

Discourses on Drugs and Immigration: The Social Construction of a Problem

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Abstract: Drugs and drug related behaviour have always been subjected to processes of social construction and moral valuation. The aim of this article is to explore the role of drugs in discourses about immigration and to highlight the social implications of this. Twenty-two narrative interviews of native people in different districts of diverse cities of Valencia Community (Spain) were analysed according to a sociological discourse analysis model. Clear differentiation can be seen between the image of heroin addicts native to the districts themselves and the image of Latin-American immigrants who abuse alcohol. While the former were described with empathy and pity as victims of social problems and drugs, immigrants were seen as intruders, threatening coexistence in the district. These differences in discourse can lead to different social practices and therefore to the marginalisation of immigrants using their alcohol abuse as an argument.

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1. Introduction

The analysis of discourse in social sciences, based above all on FOUCAULT's work and developed along different lines of Critical Discourse Analysis (FAIRCLOUGH, 1995; JÄGER, 1999; LACLAU & MOUFFE, 1985; VAN DIJK, 1993a; WODAK, 1996), has been used on several occasions to reveal racism in different spheres of contemporary societies both in Spain (ARAMBURU OTAZU, 2002; BAÑÓN HERNANDEZ, 2002) and in other parts of the world (MALLINSON & BREWSTER, 2005; MANERI & TER WAL, 2005; TILBURY & COLIC-PEISKER, 2006; VAN DIJK, 1993b, 2005). In Spain, where immigration is still a recent phenomenon, there is major interest in the process of the new residents' full integration into society, which also means integration into the social imagination of what society is. [1]

Spain has gone from being a country with high emigration to the country with the highest rate of immigration in Europe (EUROSTAT, 2005). In 2000 the municipal census only recorded 923,879 foreigners in Spain, while in 2006 the country had 3,884,573 foreign nationals, equivalent to 8.75% of the overall population (INE 2000, 2006). Perceptions of the presence of migrants seeking work in metropolitan areas tend to be stronger, since there is in fact a stronger concentration of working migrants in the cities and industrial centres. For this reason cities are of specific interest for research into forms of exclusion and also of coexistence (CUCÓ I GINER, 2004). [2]

Studies on the social perception of immigrants and ethnic minorities all over the world show that there is a negative representation which often links immigration with criminality, social problems, lack of civic safety and with drug dealing or drug abuse (ARAMBURU OTAZU, 2002; GUTIÉRREZ CRUZ, AGULLÓ TOMÁS, RODRIGUEZ SUÁREZ & AGULLÓ TOMÁS, 2004; MANERI & TER WAL, 2005; NAVAS LUQUE, GARCÍA FERNÁNDEZ, ROJAS TEJADA, PUMARES FERNÁNDEZ & CUADRADO GUIRADO, 2006). The fields with negative connotations are openly or latently used in discourses, as an argument to convey rejection of the immigrant population. The notion of "discourse" as it is used in this article refers to a structured and institutionalized way of speaking whose rules of creation can be brought to light and can be an object of social analysis (FOUCAULT, 1972; LINK, 1986). These rules limit and structure the way subjects talk. In this sociological discourse model it is assumed that discourses and non-discursive reality (e.g. social action, institutions) do influence one another. [3]

When talking about drug consumption, different discourses can be identified. Although judiciary and police discourses of criminalisation and rejection are prevalent in the field of social representations of drug users, there is also a relationship between drug-dependence and concepts of illness, a need for help, and weakness. This leads to discourses with a medical-sanitary and socio-cultural framework (BERJANO PEIRATS, PONS DÍEZ & LLOPIS GOIG, 1996; ROMANÍ, 1997). [4]

Furthermore, the term "drug" itself is not clearly defined and its definition is embattled in an entangled web of discourses from the legal, medical and moral spheres (ESCOHOTADO, 2000). Its current definition often refers to the term "addiction", but this medical term is itself an innovation of the modern age, since the abuse of substances had been considered in older discourses more as a moral fragility (BAILEY, 2005; HAMMERSLEY & REID, 2002; REINARMAN, 2005). The word "addiction" is today used to refer to a large number of practices not only connected with the use of substances. [5]

The lack of coherence in the use of concepts in discourses on drugs and drug-use manifests underlying social conflicts (BROOK & STRINGER, 2005). Thus, an analysis of the use of these terms can help in understanding these subjacent conflicts. [6]

In discourses in which drugs and immigration or ethnic minorities appear, there is a vivid interchange of stereotypes and prejudices. Nightmare stories from the USA about crack use by Afro-Americans in comparison to the image of white cocaine consumption (REINARMAN & DUSKIN, 1992; ZERAI & BANKS, 2002) draw on both the negative image of the drug itself and the socio-cultural stereotypes of its users. ROOM (2005) describes how drug use can thus become an ethnic marker and strengthen social differentiation. [7]

Two highly disputed discursive lines, decisive for future models of coexistence, cross over in discourses on immigration and drugs. These discourses reveal key tools for integrative policies and social inclusion on the one hand, or for repressive policies and marginalisation by depersonalisation and stigmatisation of large social groups on the other. The main aim of this article is to explore the role of drugs in discourses about immigration and to highlight the social implications of this. This implies an analysis of a) the *assignment* of group belonging, b) the *attribution* of certain types of practices to these groups and c) the *valuation* of these practices (HOLZ, 2001). [8]

2. Methodology and Design of the Study

Twenty-two semi-structured, narrative interviews were held with Spanish nationals older than 15 years of age and of both sexes, of different ages and socio-economic status and from the districts of Alicante, Castellón and Valencia ([Appendix 1](#)). The study was funded by the regional administration (Generalitat Valenciana) and by a research the grant "V Segles" of the University of Valencia. [9]

Interview partners were recruited with the help of neighbourhood associations and were sampled through socio-economic criteria such as sex, age, profession and district. [10]

Before starting the interviews the participants were assured of anonymity and confidentiality and informed that the average length of the interview would be roughly one hour. They were also informed they would be reimbursed for their time and participation in the form of a gift voucher worth 15 Euros. After this introduction there was a chance to ask questions and clear up any doubts. They were finally asked to give their consent to record the interview. Then the interview started according to the schedule previously established. All the interviews were recorded and transcribed in full. [11]

In the interviews social change in the neighbourhood was presented as the central topic by the interviewer, so as not to introduce or construct migration or drugs as social problems and thus influence the discourse. Nevertheless immigration always arose spontaneously as an issue in the interviews although the subject of drugs had to be brought up by the interviewers at times. When asked for general reflections on either topic and later on for specific examples for these, statements of varying levels of abstraction and circumspection were obtained from participants. These statements were later on subjected to a

discourse analysis, to make explicit the strategies and effects of inclusion, exclusion or simply differentiation. [12]

The analysis consisted of two stages; a surface analysis and an interpretative analysis (DIAZ-BONE, 2005). [13]

In the surface analysis the text was reviewed and codified through heuristic questions, which acted as the first tool for heading into the discourse and which had the aim of allowing to appear the main categories for later interpretative analysis:

1. How are "the others" denominated by the interlocutors and what categories are designated to their own group?
2. Which possibilities and strategies for distinguishing the two groups had been applied?
3. What attributes are assigned to both groups and how are these attributes valued?
4. What are the relations between both groups, that is, of what type and of what frequency are these?
5. Where do the interlocutors position themselves in relation to other social actors and what reasons do they give for their self-definition (distance vs. identification)?
6. What topics of discussion arise and how are the actors introduced in these?
7. What actions are attributed to the different actors, particularly in the field of drugs, and what causes of actions are presented (presence/absence of explanations and personal and group responsibilities vs. circumstantial responsibilities)?
8. What rhetoric are there and what function do they have?
9. What strategies are possible (degree of freedom), what are the ones chosen and why are these chosen and not others?
10. How are paradoxes and contradictions dealt with? [14]

This part of the analysis provided the categories, classifications, notions, themes and strategies for the later interpretative analysis. Diverse categories of social groups were identified, such as national, ethnic or regional groups, to which valuations had been assigned. The topics on immigration which came out were of social deviation, criminality, conflict and also alcohol abuse. It became clear at this stage that semantic and rhetorical strategies were being used by respondents to a great extent, sidestepping personal responsibility for what was said (GOTSBACHNER, 2001; KLEINER, 1998). [15]

In the interpretative analysis (DIAZ-BONE, 2004, 2005) the *relations* between the discursive objects found in the previous stage were explored. Little by little, in circular movements, this helped to detect networks, similarities, differences, references, causal connections, etc. The term *abductive method* (PEIRCE, 1998) has been coined for this technique, which ALONSO (1998) compares with

Sherlock Holmes' detective method and FOUCAULT (1972) with archaeology, and which does not correspond to the deductive model nor the inductive one. The main foci of interest here are the rules for such relations and on the linking chains, the classifications and oppositions and the common denominators of the parts of the discourse. [16]

Sociological discourse analysis, to avoid a common misunderstanding, is not a linguistic or hermeneutical one (KELLER, 2005). The social sense which is the object of this analysis does not lie in the subjects themselves but in a supra-individual social structure. Thus sociological discourse analyses aim to analyse social structures by focusing on discourses. Therefore, the present work presents the findings of a study about structural social marginalisation by the use of specific images related to drug abuse. [17]

It must be further stressed that this article does not pretend to present a quantification of qualitative data (which would require a far larger number of interviews) but tries to find the rules of one or more discourses by deciphering the subjacent structure of discourse production. Therefore the analysis was stopped when theoretical saturation was reached and the interpretation of more interviews did not bring up new insights. [18]

3. Results

In the interviews only exceptionally illegal drugs were linked to immigration by the interviewees. By locating the interviews in the interlocutors' districts, and by asking about their own experiences and observations, most of those interviewed kept away from clichés produced by media discourses and there were a number of differentiations both between different drugs and between their users, and hence of different groups of immigrants. But these differentiations do not imply social images without prejudices and arbitrary standpoints. [19]

When tackling the matter of drugs, not all the substances scientifically considered addictive come up in the conversation. The statements made dealt only with a small number of drugs whose positions are not legitimated by the number of users. So, for example, in no interview was the matter of sleeping pills dealt with. Neither was public consumption a decisive factor in the importance given by the interviewees to the drug use, as tobacco dependency remained practically unmentioned. Finally, the illegal nature of the drugs was determinant for their discursive relevance, since alcohol was indeed talked about. [20]

Making some groups of drugs a subject of discussion in the interviews is explained by the prominent role that these have in different public discourses and their connectivity with other discourses such as those of criminality, social distress or deviant conduct. This does not refer to a tautology, but to a discursive spiral which has several actors and several possibilities of connection with other discourses. [21]

Though cocaine, pills and cannabis were also mentioned, there were many more statements made by interviewees about heroin and alcohol. As the problems related to these two types of drugs corresponded in the social perception to different social groups, the following analysis is centred on the differences between these groups found in the interviews. [22]

3.1 Heroin and its local users

The group of drugs most talked about, along with alcohol, is that of opiates, and specifically, heroin. What is more, heroin is often seen as synonymous of "the drug" and the only drug linked in the discourse to addiction, in the way, that heroin consumption was always understood as an addiction. But addiction is not the only reason for the prominent position of heroin in these discourses. There are several reasons why there is an extremely vivid public discourse about heroin: the criminality linked with both the dealing and the obtaining of economic resources by the users, the visibility of its consumption and of its users, and many other social problems connected with heroin such as AIDS. This could be an indication of a discursive spiral in which negative topics can be connected and nourish each other. [23]

As a first result it should be stated that the image of the social group connected with heroin is that of Spanish people and has nothing to do with immigration, since heroin consumption is a phenomenon which boomed in the 1980s and early 1990s, that means, before the arrival of large groups of immigrants to Spain. However, it is worthwhile observing the way heroin and its consumers is talked about:

"Well some really bad, really bad ... We've seen people die in the neighbourhood through drugs and AIDS. It's terrible. Some very young people have died ... through overdoses or AIDS, it's terrible. It's a drama, a family drama; it all goes on so close to your own home" (female, Age: 40).

"What I mean for example is that there was a group of young people and almost all of them have died—it's a real misery. Why? I can't remember, if it was heroin or what, but a lot of people from around this neighbourhood have gone through it. The last one to die was Alberto, a really lovely person. He died five or six years ago and it was a whole group, a generation of boys and girls who have fallen, listen, it was a misery seeing them at the street. How they were, little by little degrading themselves. They all met in a small park and it was a real misery. A real misery, till the last one died, Alberto. [...] But anyway, these people were self-destructive, only themselves. It didn't occur to them to sell. Because they were people of the same neighbourhood" (female, 50). [24]

In the first example, the speaker is using the plural form referring to the community in the neighbourhood. The victims are the people who die and the interviewee underlines that these were "very young people". Furthermore there is empathy: the situation was happening in the district and because of being a witness it also affects the respondent. "Drugs" and "AIDS" were named as

responsible actors in this story. The interviewee repeats these social actors twice ("drug/overdoses" and "AIDS") and the fact that it is "terrible" and a "drama. It is stated that it is a "family drama" which provides the link throughout the concept of family from the interviewee to the family and finally to the direct victims. The family context thus produces empathy and helps bridging towards the whole community in the neighbourhood. [25]

Finally the closeness is expressed in a double sense using the expression "so close to your own home". First of all, it refers to a physical, concrete closeness: the drug addicts and the dead were located only a few meters away from the interviewee's own residence. At the same time the home is the privacy, the centre of life which needs to be protected, where the family is and which is threatened by the drug. In this last sentence the second singular form is used including also the interviewer into the empathic group. [26]

The speaking subject (BÜHRMANN & SCHNEIDER, 2007) positioned oneself as co-affected by a social and health problem and as empathic towards the families and the victims of heroin. Due to this (co-)affection and empathy the interviewee appears as also being threatened. In the classification there is a dualism: on the one hand "the neighbourhood", the families, and "very young people" and on the other hand "drugs" and "AIDS". This leads to a specific phenomenal structure, defined as the use of arguments, moral valuations, causes, results and responsibilities (KELLER, 2007). In the case described it is the story of the interviewee's own group being threatened by the drug. The very core of life (family, home) as a value is exposed to an external danger. All this is presented in a highly dramatic narrative structure. [27]

In the second quote, the interviewee talks about "people", "boys and girls" of the "neighbourhood" and even knows one of them by name and describes him as "a really lovely person". Again, empathy is described various times by expressing that it is a "misery". This quotation is part of the same discourse as the former one. The victims are the people of the neighbourhood of whom the drug addicts are a part. The term that they were "degrading" themselves refers to an action and shows that they are not only helpless victims of the drug as it appears in the first quotation. But there can also be seen that in this context they do not harm anyone else, especially no one of the neighbourhood but only themselves. This fact is repeated by the respondent and as a reason she states that they were people "of the same neighbourhood". [28]

In short it can be stated that:

- The heroin users of the same neighbourhood are seen with empathy and pity.
- They are included into the own group of reference by the link of family and neighbourhood.
- They do not harm the neighbourhood or their own reference group.

- Responsibility for the situation is attributed to concepts like "drugs" and "AIDS".
- Drug addicts are described as victims and other people of the neighbourhood are co-affected. [29]

In this last point, the co-affectedness of the neighbourhood, heroin users are seen to pass on their self-degradation to the whole district. Even though there is no direct relationship between immigration and heroin, however, in the social imagination one of these could be described as the functional equivalent of the other. The common denominator of degradation enables a conversational strategy to start with one of these topics and switch on to the other:

"Junkies were found dead for example, through settling scores or I don't know what ... a pool of blood around them, near the schools [...] Now it's more hidden away, you have to go into a particular alley and you can see things going on, but shall we say those images have been cleaned up a bit and then anyway it continues to be grey, a depressed area, an area with a lot of immigration now ..." (male, 25). [30]

What immigration and heroin have in common is that they degrade the neighbourhood for the interlocutors. That is why some of the respondents used a conversation strategy to start with one and go on with the other, which is more than a pure juxtaposition, yet it has a common denominator. The common denominator is degradation, in the previous quotation described as "depressed area". Also it is not clear here if immigration is seen as a cause of depression or just another synonym of it. Migration is clearly linked to the degradation of the district and therefore also to the drug addicts although there is no direct relation between both. [31]

3.2 Alcohol and its Latin-American users

"You can often see immigrants drunk on the ground and things like that. But anyway, you've always seen things like that in this area. If it wasn't immigrants it would be junkies ... or someone else, anyway ..." (male, 25).

This statement, which directly introduces the replacement of the figure of the "junkie" with that of the immigrant through the subject of the abuse of drugs, leads straight into the group of alcohol and Latin immigration. Alcohol, though not a drug connected with illegality, gets its discursive treatment through the relationship with deviant behaviour, that is, alcohol only becomes a social problem and thus part of the discourses on social problems when it is connected with unwanted conduct. Alcohol consumed on less visible or socially more accepted occasions did not arise as subject in any of the interviews. In the interviews held in this study of neighbourhoods without real bars or leisure areas, the group with which alcohol consumption was related was almost exclusively that of Latin American immigrants. It is this group which, in addition to heroin addicts, produces the most comments during the interviews. But the discourse of alcohol

abuse by Latin Americans differed in a substantial way to that of autochthonous heroin abuse:

"There are for example South Americans who finish work on a Friday and start drinking until Sunday night. And they put their music on loud in the early hours of the morning because it's a day off for them. They are accustomed to doing it that way. Then, if twenty-two of the flats in a building of thirty families are taken by people ... people who have that custom, all we can do is shut up and endure it? And that creates a lot of problems, yes indeed, a lot of problems. The police know because they get called all the time and this group ... they are mainly the South Americans. It's a noise level, above all in summer. In winter when you close the windows and it gets dark early you can close everything and more or less get by, but in summer when it's hot and you have to sleep with your window open, it starts to get really troublesome. And then ... they are argumentative ... they have another way of life ..." (female, 40). [32]

The interviewee repeats a complaint which could be heard quite often during the interviews: the trouble produced by Latin American immigrants abusing alcohol. She starts describing a situation in which not the whole group of Latin American immigrants but only some of them play a role ("there are ... South Americans"). The behaviour is described as drinking from Friday to Sunday. Here it could be asked if it is an exaggeration or if the respondent is so distanced from the group that for her there is no difference in whether they really are the same people who drink on Friday and Sunday. But drinking alcohol is not the only problem. The problem is the behaviour related to that binge drinking in this case introduced as putting "their music on loud in the early hours of the morning". The explication given for this is their "custom". This custom in connection with the huge amount of immigrants who follow this custom converts drinking into a social problem. Here the idea is that immigration becomes a problem especially when appearing in large numbers. The quantity of immigrants given by the interviewee (73%, 22 of 30 flats) shows, that immigration is seen as a large amount. In comparison to the statistical dates of this area where less than 13% belong to the group of Latin Americans, the distortion in the social perception can be seen easily. The social problem which emerges as a result identifies the interviewee together with "us" ("we") as victims who cannot do anything else than "shut up and endure it". She repeats various times that there are "a lot of problems". [33]

Until now it was a story about "them" and "us" but now a new social actor is introduced: the police. Here it could be read as a symptom of the importance of the problem because the police usually are intervening only in more or less serious problems, but it could be understood also as testimonial and for confirming the truth of what was said ("The police know"). Interesting here is the change towards the passive voice. "They get called" does not reveal who is calling. It could be deduced that the calls come from the own group but this formerly was described as only passive victims of the situation ("shut up and endure it"). Therefore the only way not to disturb that dichotomy between threat and victims is by not naming who calls the police. In fact the natives are described as trying to protect themselves in a passive way: they close the windows in order not to hear the noise outside which enables them to "get by"

"more or less". But this means that the situation in summer gets "really troublesome". At the end it is stated as especially negative, that "they are argumentative". Again it is not said with whom they have the arguments. The role of the own group is not clear and it could be speculated that the immigrants discuss with the police. As a reason for that behaviour the "way of life" is named. [34]

In this short quotation almost all components of the discourse about Latin Americans and drugs appear, with a dichotomisation between "them" and "us"; Latin Americans demonstrating threatening behaviour and creating social problems through binge drinking and an elevated noise level on the one hand, and indigenous locals as passive victims on the other. Although the speaker starts talking about only some South Americans, the behaviour is linked later on with the whole group through the concepts of "custom" and "way of life". In this way, all the Latin Americans living in the 22 out of 30 flats are part of the problematic group. The victims only are part of the speaker's own group and there is no place for the possibility that some Latin Americans might also feel bothered or upset by the noise. They are "accustomed" and therefore do not suffer in the same way as the natives. The suffering becomes exclusive to the native group. That means that there is a *dichotomisation* together with a *homogenisation* of both groups and an *ontologisation* of the behaviour as part of a fixed and invariant custom. The behaviour of the "others" therefore is described as dispositional and the problem is pointed out. So even when culture, custom or way of life are used as an excuse for negative behaviour, this ultimately leads to a static opposition between "them" and "us". Finally there is *exaggeration* when the members of other groups are presented as a demographic majority. In the structure of aggressors and victims, the interviewee situates herself clearly in the group of the victims. [35]

Taking a Foucaultian approach towards power, it could be seen here that the situation is defined in repressive terms (ROMANÍ, 1997) and not, as in the case of the native heroin users, in social and sanitarian terms. The appearance of the police shows the material impact of this discourse. The solution offered (and chosen by some people not mentioned) is to call the police. Other strategies related to a social and sanitary model, like help, information, etc., were not mentioned. By identifying the situation in the described way the only possible solution presented is the one linked to repression. [36]

It could be argued that as alcohol *use* is not linked discursively to addiction like it is in the case of heroin, *abusing* alcohol is seen therefore as more negatively in a moral way, which would explain the differences in the discourses. In this case, the fact that there is freedom to use alcohol without abusing it, could make the abuse seem as a voluntary act and therefore appear in a far more negative light. But in the case of young autochthonous binge drinking it shows that an alternative discourse is possible also in the case of alcohol. Only in a few interviews the theme of binge drinking by local youth arose, but nevertheless it is worthwhile quoting an example:

"This is a challenge that they ... we have as local residents, to get some sports facilities, because we can't attempt to get young people out ... that they get out of the square, drinking down litres of beer if they don't have anywhere to go and play football, for instance. Neither is there any willingness to get that done, so it's serious that we can't say to young people that they have resources in some way and there is a mechanism, so that they are not just drinking beer and there is more to life than that. There is no political interest in changing it either, because if the kids ... do sports it even works out expensive. It costs them money out of their own pocket, and it shouldn't have to be like that. Well that's the way I see it anyway. Because you want to facilitate their lives and help kids to have a healthy life and not to get into drugs and all that, because apart from the beer they take other stuff, and then it's hard to give them a quality or prospects in life, if we don't give them the resources, don't you think?" (female, 53) [37]

Various aspects are remarkable in this fragment. The interviewee does not part from a problem, but from a challenge which is faced by the people in the neighbourhood to whom the speaker includes herself using the first person plural. While in the case of the Latin Americans the problematic side of the situation was stressed, the challenge here is not linked to a problem but towards a solution in form of sports facilities where the "young people" can spend their leisure time. There is the idea of an action by the neighbours expressed ("to get young people out") and by the young people ("they get out"). The lack of willingness probably refers to the political sphere. Because of this lack, the situation is "serious" but the reason for that situation does not lie in the youth but in the incompetence of "us" to show them alternatives. There is a complaint about the lack of "political interest" and of the fact that doing sports "costs them money out of their own pocket". It is the task of politics—or more generally speaking—of society as a whole to "facilitate their lives", to "help kids to have a healthy life", to prevent them from getting "into drugs", and therefore "we" have to give them "prospects" and "resources". The structural background can be seen here as a direct cause for the behaviour of the young people. The alarmist tone at the end is not the result of any concern for the interviewee's own condition, but out of concern for young people. She is afraid that these should "get into" drug-taking, while in the case of immigrants the main fear was for the tranquillity of the interlocutor's own situation. [38]

4. Conclusions

Stereotypes of cocaine and synthetic drugs and their local consumers could not be seen in the interviews, and neither could the stereotype of cannabis and North African traffickers. Two opposed images can be discerned: heroin addicts from the neighbourhood and Latin-American immigrants consuming alcohol. In the comparison between the discourses about these two groups, some clear differences can be seen. The discourse about the local population as drug-takers is a discourse in which the threat for the group itself by drugs and social problems predominates. The discourses on immigrants as consumers focus on the threat to the locals and to social coexistence through immigration. [39]

The heroin addicts of the neighbourhood itself were described with empathy and pity while the behaviour of the Latin-American population is negatively dramatised and generalised. The local consumers were put forward as victims, both of drugs and of social problems, and a socio-sanitary model of discourse predominated. In the case of Latin-Americans, naming structural problems acted as a rhetorical background for developing a negative discursive structure on immigration, applying a juridical-repressive discursive model (BROOK & STRINGER, 2005; ROMANÍ, 1997). In the case of local people however, structural explanations were used as an excuse and for victimisation. The negative behaviour of local drug-users was not identified as a further topic for further discussion, and it was affirmed that the heroin addicts in the district itself only harmed themselves but not society because they did not sell drugs. Latin-Americans, by contrast, were seen to threaten the peace in the neighbourhood by means of collective binge-drinking. Table 1 shows the main aspects of the narrative structure of this hegemonic discourse.

	Natives	Latin Americans
Problem	drugs, AIDS, social problems	immigration, antisocial behaviour of immigrants
Relation to the neighbourhood area	do not do any direct harm to the area	threaten the peace in the area
Victims	drug addicts as main victims	native neighbours as main victims
Subject position of natives	empathy towards drug addicts and their families; interviewee, drug addicts and their families belong to the same "neighbourhood" group	conflict between natives and immigrants; immigrants do not belong to the same group as interviewee

Table 1: Aspects of the narrative structure of the hegemonic discourses about native heroin user and Latin American alcohol consumption [40]

These differences can be seen as being part of a general dichotomisation between "us" and "the others" in discourses about migration and ethnic minorities (ARAMBURU, 2002; VAN DIJK, 1993b, 2005) as the discourse about immigration and drugs fits perfectly into a general discursive structure of migration discourses. The clear differentiation of both groups, the victimisation of the own group and the perception of "the others" as problematic are results of every study on migration discourses (ibid.). [41]

In general discourse about migrants the actions ascribed to that group tend to be negative conduct. In our own investigation we found—amongst others—illegal activities, noise, not taking care of children and commercial competition as

examples of negative conduct. There was also reproduction of the urban legend¹ that foreign traders do not pay taxes. The list of instances of undesirable conduct by immigrants is long, while that of undesirable conduct by local people is reduced to anecdotes². While immigrants display such behaviour as members of the immigrant group, locals display such conduct as proper to deviant individuals. The structures of stories about immigration tend to be similar. "The others" are actors with undesirable modes of conduct and "we" are victims who suffer the consequences. [42]

These differences and similar findings as for example the important role of black crack use in the U.S. public discourse (REINARMAN & DUSKIN, 1992; ZERAI & BANKS, 2002) can be explained if one understands the analysis of discourses as the analysis of social structure (DIAZ-BONE, 2004). As has been shown by other research on discourse and immigration (ARAMBURU OTAZU, 2002; BAÑÓN HERNANDEZ, 2002; VAN DIJK, 1993b, 2005), in the case of drugs one can also see clear social differentiations in which the cohesion of society itself is endangered by immigration. Such discourses can be understood in this respect as powerful means of defending social positions, and drugs are in theory only *one* example in which marginalisation can be revealed. The neighbourhood angle proved ideal for stressing these differences since on a more abstract level heroin addicts are indeed clearly described negatively, as shown by other studies (LLOPIS GOIG et al., 1996). [43]

This differentiation cannot be explained by the more negative social image of alcohol, and in other studies it is heroin which is seen more negatively than alcohol (LLOPIS GOIG et al., 1996). But this study also shows that the perceived *abuse* of alcohol is seen as problematic as the *use* of heroin. If we bear in mind that local people's behaviour is qualified as harmless for the neighbourhood, while immigrants' behaviour was described in terms of abuse, similar rejection structures ought in fact to be found for both forms of conduct. The differences found in this study in ascribing varying supposed values to the different types of conduct can thus be understood as the result of latent racism. [44]

The discourse on drugs must be placed in context with other discriminatory practices; the image of the threat by immigration in the example of drugs can thus be considered as a reference and connection with these exclusive forms of conduct. But at the same time the discourse comes forward and is established as a new reference for non-discursive practices such as socio-sanitary help in the case of locals or repression in the case of immigrants. BROOK and STRINGER warn that construction of an opposition between medical-sanitary and juridical-repressive discourses may prove to be a trap (BROOK & STRINGER, 2005). Socio-sanitary rhetoric may also work to "help" others against their will and with the same consequences as repressive discourse (BROOK & STRINGER, 2005; REINARMAN, 2005). [45]

1 On this urban legend and the nullity of its content see also ARAMBURU (2002).

2 This is also affirmed by ARAMBURU (2002) and VAN DIJK (1993b, 2005).

The new figure of the Latin-American immigrant abusing alcohol has not only been suggested in popular discourses. In scientific discourses the idea of the Latin-American group in Spain constituting another group requiring special attention in regard to alcohol consumption patterns is also gaining pace (CAMACHO & COMAS, 2003; CONDE & HERRANZ, 2004; GOMBERG, 2003). Also for the U.S., WALLACE et al. (2002, 2003) show significant differences between ethnic groups' consumption of alcohol and other drugs. But it should be warned against attributing these differences to the "ethnic origins" of the individuals. It contains the danger that alcohol abuse becomes an "ethnic marker" (ROOM, 2005) and so makes the search for social causes more difficult. Instead of this, patterns of behaviour should be interpreted in a complex frame of interrelation with the rest of the society (BECK-GERNSHEIM, 2004). This shows that the social construction of the "Latin-American immigrant with alcohol problems" is not only produced by popular discourses. One should also have a look at other social agents, such as socio-sanitary science, but also the media, the juridical-repressive apparatus, etc., because the social image is formed at the point where all these discourses meet. As BLOOMFIELD, GRITTNER, KRAMER and GMEL (2006) pointed out in their investigation about alcohol consumption in different European countries, patterns of inequality in alcohol consumption are not universal and differ between groups of countries, and this has to be taken into account when making cross-cultural comparisons. It would also be of interest to research into the influence of such labelling (MIRANDA, 1998) upon the immigrant population and their possibilities for integration. Also, further research is needed into the influence of these discourses upon social policy, it being important to determine what the emergence of this new social figure means for socio-sanitary and juridical-policing practises. [46]

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Appendix 1

Number	District and date of the interview	Age	sex
1	Los Ángeles, 29.04.2006	22	f
2	Los Ángeles, 29.04.2006	33	f
3	Los Ángeles, 29.04.2006	53	f
4	Los Ángeles, 28.04.2006	41	m
5	Els Orriols, 09.05.2006	24	m
6	Els Orriols, 07.04.2006	50	f
7	Parque del Oeste, 26.05.2006	36	m
8	Parque del Oeste, 26.05.2006	26	m
9	Els Orriols, 05.05.2006	40	f
10	Els Orriols, 12.04.2006	80	m
11	Parque del Oeste, 26.05.2006	22	f
12	Els Orriols, 27.04.2006	25	m
13	Los Ángeles, 29.04.2006	21	f
14	Los Ángeles, 29.04.2006	25	m
15	San Marcelino, 02.06.2006	42	m
16	Parque del Oeste, 26.05.2006	21	f
17	San Marcelino, 01.06.2006	47	f
18	Los Ángeles, 27.04.2006	19	f
19	San Marcelino, 01.06.2006	49	m
20	San Marcelino, 09.06.2006	47	m
21	Los Ángeles, 27.04.2006	30	f
22	Parque del Oeste, 02.06.2006	38	m

Table 2: Interviews according to name assigned, district and date of the interview, age and sex

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