

Los Ganchados: Drug Abuse in the South Texas-Mexico Borderlands

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In this article, I provide an analysis of drug abuse in the South Texas border community of La Estrella. I first present a review of the scholarly research on drug issues in Mexican American communities, in order to situate my own work within this field of anthropological and sociological inquiry. In presenting my own research, I begin by defining the terms drug use, drug abuse and drug addiction, and I provide ethnographic descriptions throughout to highlight the devastating reality of drug abuse in this South Texas community. I then focus on situating these social phenomena within La Estrella, and especially in defining the distinction between drug use and drug abuse. I also provide both a description and assessment of the different drug treatment programs that are available in the area, which included both state-mandated drug treatment programs as well as faith-based treatment programs. In sum, I present some of the challenges facing this Mexican American community as a result of the growing concern over increased drug abuse.

Keywords: Drug Abuse, Mexican Americans, South Texas-Mexico Border

Introduction

In recent years, the United States-Mexico Border has received increased attention from media outlets across these two countries as well as the world. *La Estrella*¹ is the place that I call home, the place that my family calls home. It is the place where we have been living for centuries now. Like other border settlements *La Estrella* has a long and interesting history, but it has an even more provocative reputation. In some places, *La Estrella* is thought of as the United States' Little Colombia. It is depicted as a place where lawlessness pervades the landscape, where criminals run rampant. So it is not surprising when a Drug Enforcement Agent appears on a national television documentary asserting, "All of the people of *La Estrella* are crooks!"

La Estrella's reputation developed as a result of the high rate of drug trafficking that takes place in this rural sector of the Texas-Mexico border. In the twenty-first century, contraband has become a lucrative activity along the U.S.-Mexico border, and historically many border people have taken advantage of contraband activities as a source of primary income and in some cases supplemental income. Since the 1960s, however, drug trafficking has become the most important contraband activity along the U.S.-Mexico border and arguably around the world. As a result, many border inhabitants have become involved in international and domestic drug trafficking, significantly involving many border communities in the webs of the global drug trade.

La Estrella is one of the border communities radically affected by the intrusion of the international drug trade, as well as other forms of contraband throughout history, resulting in a particularly unique social environment where the drug trade and drug culture have permeated various levels of social

life. The county in which I grew up is the largest rural county in South Texas and is located in between two of the nation's fastest growing metropolitan areas. *La Estrella's* population of approximately 60,000 is comprised of about 98 percent people of Hispanic origin, the majority being individuals of Mexican descent. Moreover, La Estrella is one of the regions with the highest rates of poverty in the United States (U.S. Census Bureau: 2000 Census of Population and Housing). It is also situated along the Drug Enforcement Agency designated High Intensity Drug Trafficking Area (HIDTA) of the South Texas border. As an anthropologist, it is my goal to document and analyze the manners in which border communities, such as *La Estrella*, are affected by both drug trafficking and drug consumption due to their locations on the frontlines of the "war on drugs."

Researching Drugs in Mexican American Communities: A Review

Joan Moore (1978) is the first scholar to attempt to systematically interrogate the interrelation between gangs, drugs and prisons (crime) in the Chicano community. Moore's work is also groundbreaking methodologically because it employs both activist anthropological and applied anthropological practices for data collection and community involvement. She employs *pintos* (former convicts) as co-researchers in order to achieve an insider's "*pinto-tecato*" (former intravenous heroin user) perspective. Her work pushes for a collaborative engagement with the community and attempts to provide resources to help the community with the drug and crime problem. Moore outlines the growth of the drug trade in a Los Angeles barrio, and in the Southwest in general, and analyzes the economic opportunities presented by this new lucrative economy. The lucrative economic practice of drug trafficking, however, has greatly contributed to the demise of the community as more individuals are incarcerated for drug trafficking, drug possession and drug use. The continued role of the prison and prison culture in barrio life is particularly important because it points to the power that the state, through policing and punishment, exercises on Chicano barrios. Moore's later work (1991) deals with the changes occurring in the same Los Angeles barrio community and the effects on both male and female gang members. She continues her work in the same neighborhood, but is now attempting to trace the history of two distinct Chicano gangs over the last three generations. She focuses especially on the perceptions of the community about these gangs, and how historically they changed. The gangs went from being perceived as adolescent male social groups, like the *palomillas* described by Madsen (1964) and Rubel (1966) in South Texas, in the early years, to being perceived as criminally deviant violent groups in the contemporary period. Moore argues that this change in perception is attributed to the long-standing and continued exclusion of Chicanos from economic opportunities for social mobility. Moore critiques

the early theories of gang formation, perpetuated by the Chicago school² that once the lower class minority groups are assimilated into society gangs would disappear. Moore argues that the case of Chicanos is different from White ethnics because of their continued exclusion from American society, and the lack of structural assimilation afforded to this group. Moreover, the continuous wave of Mexican immigrants into the U.S., and the negative perception of these immigrants, places Chicanos in a particularly dangerous social position. They are consistently excluded from the American mainstream.

The work of James Diego Vigil is of particular importance when it comes to scholarship on Chicano gangs, because he is both an anthropologist and an indigenous scholar. Vigil's methodological approach to studying street gangs in California is through the life history of particular gang members and the structural history of the community. In so doing, Vigil is able to outline the structural as well as individual factors that contribute to gang formation. He argues that Chicano gang members are primarily men between the ages of 13 and 25, and that the emergence of the "gang subcultural style is a response to the pressures of street life and serves to give certain barrio youth a source of familial support, goals and directives and sanctions and guides" (1988:2). Historically, Vigil outlines that youth gang formation is not a social practice that can only be attributed to Mexican Americans and Mexican immigrants, but that throughout American history urban immigrant groups have spawned the birth of ethnic youth gangs. He argues that gang formation is the result of the pressures experienced by immigrant ethnic groups to adapt to the dominant Anglo American culture and poverty. However, he argues that the reason for the longevity of Chicano gangs in the United States can be attributed to continuous Mexican immigration and to their continuously low socioeconomic position. Moreover, Vigil proposes two important theories that argue reasons for the persistence of Chicano gangs: multiple-marginality and choloization. "Multiple marginality encompasses the consequences of barrio life, low socioeconomic status, street socialization and enculturation, and problematic development of a self-identity" (1988: 9). Vigil proposes this concept as a tool for understanding gang formation because it allows for multiple factors that contribute to this process, as opposed to previous conceptions that understood gang formation as the result of only one factor – cultural difference. Vigil in turn describes choloization as the production and perpetuation of a *cholo* street subculture style. Vigil argues that this *cholo* style is comprised of values, beliefs and customs that help these youth cope with street life. He describes the defining characteristics of this subcultural lifestyle including elements of speech, dress, demeanor, partying and car (lowrider) culture. More importantly, however, he also identifies the "notorious side" of this cholo subculture, including substance abuse (drugs and alcohol), violent conflict between rival gangs, and property related crimes, such as petty theft and vandalism. Vigil's ultimate conclusion in *Barrio Gangs* is

that the cholo subculture has developed in Mexican American barrios to fill the social needs of Mexican American youth, but only some youth with these similar socioeconomic conditions engage in this lifestyle, not all youth.

Drug use in the United States is an important issue that social scientists have attempted to analyze through ethnography. An early work on this subject is exemplified in Bruce Bullington's (1977) *Heroin Use in the Barrio*. Bullington provides an ethnographic account regarding the rise of heroin use in a Chicano community in East Los Angeles. The research was conducted as part of the Narcotic Prevention Project, in Boyle Heights, East Los Angeles. Bullington's goal is to provide a new perspective on the analysis of communities affected by illicit drug use: a description and analysis within the social context of the community where the behavior is present. He concludes that the government agencies that are responsible for alleviating the drug problem (police and courts) are actually aggravating the problem and perpetuating stereotypes regarding drug use. According to Bullington an important aspect of the research is that it relied heavily on interaction between the researcher and the community (narcotic and non-narcotic users alike). Methodologically, Bullington recognizes the problems associated with his positionality as a white ethnographer conducting research in a Chicano community. He provides a history of the criminalization of narcotics in the United States, as well as a history of drug use and abuse in Boyle Heights. In regards to heroin use in Boyle Heights, he outlines that the drug was introduced into East L.A. after World War I and II by returning servicemen who had experimented with the drug while overseas. In the time between World War II and the mid 1970s, heroin addiction had become an important social problem in East Los Angeles. Bullington highlights that an important reason for the escalation in heroin addiction can be attributed to the establishment of East Los Angeles as the city's drug distribution center. He also addresses the effectiveness of punitive strategies on drug use and abuse, focusing his most important critique on the prison system. He asserts that prisons have not been effective in reforming convicted drug users. As part of his contemporary analysis, Bullington identifies seven "user types" that engage in heroin use: the "Hope-to-Die Fiend," the "Hope Fiend," the "Chippy User," the "Regular User," the "Gutter Hype," the "Pill Head," and the "Head." These users are distinguished by the varying degree of their criminal activity and the varying intensity of their heroin use.

The collaborative work *Taking Care of Business: The Economics of Crime by Heroin Abusers* (1985) focuses on the daily life of heroin users and the methods by which they acquire drugs. When it comes to heroin users, the authors assert that many heroin addicts are in fact part-time or full-time drug dealers, most probably dealing heroin. The work presented here is a continuation of earlier work conducted by one of the authors, Edward Preble, a seminal figure in research on drug dealing and drug consumption. The au-

thors highlight the different activities in the drug trade that addicts engage in to secure heroin for personal consumption, including salesmen, delivery men and testers. However, there is constant movement of individuals across drug roles. Moreover, the authors also state that criminal addicts support their habit through other criminal means including shoplifting, theft, burglary and robbery. The subjects of this research are heroin abusers who had consumed heroin intravenously for many years. Most heroin abusers, according to the study, have become poly-drug users; almost all respondents (90 percent) reported using cocaine. The research locales were East and Central Harlem in the late 1970s. The majority of the heroin abusers involved in the study in both places was male; in East Harlem the majority of those was Hispanic, and in Central Harlem the majority was Black.

Mitchell Ratner's (1993) collection deals with the practices that crack abusers engage in to be able to secure drugs for their personal consumption. The ethnographies presented in the collection focus on the different sex-for-crack exchanges that individuals perform. Terry Williams (1992) also explores crack use and the sex culture revolving around it in New York City. Williams primarily represents the lives of Latino individuals that frequent crack houses in the city. As Williams outlines, crackhouses are not just sites where crack is purchased. Rather, crackhouses are sites where crack-users meet to consume crack and engage in sexual acts to prolong the euphoric feeling induced by the drugs.

Reyes Ramos is scholar who attempts to use ethnography to represent the drug cultures in San Antonio, Texas (1995) and El Paso, Texas (1998). The important aspects of Reyes work is that they are performed in predominantly Latino (primarily Mexican-origin) cities in the Texas-Mexico borderlands, and are studies that have policy implications since they are reports produced for the Texas Commission on Alcohol and Drug Abuse. The only shortcoming of Reyes' work is that they are very short reports. Therefore, they offer an introduction into the drug cultures of these two cities, but are not adequately developed like other contemporary ethnographies. Matthew Durrington's recent dissertation "Discourses of Racialized Moral Panic: Teenagers, Heroin and Media in Plano, Texas," is an important recent work on drug use and drug trafficking and the effects of the media on perceptions of drugs in the U.S. The conclusion derived from Durrington's work is that although in Plano, Texas upper-middle class white youth are the primary consumers of heroin in large numbers, the few Latino dealers that were providing some of the drugs in the community were criminalized in the media, as well as through the legal system. The white drug users, however, were seen as victims of the drug dealers, rather than drug consumers responsible for their actions. The contradiction is quite clear considering that consumption in the U.S. drug market is driven by White Americans' intense demand for these products. This social fact is evidenced by the work produced by both Wallisch (1998)

and Harrison and Kennedy (1996) that attest to the fact that rates of drug use by most border students and border adults (who are predominantly Latino/Mexican origin) are similar to that of non-border youth and adults. Since whites are the largest percentage of population in the U.S., their similar rates of drug use represents a larger proportion of drug users in the country. Furthermore, this fact also points to a glaring contradiction in the United States government's racialized enforcement of drug laws. Most prisoners in the U.S. prison system are Black and Latino men of color, who have been incarcerated for non-violent drug offenses. Furthermore, the push for mandatory minimum sentences for drug offenses will most likely further saturate the prison system with men of color.

I conducted my dissertation research in the rural communities and the county seat of *La Estrella*, which is also the community where I was raised and where most of my extended family resides. Beginning in 2002, I began participant-observations in this community, as well as collecting news archives and informal interviews, during the periods when I was temporarily returning home for summer jobs and school vacations. Upon entering graduate school, I began a more intensive research endeavor that included oral history interviews, more intense participant-observation and more detailed archival research. The culmination of this research, which included six months of participant-observation in *La Estrella* contributed to the completion of my Master's Thesis entitled, *Cuando llegaron las drogas: A History of Drug Trafficking in a Rural South Texas Community* in May 2006.

More recently, I conducted a year of ethnographic and archival research in *La Estrella* for my dissertation, beginning in August of 2007 and ending in August of 2008. My dissertation research is collectively the archives of field notes and interviews that I have been collecting since 2002. As part of my ethnographic research, I conducted extensive participant-observation, by attending various community and family events. I also conducted several formal interviews with important members of the community including several representatives from the criminal justice system, as well as numerous informal interviews with young adults and other members of the community. Finally, I also collected several oral histories from different individuals in the community, as well as with my own family.

Archival research is also an important component of my dissertation research, which I completed at the University of Texas-Pan American's Rio Grande Valley Special Collections, as well as at the Border-Life Research Project. My research at the Rio Grande Valley Special Collections included archival research on a historian's personal collection, as well as analyses of a number of oral histories on individuals from *La Estrella*. My research at the Border-Life Research Project included coding and analysis of a number of thematic interviews on drug trafficking in the Rio Grande Valley. My family and friends have served as important research resources by sharing

their views of how drugs in the community have influenced our lives and our upbringing. I employ autoethnography as a research tool by interrogating my own life history in this community as well as the people that were present during my adolescence. According to Deborah E. Reed Danahay (1997), “autoethnography is defined as a form of self-narrative that places the self within in a social context. It is both a method and a text in the case of ethnography” (1997: 9). Moreover, the “term has a double sense – referring either to the ethnography of one’s own group or to autobiographical writing that has ethnographic interest” (1997: 2). Therefore, my own research applies to both senses of the term because I am writing about my own group, as well as incorporating parts of my own autobiography, to understand the effects of drug trafficking and drug abuse in *La Estrella*.

Una Familia: A Personal Reflection on Drug Abuse

In the ethnographic description that follows, I trace the history of drug abuse of a family in *La Estrella*. In doing so, I present the impact of drug abuse on familial and communal relationships in *La Estrella*. I also provide a frame of reference for my argument that the escalation of drug trafficking through South Texas border communities has contributed to the escalation of drug use and drug abuse in South Texas communities. Finally, as I argue throughout this paper, drug abuse is a particular concern for the people of *La Estrella* because of the adverse impact of drug abuse on family and community life.

When I was *chavalito* growing up in *La Estrella*, drug trafficking and drug abuse were already common practices in the community. My mother has told me stories about individuals that she grew up with who began developing drug addictions in the 1970s. She told me the story of a boy whose father was a drug trafficker and introduced his young son to cocaine. The young boy served as his father’s jockey at the horse races. In the 1960s and 70s many of the newly wealthy drug traffickers showed off their money at gambling sporting events, such as cock fights and horse races. For the traffickers of *La Estrella* horse races were the preferred gambling past time. But unlike the elite, highbrow races of the Kentucky Derby where “refined gentlemen” watch thoroughbred horses race around a track while women congregate in fancy expensive hats, the horse races of *La Estrella* were a man’s affair where two jockey’s raced a straightaway distance and *mafiosos* placed their bets on who the victor would be. The young jockey whom my mother grew up with was a thin boy who was able to clinch many victories for his father and his friends. He had become so successful that the boy’s father wanted to secure his winning streak by keeping his jockey at peak physical performance. So the father introduced his young son to cocaine, in order to ensure that the jockey would remain light in weight and agile enough to continue dominating the races. This young boy would as a result develop a cocaine addiction that has lasted into adulthood, and as my mother has told me of her childhood

companion, he has found life a difficult road with periods of sobriety and relapses.

By the time I was growing up in *La Estrella* in the 1980s, the drug trade was already reaching its high point as a result of the increase in cocaine trafficking. When I was in grade school in the late 80s my grandfather was killed by a drunk driver. The tragedy immediately devastated our family, but the aftermath of my grandfather's death rattled our family to the core. At the time of my grandfather's death, my mother's brother was just entering his teen years and the devastation of losing his father pushed my uncle to cocaine. My uncle's cocaine use eventually developed into a drug problem. I remember then, my mother and the rest of our family leaving at times with my uncle to a well-advertised treatment center in *El Valle*. At the time, I was not at all aware what kind of treatment this center administered, but I would later discover that it provided outpatient family counseling for individuals suffering from drug addiction.

By the time I was entering my teenage years, my cousins and I had to contend with the social realities of growing up in a High-Intensity Drug Trafficking Area. Perhaps the most difficult aspect of growing up in this border community was the pervasiveness of drugs, not just in people's homes but also in school. When we were still twelve, my English teacher called me over to her as I sat in the schoolyard talking to my cousins. As I approached her, she asked me, "Mr. Guerra, what are you doing?" I replied, "What do you mean, miss?" Then she told me something that has puzzled me and haunted me for more than a decade now. "Mr. Guerra, I don't think you should be associating with Mr. Guerra, if you want to stay on the right track." She of course was asking me to not socialize with my cousin, my *primo-hermano* [first cousin] as we refer to our first cousins in Spanish. I had never thought to myself at that point that being with my cousins, or with my family for that matter could get me into trouble. Before the end of the school year, I discovered how complicated life would become for our community and families when drugs were involved. One afternoon when school was dismissed, I walked over to the usual site where my grandmother would pick us up from school. To my surprise, here car was already there, but she was not sitting in the drivers seat like most other days. I waited there with my cousins, but one of us was missing. We waited there for nearly half an hour, when eventually my grandmother stormed over to us from the administrative office, with my cousin in tow. She was yelling at him as she walked towards us, and she continued yelling at him on our way home. When we finally got to my grandmother's house, she put the belt to him, *le metio una chinga* [she beat him]. The rest of us sat silently in one of the bedrooms. When my cousin finally recovered, he came over to me and told me what had happened. He had been caught at school with two joints in his pocket. He had been expelled from school and was referred to the Alternative Education Center, where the students with discipline problems

are sent or as some in the community say, “*donde mandan a todos los malos y los cagalos*” [where they send the bad kids and fuck-ups].

Later when I entered high school, drugs were everywhere. It was impossible not to notice it. Whether it was the frequent drug busts taking place in town, the kid sitting next to you on the bus who reeked of marijuana, or the guys snorting *pase* in the bathroom at dances and *quinceneras*, drugs were everywhere. My friends and I used to go to *bailes* [dances] every weekend, whether a *quincenera* or a wedding, whether invited or not. My *primos* [cousins] also went to the same dances. Jay, who is two years older than me, is my oldest *primo-hermano* on my mom’s side. We were like brothers growing up, so much so in fact, that people still ask her today, “*¿on ta tu otro hijo?*” [Where is your other son]. We did almost everything together when we were younger, working at the ranch together, playing on the same sports teams, everything. But in high school, when I was struggling to finish lab reports, and homework assignments for my advanced placements classes, Jay was dealing with his own more serious struggles. Jay struggled with school. We were sophomores together despite the fact that he was two years older than me. But Jay had other problems, problems that would later come to strain our relationship. And about the same time when we were both sophomores, there was *pedo* [trouble] between us. Jay and I have been wearing each other’s clothes since as long as I can remember. Especially, when we were getting ready to go out to *bailes*, we would look through both our closets to try to put together the best combination of jeans and dress shirt. One such night, Jay took a pair of my jeans to wear. The next week, when I was getting ready for school, I put on my pants and I felt something strange in the small fifth pocket common on the right side of most jeans. It felt like a small bump. I reached in and pulled out a small bag of cocaine. I ran over to Jay’s and threw the bag at him. “*¿Que es esto pendejo? ¿Que chingaos traes? A la buena si me pescan en la escuela con este mugrero, luego que, me chingue causa tuya.*” [What’s this asshole? What the fuck is wrong with you? What if they had caught me at school with this shit, then I’m fucked cause of you.] We pushed each other and then I made my way back home. Jay was one of the guys at the *bailes* huddled around in the bathroom snorting bumps of cocaine off their keys. Jay’s drug problem would get much worse by the time he had reached his twenties, and he would end up serving time in federal prison for working as a drug mule. And by the time he came home from prison, his drug use had developed into a full-blown addiction, affecting all of our relationships with him.

Loqueando: Distinguishing Drug Use from Drug Abuse³

In public discourse, certain terms related to drug use are implemented in an unproblematic manner. Terms such as addicted, drug addict, drug abuse, drug abuser, drug dependence, and recreational drug use are continuously used without any careful assessment of the distinction between these drug-related

social phenomena. Increasingly, such taken for granted attitudes have been adopted by scholars, public officials and health care practitioners without a significant reflection on the important meanings of these terms and the practices and states-of-being that they describe. For me, this important critical step is necessary in any serious reassessment of the social reality of drug use and drug abuse in society, and the related initiatives of creating successful, culturally sensitive approaches to drug treatment. To clear up these inconsistencies, I provide my working definitions of the terms related to drug use and drug abuse, and I also present ethnographic descriptions from my research to provide examples of these practices.

Perhaps the most basic of these terms to define in this case, is the term drug use. **Drug use** is the act of consuming a drug. Drug use can further be differentiated into **recreational drug abuse** and **habitual drug use**. To complicate the matter, however, the term drug itself is defined socially. For example, there are various classifications of substances that can be described with the term **drug**. A drug can range from the mundane cough syrup or pharmaceutical drug that most individuals consume on a daily basis, to the category of drugs that most people think of when discussing such issues related to addiction—**illicit drugs**. Illicit drugs are those drugs in a particular society that have been outlawed or prohibited because of the presumed threat that they pose to the social well being of the national body politic. Law enforcement and government officials also utilize the terms **controlled substance** and **narcotic** to describe these prohibited drugs. In the case of American society, the most heavily used drugs include marijuana, methamphetamines, cocaine and heroin. Further complicating the issue, individuals can also use and abuse what we can consider non-conventional drugs, which includes inhalants such as spray paint and paint thinner. Likewise, individuals can also use and abuse pharmaceutical drugs that are prescribed to themselves or other individuals, and perhaps the most heavily consumed of these drugs include anxiety medication and painkillers. As a result, there are an increasing number of individuals that engage in the illegal sale and purchase of prescription medication.

Drug abuse is much more difficult to define because of the subjective nature of distinguishing it from drug use. Drug abuse can in some ways be linked to both the quantity and prevalence of drug use, but only in comparison to recreational drug use. **Drug dependence** is a medical or psychological condition that results from drug abuse. Usually, in public discourse drug dependence is often equated with the term addiction or addicted. Drug dependence can come in two forms: physical and psychosocial. **Physical drug dependence** typically appears in individuals where an individual's body suffers extreme withdrawal symptoms as a result of not ingesting a follow-up dose of a drug after its effects wear off. Perhaps the most well-known and documented instances of physical drug dependence occur in heroin drug us-

ers. **Psychosocial drug dependence** differs from physical drug dependence in that the necessity for habitual consumption of a particular drug occurs as a result of the psychological need to induce the feeling of “being high”. Drugs that typically display these types of drug dependence include marijuana and cocaine. For example, some marijuana users often state that they feel the necessity to be under the influence when they are performing a particular task. Finally, **drug addiction** is a form of drug dependence, in which the individual consuming the drug exhibits drug dependent behavior that negatively impacts that individual’s social and physical well being, and the well being of those who are intimately connected to addict. Addiction is more accurately a disease that develops from drug dependence— it encapsulates both the physical and psychosocial dependence of the drug user, as well as the drug user’s ensuing behavior in the social world. This definition of addiction situates the drug user within the social world, rather than thinking of addiction as occurring within a vacuum. Addiction is a complex disease that encompasses the physical and psychological effects experienced by the addict personally. However, the disease is also defined by the impact on the addict’s social well being as a result of the negative effects experienced by those who are intimately connected to the addict.

In *La Estrella*, the primary drugs that are used and abused are cocaine [*pase, soda, coca*], crack-cocaine [*pedra*] and marijuana [*mota, grifa*], as well as pharmaceutical drugs purchased in Mexico such as Rohypnol [*ro-chas*]. The most common drug being abused, however, is cocaine and its derivatives (crack-cocaine). While *mota* has been smoked for at least a century along the Texas-Mexico border, most notably during the Mexican Revolution, cocaine use is a relatively new phenomenon. Cocaine was introduced into the South Texas drug market in the late 1970s. As a result of U.S. drug interdiction efforts in the Caribbean, Columbian cocaine importation into Miami and the Atlantic coast was essentially cut off and redirected to the U.S.-Mexico border (Guerra, 2006). South Texas has historically been utilized as a trafficking route for contraband because the rural nature of the area makes it difficult to police. Columbian and Mexican drug traffickers relied on South Texas as a new route for cocaine importation into the U.S. drug market. As South Texas drug traffickers began filling in the ranks as cocaine importers and distributors in the U.S., cocaine began to be consumed in the area by these same drug traffickers and their associates. Within a few short years the consumption of cocaine spread outside of the inner circle of drug traffickers and was being snorted by young Mexicano men of *La Estrella*.

My mother recalls that in the late 1970s, young men would sneak off to the bathroom while at dances and share *bolsitas de pase* [baggies of cocaine]. She stated: “*Pues ya* [Well yeah] I would say *que si porque* [that yes because] I know that when we would go to the dance everybody is sniffing their noses up. Like all the guys would go to the bathroom together, to do their thing.”

This practice of consuming cocaine is ever-present and continues into today. I have witnessed this practice many times since my teenage years. A group of men form a tight circle in the small dancehall bathroom sharing a small plastic bag of cocaine. They pull out a key and pass the bag around. Each man scoops the key into the bag and takes a bump. They each take a few bumps and rejoin their friends and wives/girlfriends/dates back in the dancehall. Occasionally, some drug users prefer not to share their *bolsitas* and sneak away to powder their nose alone. This moment however, embodies more than just an instant of personal drug consumption. Rather, it signifies the larger networks of drug trafficking, drug consumption and the ties of these practices to the community. With the escalation of drug trafficking through the South Texas-Mexico border, individuals and families from South Texas border communities have become ensnared in the complex web of the international drug trade as drug traffickers, drug enforcement officers and drug users and abusers.

By the 1980s, cocaine was already widespread and readily available in the South Texas drug market. Columbian and Mexican drug traffickers were so successful in importing cocaine and marijuana through the South Texas *plaza* that it became a heavily sought after and trafficked route for narcotics entering the United States. As a result of this shift in the preferred drug route for cocaine from the Caribbean to the U.S.-Mexico Border, the area of South Texas encompassing Laredo down to Brownsville was declared A High Intensity Drug Trafficking Area by the Drug Enforcement Agency. Despite the fact that the Texas-Mexico Border is a High Intensity Drug Trafficking Area drug use in this area of the United States remains quite similar to drug use throughout the rest of the United States (Wallisch, 1998; Harrison and Kennedy, 1996). However, drug use and drug abuse became an important concern in *La Estrella*, even though survey studies in the late 1990s revealed that drug use along the border had not exploded to extraordinary levels despite the widespread availability of drugs in the area. The concern arose from the fact that while drug usage rates were similar to other areas of the United States, in the rural areas of *La Estrella* drug users and drug abusers were increasingly visible and posed significant new social problems when compared to the earlier decades. These studies, however, did reveal, that as opposed to the rest of the United States, drug users of South Texas were more likely to have used “harder” drugs such as cocaine and crack, while their other American counterparts typically consumed the most used drug in the United States—marijuana. I attribute this distinctive drug use pattern to the fact that cocaine in the South Texas drug market is not only readily available but is also priced much lower than in the interior of the United States. Within the international drug trade a clear pattern emerges related to drug prices – the further along the drug route, the higher the price. When narcotics are trafficked through the international drug route, they increase in value (price) with every new destination that they successfully reach. Therefore, once narcotics

enter the U.S. drug market, the cheapest they will ever be is when they are in the border region waiting to be trafficked north to urban and suburban drug markets throughout the United States.

Since these studies were carried out, however, there have also been important events and processes that have significantly affected the international drug trade and altered the South Texas drug market. September 11, 2001 significantly changed life in the United States, but it also altered life along the U.S.-Mexico border especially in respect to the international drug trade and border policing.⁴ As a result of the post-September 11th rush by the U.S. government to ensure a heightened level of national security, the newly formed Department of Homeland Security directed its attention to securing the “porous and unlawful” U.S.-Mexico border. The Secure Border Initiative instituted by the Department of Homeland Security allocated large numbers of border policing agents and increased resources to the region after 2003. The increased interdiction efforts that have taken place since September 11th have resulted in larger quantities of drugs, primarily cocaine and marijuana, remaining in South Texas for longer periods of time before being trafficked north to the American drug market. As a result more of these drugs are remaining in South Texas for local consumption.

During the course of my fieldwork, as well as during the rest of my life growing up, in *Estrella*, I witnessed many drug users making distinctions between their own drug use patterns, or what is often termed by them as *lo-queando* and the state of being *ganchado* or what we think of as addicted. Its Friday night and we sit around talking music and talking trash. We’re waiting for a *camarada* [friend] to make his way back from *Los Garcias de Abajo*, the rancho where my family lives. According to these guys my *barrio*’s got the best *pase* around. Finally, our *camarada* arrives with the weekend loot—5 *veintes* of *pase*. A hundred dollars of cocaine will be shared amongst three friends over the weekend. They will go through two, maybe three bags tonight. They will also go through a few six packs of beer. The goal being to take a little coke and get *acelerado* [slang for a cocaine high] and then drink some alcohol to come back down. They’ll repeat the process into the *madrugada* [dawn], always as they say *calmadito* [calmly], without getting too crazy.

Even though they engage in these binges weekly, they always try to maintain control over their drug use. The ultimate stigma for drug users is to lose control of their drug habit and become *ganchado*. On a Saturday afternoon we get together at my mother’s house to have some *carne asada*. Friends and family come over and we all sit around talking and waiting for the food to come off the grill. In attendance are some drug users and even the neighborhood drug dealer. I join the conversation with them. They are talking about my cousin Jay’s drug habit. One of my cousins says, “*Yo me pongo loco y pero no ando ganchado. Pero no me paso, ni ando robando, ni pidiendo*

dinero pa' pase." [I get crazy, but I'm not addicted. I don't go overboard, and I ain't stealing or asking for money to score coke.] The dealer responds, "*Si vato, yo se, el pase que me hecho yo, es puro corte.*" [Yeah man, I know, the coke that I take is mostly vitamin powder.]⁵ Their conversation reveals that the ultimate sign of being *ganchado* is to lose control of your drug habit and to engage in reckless behavior to acquire your drugs. It also reveals that in the community even drug users and drug dealers alike view *ganchados* in a negative light.

Ganchado: Addiction and its Effects

Addiction is a complex disease that encompasses the physical and psychological effects experienced by the addict personally. However, the disease is also defined by the impact on the addict's social well being as a result the negative effects experienced by those who are intimately connected to the addict. Let me present the next hypothetical case as an example. Two drug users can be consuming the same amount of a drug, but one can be exhibiting addictive behavior while the other does not. For example, an Anglo-American corporate lawyer in San Francisco can be consuming the same amount of powder cocaine as a Mexican American youth in South Texas, but while both exhibit drug dependence, both individuals do not necessarily exhibit addictive behavior. While the Anglo-American lawyer has the monetary resources to sustain his drug habit and is able to engage in drug use without adversely affecting his social life, the Mexican American youth engages in addictive behavior such as theft in order to feed his habit. The Mexican American youth's social life, on the other hand, is adversely affected by the actions that he engages in to feed his drug habit. While the San Francisco lawyer might consume the cocaine steadily throughout the week, the Mexican American youth might be engaging in a weekend binge that is funded through stolen money or goods.

I employ this hypothetical case as a starting point from which to discuss the devastating social reality of drug abuse in *La Estrella*. I have previously stated my working definition of addiction, which also corresponds to what community members and drug users in this community refer to as *ganchado*. *Ganchados* are addicts in this sense because they are drug abusers who have lost control of their drug habit and they engage in criminal behavior that adversely affects their well being and the well being of others. *Los ganchados*, therefore, pose problems for the community of *La Estrella*, as well as for their own families. For example, representatives from the District and County Courts of *La Estrella* reported that a great deal of the thefts in the area that are processed by the courts were committed by individuals that needed money for their drug habit. While the courts were unable to provide any statistics regarding this conclusion, this reality is corroborated by both drug users themselves and especially by some drug dealers in the area. One

afternoon while having lunch with one of these dealers, he asks me, “¿Oye no quieres una guitarra, chief?” [Hey, you don’t want a guitar?] I tell him no that I really have no use for a guitar. He goes on to tell me, how the night before some guy came buy and traded a stolen guitar for some *pase*. On other occasions, he had told me that he’s taken different goods in exchange for drugs— an accordion, a number of electronics, and also some high-end automotive tools. If an addict is caught stealing and jailed for theft, their family is faced with the decision of allowing their relative to remain in jail or bail them out. Typically, this creates a financial strain on families, and also aggravates family tensions.

Many *ganchados* also target members of their own families for theft, which results in tension within their families. When this does occur an addict’s family is faced with a disturbing reality— to press charges on their relative or allow them to continue with their destructive behavior. In my own family, I have witnessed this reality first hand. My cousin Jay has battled with drug abuse since we were in high school. Eventually, Jay began to exhibit addictive behavior. In order to feed his cocaine habit, he began to steal from members of our family. When my gold necklace disappeared from my drawer, I discovered that Jay had swiped it. Later, Jay would resort to forging our grandmother’s checks in order to get cash for *pase*. My grandmother was faced with the difficult decision of pressing charges on my *primo*, and Jay was taken to the county jail. She would eventually drop charges, after she felt that Jay had learned his lesson. My grandmother contacted the local convenience stores that Jay used to cash her checks and alerted them that they were not to cash any checks for Jay. However, Jay continued to forge her checks and found alternate ways to cash them, until the next time he was caught.

Jay struggled with addiction after high school, and has continued to deal with relapses today. I recall a relapse that Jay experienced shortly after his release from prison in 2004. It was mid-morning when I received a call from my mother. She told me that Jay had taken her car and continued “*y creo que anda ganchado otra vez.*” [I think he is hooked on drugs again.] She told me to track him down and get him to return her car. I drove around looking for Jay at the usual drug houses, but he wasn’t at any of them. I eventually found him at another cousin’s house, and I could tell that he had been using. When I found him Jay was shirtless and he looked like hell. He had relapsed and there was no telling what he would do to score some more *pase*. Sadly, now whenever something turns up missing, most people in our family react by blaming it on Jay. As a result of his addiction, Jay has lost the trust of many members of our family.

La Ley: State-Mandated Drug Treatment in La Estrella

There are a number of avenues for a *ganchado* to receive drug counseling and drug treatment. While some of these rehabilitation programs are volun-

tary, drug offenders typically participate in their first drug-treatment program under court order. In *La Estrella*, drug offenders who are convicted of a drug possession crime are often ordered to participate in the state-mandated drug treatment programs. Also, criminal defendants who are convicted of a non-drug possession related crime are to be sentenced to drug treatment if they provide a urine sample that tests positive for drug use. Individuals who are on probation also receive court ordered drug treatment if they provide a positive urine sample while under community supervision. I have on a number of occasions heard from family members and acquaintances, “*nombro, es que sali murosos.*” They presented an unclean, or in their words dirty, urine sample and as a result were sentenced to drug treatment, or in worse cases were given jail time for violating the terms of their probation.

The treatment that these drug offenders participate in must be state approved. The criminal justice officials responsible for their case—presiding judge, assistant district or county attorney, and their probation officer—usually refer them to the program. However, every drug offender who enters the court system must complete a State of Texas Drug Offender Program. The drug offender has to pay a considerable fee for the course and must participate in the program for risk of violating the terms of his/her probation or affecting the outcome of his/her court case, which can result in longer than expected jail time. The program, however, is limited in its approach to drug treatment because it assumes that every addict is the same. Participants must follow a workbook and complete the various sections in order to complete the program. The stated purpose of the course is: “To educate participants on the dangers of drug use, drug abuse and the process of behavior changes.” While the objectives of the course include: “To gain information on the effects of use, abuse, and on personal, family, social, economic and community life. To identify patterns of drug abuse. To develop a plan for positive lifestyle changes.” Although the program is productive in that it helps to get drug abusers and addicts to think about their actions, it does not effectively provide the drug offender with the adequate skills to rehabilitate. There is, therefore, a high recidivism rate with the state sponsored drug offender programs, as indicated by the officials who administer the program.

The Drug Offender Program, however, is not the only avenue for state-sponsored drug treatment in *La Estrella*. Drug offenders are also referred to drug counseling by their community supervision officer. In South Texas, the South Texas Council on Alcohol and Drug Abuse, or STCADA, administers drug counseling for the area. STCADA has a local office in *La Estrella* where their counselors administer outpatient counseling to drug offenders. Drug offenders have scheduled appointments to meet with their counselor, usually once a week, for a period of about an hour. Missing appointments can result in the revocation of probation for the drug offender. The most significant problem with this arrangement is that state resources are limited and as a result,

the level of drug treatment received by offenders is limited. Both community supervision officers and drug counselors have excessive caseloads, and this in turn significantly affects the attention that each offender can receive.

La Religion: Faith-Based Drug Treatment in La Estrella

There are, however, alternate avenues for drug treatment in the area other than the state mandated drug treatment programs in the area. The most visible and successful of these is Victory Outreach, which is a Christian Church that takes in addicts and attempts to rehabilitate them. The program is led by a pastor who is a former addict, and who was able to achieve rehabilitation through Victory Outreach. The program differs from the state approaches to drug treatment because addicts have to voluntarily enter the program. The program is unique in that it is a live-in program where addicts help each other through the rehabilitation process. Furthermore, the drug offender does not have to pay to enter the program at Victory Outreach. Drug offenders at Victory Outreach fund their participation in the program by raising money for the church through different fundraising techniques such as selling candies, religious articles or barbeque plates. Participants at Victory Outreach also have to contribute to the upkeep of the church and their dormitory. The church is located outside of the *Santander* City limits out in the ranch areas of *La Estrella*. As a result, participants are able to devote themselves entirely to the program, without the negative influences that keep them ensnared in drug use. Members of Victory Outreach are also permanent fixtures in the community. Whether they are out in the community trying to preach to young people about the negative impacts of drugs on their lives, or they come by your office to sell plates and candies, the members of Victory Outreach are out in the community serving as a reminder of the local drug abuse problem. The program itself is also thought by many to be very successful in its goal of rehabilitating drug offenders. Many of the criminal justice officials that I spoke to during the course of my fieldwork commented on the success of the program. The program however, is not recognized by the court system as a valid rehabilitation program. Therefore, drug offenders cannot participate in the Victory Outreach program in place of the state mandated programs.

There are other religious groups that cater to the rehabilitative needs of drug addicts in the community. One such program is Narcotics Anonymous and Cocaine Anonymous, which follow the Christian teachings for rehabilitation similar to those employed by Alcoholics Anonymous. These groups serve as a support space where addicts can help each other cope with the pressures of staying clean. My aunt was a regular participant in the program. She even helped motivate other relatives with drug problems to show up at the meetings, and she had already stacked up a large share of sober chips before she relapsed.

Conclusion

While studies on drug use along the Texas-Mexico border reveal that border inhabitants use drugs at similar rates to individuals in the rest of the United States, drug abuse has become a growing concern in South Texas communities, especially *La Estrella*. Although drug use itself remains on par with the national rate, cocaine use in the community has escalated in recent decades. As demonstrated by the ethnographic descriptions I have provided, drug abuse is a devastating reality in the community of *La Estrella*. Given the intensification of border policing and the escalation of international drug trafficking through the region, the possibility exists for an explosion in the rates of drug use and drug abuse in the South Texas border region. Drug abuse could reach unprecedented levels in this region if preventative measures are not taken seriously. Furthermore, local resources for drug rehabilitation are already strained in the area, and could not adequately support an increase in the number of drug offenders. Priority must be given to invest more local, state and federal resources for drug prevention and drug rehabilitation programs. An important next step in this process is state recognition of successful faith-based drug treatment programs such as Victory Outreach. United States drug demand is also a key driving force in the trafficking of narcotics through the South Texas border region, which has resulted in significant adverse effects for the community, including escalating levels of drug abuse, violence and incarceration. National attention must be focused on a serious assessment of drug prevention and rehabilitation strategies, in order to alleviate the negative impacts of drug trafficking and drug abuse in one of the poorest and marginalized areas of the U.S.—*La Estrella*.

NOTES

1 I use pseudonyms throughout for both place names and individual's names in order to protect the identity of those involved.

2 The Chicago School of Sociology conducted urban ethnographic fieldwork within a symbolic interactionist framework. With respect to gangs, these scholars argued that gang formation was a product of immigrant adjustment to settlement in the American urban environment, and that gangs also served to protect these immigrant communities from outsiders. They argued that once these immigrant communities adapted and assimilated into American society gangs would no longer serve a social function and therefore gangs would not continue to form in these communities.

3 The terms defined in this section are my working definitions of terms related to drug abuse. My conception of these terms is grounded in workshops that I participated in at the National Hispanic Science Network on Drug Abuse Summer Research Training Institute held at the University of Houston in June 2008 and sponsored by the National Institute on Drug Abuse. I am indebted to the participants and organizers of the institute who have been instrumental in helping me formulate my understanding of these concepts. My formulation of these concepts is also rooted in the social reality of drug abuse that I observed in *La Estrella*.

4 I cannot fully address the complex history and process of changes in the international drug trade in this article. I do write at length about the history of the drug trade and how it has impacted the South Texas Border Region in my dissertation, *From Vaqueros to Mafiosos: A Community History of Drug Trafficking in Rural South Texas* (which I am currently working on completing) and to a lesser degree in my Master's Thesis, *Cuando llegaron las drogas: A History of Drug Trafficking in a Rural South Texas Community*.

5 *Corte* is a cutting agent used to decrease the potency of cocaine (in this case it is vitamin powder).

6 These excerpts are taken from: The State of Texas, Drug Offender Program, Participant Workbook

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