ‘higher classes’ (ibid, p. 65).”

Musto refers to further examples of the association of drugs, immigrants and threatening behaviours in the 1920s.

“Horrible crimes were attributed to marihuana and its Mexican purveyors.

Legal and medical officers in New Orleans...believed [marihuana] was a sexual stimulant that removed civilised inhibitions (ibid, p. 219).”

A representative of American patriotic societies claimed that:

“Marihuana, perhaps now the most insidious of our narcotics, is a direct by-product of unrestricted Mexican immigration...Mexican peddlers have been caught distributing sample marihuana cigarettes to school children (ibid, p. 220).”

Marek Kohn has shown how the press in the early years of this century portrayed evil Orientals and black men seducing young British women with opium and cocaine. In *Dope girls* he explains how “opium was specifically associated with the dockland Chinese communities” (Kohn, 1992 p. 30). While opium itself was not regarded at the time as a major social threat in itself, there was a concern that it was being used to seduce white women and lure them into a life of prostitution and trafficking. Enormous publicity was given to the involvement of the Brilliant Chang—the *Dope King*, as he was called-in supplying cocaine to a young woman who committed suicide while under the influence of the drug. Although there was insufficient evidence to charge Chang, he remained for many a years a figure the press could use to excite fear. A newspaper journalist described an occasion when he saw Chang:

“The picture he made as he stood there framed against the dark stairway, smiling round the room with that fixed Oriental smile which seems devoid of warmth and humanity, was so typical of the novelist’s ideas of dopedom that he seemed like a vision conjured up by his surroundings (ibid, p. 129).”

There was no clear cut line between this sort of sensationalised account and the novelists and

film-makers of the day with their portraits of evil Orientals such as Fu Manchu. When Chang was finally arrested and charged for a later offence, the judge said it was men like him who were “corrupting the womanhood of this country” (ibid p. 166). The *Daily Express* said, “The yellow king of the ‘dope-runners’ has been caught at last in the net of British Justice” (ibid).

While most of Kohn’s study concerns the 1920s, he points out that the fearful imagery of foreigners, drugs and the seduction of white women persisted into the 1950s when many immigrants came to Britain from the Caribbean. One commentator on ‘underworld’ life said:

“In their flamboyant suits, shirts and ties, these coloured loungers who never worked, but drew their unemployment pay, enhanced their income by peddling ‘reefers’. Their chief victims are white girls who, craving excitement, haunt the ‘hot’ jazz spots in the underground dens in Soho and off the Tottenham Court Road that are frequented by Negroes (ibid, p. 180).”

Another wrote:

“Thousands of these immigrants are pouring into Britain every year. A majority of them smoke hemp. They do not leave their vice at home—they bring it with them. And the blunt truth is that a number of them take perverted satisfaction from ‘lighting up’ a white girl. I know. I’ve watched it happen. And it’s a horrible sight (ibid, p. 181).”

Tham, in an analysis of articles appearing in a wide range of newspapers and journals in Sweden, has shown how the concern about illegal drugs is bound with ideas about Sweden’s national identity. As the ‘influx’ of immigrants is often seen as a threat to a nation’s culture, so the importation of foreign drugs can be seen as aiding that process. Drug-taking and drug-related behaviour were portrayed as antithetical to traditional Swedish values. The liberal middle class might tolerate this situation but ‘ordinary’ Swedes would not. According to one Conservative politician, ‘our’ Sweden had to be defended against

‘drugs and terrorist immigrants’ (Tham, 1991 p. 6). Not only did Sweden’s borders need to be defended against drugs—the cover of a government report entitled *We will never surrender* was illustrated by a photograph of the Swedish coastline—but Swedish people had to be protected from ‘foreign’ debates about legalisation and decriminalisation.

My own research into Swedish drug policy has confirmed Tham’s thesis of a threatened national identity. In an analysis of articles in national newspapers reported in a recent issue of this Journal (Gould, 1996), there were many examples of an association between fears about drugs and fears of the foreign. Deported drug dealers bought themselves out of Turkish prisons and retained their rights to Swedish pensions. Steroids were ‘flooding in’ from the East. ‘Ice’ which was ‘spreading like wildfire’ in the US made you ‘psychotic’ with one puff and could spread at rave parties in Sweden. Heroin from Thailand was being sent to fictitious addresses in Stockholm, intercepted by a postman and sold to schoolchildren. Just as worrying was the threat of liberal ideas from abroad. Foreign liberal policies were to be resisted. There were fears expressed about free syringes supplied in European cities with ‘pleas’ from indigenous drug addicts to social workers to be tougher in order to ‘protect our land’. It was said that Spain was paying the price of liberal policies as drugs were now the country’s number one problem. In England too, hundreds of young people were dying from the drug ecstasy, because of the failure of liberal policies.

While there is a rational connection between migrant labour and drugs (it would be surprising if migrants did not take their native drug habits with them on their travels, as they do other aspects of their cultures), the concern of the authors cited above has been with the irrational, exaggerated, mutually reinforcing fear of both. It could however be argued, that some of the material referred to above is selective, anecdotal and taken out of context. What therefore is required is hard, corroborative data. For this we need to turn to the 1995 British Social Attitudes Survey (BSAS).

Table 1
 Liberal and restrictive scale categories by age and education

Age group	Liberal (%)	Moderate (%)	Restrictive (%)
18–34	26	35	39
35–54	13	30	57
55+	3	20	77
Highest education (qualification)			
Degree	33	39	28
Other higher	13	30	57
A level	21	24	53
O level	14	33	53
None	6	24	70

Source: Gould et al. (1996)

3. Public attitudes towards illegal drugs in Britain

BSAS interviews a random sample of the British public each year to gauge attitudes on a range of social, economic and political issues. It has developed its own scales to measure political attitudes on a left/right spectrum and a measure of authoritarian/libertarian values. All attitudes can be analysed in terms of a range of socio-economic variables—age, sex, class, region, religion and political affiliation. From 1983, a statement on the legalisation of cannabis has been included, and in 1993 additional statements on heroin and cannabis were added. For the 1995 survey, it was agreed that a revised version of a five-point Likert-type scale previously administered to Swedish and British drug agency workers by the author also be added to the existing battery of statements concerning illegal drugs (1) (Gould et al., 1996).

The revised *Liberal–Restrictive Drug Attitudes Scale*¹ originally consisted of 17 statements for which respondents were asked to indicate the strength of their agreement or disagreement. However, after preliminary analysis of the BSAS results, it was found that the scale could be further refined with no reduction in its high Alpha

reliability (0.84). The final scale consisted of the following items covering a fairly wide range of topics:

Liberal items

Taking illegal drugs can sometimes be beneficial	Use/misuse
Adults should be free to take any drug they wish	Individual liberty
We need to accept that using illegal drugs is a normal part of some people's lives	Normality/deviance
Smoking cannabis should be legalised	Legal status/policy

Restrictive items

The best way to treat people who are addicted to drugs is to stop them using drugs altogether	Treatment/policy
The use of illegal drugs always leads to addiction	Use/misuse
Taking drugs is always morally wrong	morality
All use of illegal drugs is misuse	Legal status/misuse

¹ The *Liberal–Restrictive Drug Scale* was inspired by drug policy debates in Sweden and Britain (Gould, 1994a,b). The original scale of forty items consisted of an equal number of liberal and restrictive statements drawn from these debates. Eighty drug agency workers and employees in statutory and voluntary drug organisations in Sweden and forty in Britain were asked to complete the scale. Mean scores of, respectively, 1.0 and 5.0 represented the most liberal and restrictive positions possible. The mean scores for all Swedes was 3.8 while for the British it was 2.0. Only three Swedes scored less than 3 (the mid-point of the scale) and no British respondent scored more than 3. One Swede had the highest score of 4.8 and a British respondent had the lowest—1.0!

Table 2
Attitudes towards the ‘foreign’ by attitudes towards drugs

	Liberal	Moderate	Restrictive	Very restrictive
% of those with liberal-very restricted attitudes towards drugs who agree that:				
1. The world would be a better place if people from other countries were more like the British	15	19	30	45
2. Immigrants increase crime rates	10	18	28	36
3. The number of immigrants should be increased or remain the same	54	34	27	21
4. Immigrants make Britain more open to new ideas and cultures	73	56	50	39
5. Lots of good traditions will be given up if we stay in the EU	21	36	46	53
% of those with liberal-very restricted attitudes towards drugs whose views are closest to:				
6. It is better for society if ethnic groups maintain their distinct customs and traditions	35	12	15	11
7. It is better if ethnic groups adapt and blend into the larger society	51	68	65	72
Base	134	274	305	268

Source: Gould et al. (1996)

Scale scores were calculated so that the most liberal position was 1 and the most restrictive 5. The mean score for all respondents was 3.53. If we allow that all those with mean scores of 2.5 and below are liberal, those with scores of 3.5 and above are restrictive and those left in the middle are moderates, then Table 1 provides some useful comparisons which show that age and education are important factors in predicting attitudes towards drugs:

Age and education differences in attitudes towards illegal drugs were statistically the most significant. Region was another with people in Greater London being more liberal than those in other regions. Social class and sex revealed no great differences. Although some differences emerged between those identifying with different political parties, these were small when other factors were taken into account. Similarly when the liberal/restrictive scale was correlated with the left/right scale the relationship was not significant ($r = 0.005$). However, the correlation between the liberal/restrictive scale and the libertarian/authoritarian scale was high (0.541).

By chance, the 1995 BSAS also contained a number of questions on attitudes towards national identity and immigrants. These were correlated with the liberal/restrictive scale, and the results are shown in Table 2 (N.B. The column for

the ‘very liberal’ was omitted on the grounds that there were too few in the category to make the results reliable). The range of statements here cover national superiority (1), the relativity of different cultures (4), the dangers of immigration (2,3), threats to national identity from within (6,7) and from without (5). On every one, there is a clear link between the respondents’ attitudes towards ‘the foreign’ and their attitudes towards illegal drugs.

For three of the items (1, 2 and 6) the ratio of the difference between those with liberal attitudes towards drugs and those who were very restrictive is around 3:1. For three of the items (3 and 5) the ratios are 2.5:1. For the remaining items (4 and 7) the ratios are almost 2:1 and 1.5:1 respectively. Those with very restrictive attitudes towards drugs are more likely to want fewer immigrants coming into Britain and to blame immigrants for crime. Those with liberal attitudes towards drugs are more likely to be tolerant of other cultures and to be less fearful of losing their national identity.

4. Discussion

This paper has sought to explain differences in attitudes towards illegal drugs in terms of wider

social attitudes towards ‘the foreign’. This implies that it is not the characteristics of drugs themselves which are a threat to social stability but that as mind- and body-altering substances, drugs have become a powerful symbol for other alien forces and influences which are perceived as flooding into a country and threatening existing values and institutions. As such they have become an effective means for expressing what Billig has called ‘banal nationalism’.

Billig argues that social and political scientists have too easily analysed nationalism in its totalitarian forms (Nazi Germany, Soviet Russia) or in relation to national movements associated with terrorism. Billig was more concerned “with the ideological means by which nationalism is reproduced” in Western societies (Billig, 1995). The ‘flagging’ of nationhood occurs in our everyday lives in a variety of banal ways. Billig argues that while:

“political leaders...are not typically termed ‘nationalists’...nationhood provides a continual background for their political discourses, for cultural products, and even for the structuring of newspapers (Billig (1995) p. 9).”

This paper has suggested that another of these ways is through the portrayal of ‘foreign’ drugs as a threat to the ‘nation’, to its young people, its women, its values. It is hardly surprising if our feelings and attitudes towards illegal drugs are embedded in other irrational fears about foreigners and immigrants, national identity and traditional values and culture—that it is difficult to have a rational debate about drug policy. Our irrational assumptions have had disastrous policy consequences. Taylor has argued that the conventional theory of the drug trade is a “demonological account organised around some powerful and long-standing myths about ‘foreigners’, aliens and corruption” (Taylor (1992) p. 183). He goes on to say that:

“This is, of course, precisely the kind of perspective which has historically underpinned the quite extraordinarily unsuccessful campaign (or indeed, the ‘war’) waged by the US government

against drug production in the Third World, involving as it has eradication raids, the use of chemical defoliants, and the rigid control of the entry of migrants from certain Third World countries into the United States (ibid p. 185).”

If the deviancy and illegality of drugs, drug-taking and the drugs trade are under-pinned by fears of the foreign, what can be done to challenge such deep-rooted assumptions?

Taylor suggests that we would be better off examining the “conditions of life of free-market societies that give rise to the demand for...drugs” (ibid, p. 187). He cites de-industrialisation, the re-emergence of sweated labour in the West, anomie, the acceleration of the work-ethic and narcissism as factors worthy of attention.

While these adverse factors are important for an analysis of ‘drug problems’, focusing on them does little to address the demonisation of drugs as alien substances. On the contrary, they merely serve to pathologise drug-taking. It is time to accept that the globalisation of trade and the relaxing of international financial controls has not only led to a freer exchange of consumer goods and services, not only to greater cultural exchange at the level of fashion, music and the arts but also to a desire to gain pleasure through the greater availability of (often foreign) mind-altering substances

What the analysis presented here suggests is that a process of public education needs to take place which emphasises the ‘normality’ of drug-taking. This has already been done to an extent by social scientists whose historical and comparative studies have shown how drug-taking that Western societies today regard as deviant, has in other societies or at other times—been socially-acceptable. Some policy-makers have also played their part in attempting to ‘normalise’ our view of drug-taking. The *Advisory Council on the Misuse of Drugs* in Britain made a start as far back as 1982 when it stated that:

“The majority (of drug users) are relatively stable individuals who have more in common with the general population than with any essentially pathological sub-group (ACMD (1982) p. 31).”

The Dutch have bravely challenged international bigotry by de-criminalising the use of marijuana. However, the authorities are under constant pressure within the EU to tighten up their controls and it is unlikely that Holland's liberal initiative can be advanced any further at the moment (Ministry of Health Welfare and Sport, 1996).

But perhaps, ultimately, this is an ideological battle that has to be fought politically by drug users themselves. Gays have had to challenge their deviant label. Women and ethnic minorities have had to organise to weaken the constraints imposed upon them by patriarchal and racist discourses. And people with disabilities are learning to demand that society enables rather than disables them. Only when drug-takers have the courage to 'come out' collectively and demand their civil rights will they be able to challenge the irrational fears of their oppressors.

Acknowledgements

I am grateful to the Economics and Social Research Council for the funding of the drug scale items in the 1995 British Social Attitudes Survey (Grant number R000 221601). My thanks

also go to Andrew Shaw, the joint fund holder who now works for Social and Community Planning Research, for his technical, intellectual and analytical support.

References

- Billig M. *Banal Nationalism*. London: Sage, 1995.
- Gould A. Pollution rituals in Sweden: the pursuit of a drug-free society. *Scandinavian Journal of Social Welfare* 1994;3(2).
- Gould, A. Sweden's syringe exchange debate: moral panic in a rational society. *Journal of Social Policy*, 1994;23(2).
- Gould, A. Drug issues and the Swedish press, *International Journal of Drug Policy*, 1996;7(2).
- Gould A, Shaw A, Ahrendt D. Illegal drugs: restrictive and liberal attitudes. In: Jowell R, Curtice J, Park A, Brook L, Tomson K. *British Social Attitudes: 13th report*, Dartmouth, Aldershot, 1996.
- Kohn M. *Dope girls*. London: Lawrence and Wishart, 1992.
- Ministry of Health, Welfare and Sport, *Drug Policy in the Netherlands*, Amsterdam, 1996.
- Musto D. *The American disease: origins of narcotic control*. Oxford: Oxford University Press, 1987.
- Sontag S. *Illness as metaphor; and AIDS and its metaphors*. London: Penguin, 1991.
- Taylor I. The international drug trade and money laundering. *European Sociological Review*, 1992;8(2).
- Tham, H. Narkotikakontroll som nationell projekt, *Nordisk Alkoholtidskrift*, 1991;9(2).