



CHARACTERIZATION OF CHEMICALLY DEPENDENTS IN TREATMENT AT A THERAPEUTIC COMMUNITY

CARACTERIZAÇÃO DE DEPENDENTES QUÍMICOS EM TRATAMENTO EM UMA COMUNIDADE TERAPÊUTICA

CARACTERIZACIÓN DE LOS DEPENDIENTES QUÍMICOS EN TRATAMIENTO EN UNA COMUNIDAD TERAPÉUTICA

Márcia Astrês Fernandes¹, Marielle Miranda De Moraes Ribeiro², Layanne Bernardo de Britto³, Josilene Farias Chaves⁴, Cláudia Maria de Sousa Carvalho⁵, Juliana Macêdo Magalhães⁶, Hellany Karolliny Pinho Ribeiro⁷

ABSTRACT

Objective: to characterize the profile of chemically-dependent individuals from a therapeutic community. **Method:** quantitative, descriptive and exploratory study, which involved 22 users in treatment at a therapeutic community. Data were collected by means of a questionnaire and the descriptive statistical analysis was performed and presented in percentage by the statistical program SPSS version 19. **Results:** the participants' demographic profile showed that the most significant age group was 39 through 45 years (27.2%), and the majority (45.4%) had only incomplete primary education. Most users were unmarried (68.1%), Catholics (81.8%), and unemployed (36.4%). In relation to the use of psychoactive substances, alcohol accounted for 90.9% of the participants and crack, 81.8%. The majority (95.4%) had family support during the completion of treatment, mainly by the mother (59.1%). **Conclusion:** chemical dependency affects various areas of an individual's life, and it is characterized by its early beginning, which may be an important factor for the establishment of sociodemographic characteristics presented in this research. **Descriptors:** Therapeutic Community; Mental Health; Substance-Related Disorders; Illicit Drugs; Nursing; Health Care.

RESUMO

Objetivo: caracterizar o perfil de indivíduos com dependência química de uma Comunidade Terapêutica. **Método:** estudo quantitativo, descritivo e exploratório, que envolveu 22 usuários em tratamento em uma comunidade terapêutica. Os dados foram coletados por meio de um questionário e a análise estatística descritiva foi realizada e apresentado em percentuais estatísticos pelo programa SPSS versão 19. **Resultados:** o perfil sociodemográfico dos participantes demonstrou que a faixa etária mais expressiva foi de 39 a 45 anos (27,2%), sendo que boa parte (45,4%) tinha apenas ensino fundamental incompleto. Dentre os usuários houve predomínio de solteiros (68,1%), católicos (81,8%), e desempregados (36,4%). Em relação ao uso de substâncias psicoativas, o álcool representou 90,9% dos participantes e o crack 81,8%. A maioria (95,4%) teve apoio familiar durante a realização do tratamento, principalmente pela mãe (59,1%). **Conclusão:** constatou-se que a dependência química atinge diversos âmbitos da vida do indivíduo e tem como característica o início precoce, o que pode ser um fator importante para a constituição das características sociodemográficas apresentadas nessa pesquisa. **Descritores:** Comunidade Terapêutica; Saúde Mental; Transtornos Relacionados ao Uso de Substâncias; Drogas Ilícitas; Enfermagem; Atenção à Saúde.

RESUMEN

Objetivo: caracterizar el perfil de las personas con dependencia química de una comunidad terapéutica. **Método:** estudio cuantitativo, descriptivo y exploratorio, con la participación de 22 usuarios en tratamiento en una comunidad terapéutica. Los datos fueron recolectados por medio de un cuestionario, y el análisis estadístico descriptivo se realizó y presentó en porcentaje en el programa estadístico SPSS versión 19. **Resultados:** el perfil demográfico de los participantes mostró que la edad más significativa fue de 39 a 45 años (27,2%), siendo que una buena parte (45,4%) sólo tenía educación primaria incompleta. Entre los usuarios, hubo un predominio de solteros (68,1%), católicos (81,8%) y desempleados (36,4%). En relación con el uso de sustancias psicoactivas, alcohol representó 90,9% de los participantes y crack, 81,8%. La mayoría (95,4%) tuvo el apoyo de la familia durante la realización del tratamiento, principalmente por la madre (59,1%). **Conclusión:** la dependencia de sustancias químicas afecta a diversos ámbitos de la vida de un individuo, y tiene como característica el inicio temprano, lo cual puede ser un factor importante para el establecimiento de características sociodemográficas presentadas en esta investigación. **Descriptor:** Comunidad Terapéutica; Salud Mental; Trastornos Relacionados Con el Uso de Sustancias; Drogas Ilícitas; Enfermería; Atención a la Salud.

¹PhD, Federal University of Piauí/UFPI. Teresina (PI), Brazil. Email: m.astres@ufpi.edu.br ORCID iD: <https://orcid.org/0000-0001-9781-0752>; ^{2,3,4}Nurse (graduate), University Center Uninovafapi. Teresina (PI), Brazil. E-mail: marielle-miranda@hotmail.com ORCID iD: <https://orcid.org/0000-0001-8605-2247>; E-mail: layanne_britto@hotmail.com ORCID iD: <https://orcid.org/0000-0002-2615-1099>; E-mail: werisvantavares@hotmail.com ORCID iD: <https://orcid.org/0000-0001-8959-9766>; ^{5,6}MSc, University Center Uninovafapi. Teresina, PI, Brazil. E-mail: c.mcarvalho1967@gmail.com ORCID iD: <https://orcid.org/0000-0001-8901-3390>; E-mail: julianamdem@uninovafapi.edu.br ORCID iD: <https://orcid.org/0000-0001-9547-9752>; ⁷Student, Nursing Course. Federal University of Piauí/UFPI. Teresina (PI), Brazil. E-mail: hellanyribeiro@hotmail.com ORCID iD: <https://orcid.org/0000-0002-3157-7924>

INTRODUCTION

The use and abuse of psychoactive substances, coupled with the use of new substances, became a serious public health problem in the world panorama. The United Nations Office on Drugs and Crime (UNODC), in conjunction with the World Health Organization (WHO), in its report on drugs treatment and care, pointed out that 205 million people consume illicit drugs in the world, of which 25 million are within the framework of dependency, indicating consumption of drugs to the group of 20 major risk factors for health in the world and one of the 10 main factors in developing countries.¹⁻²

The question of drugs use has occupied a significant space in the media, in the State policies, government plans and in the everyday life of mental health workers and services. It is a practice of human beings since the dawn of mankind, and the decision about the drug type for consumption bases on their needs and subjective and social motivations.³

In addition, chemical dependency is a chronic and relapsing disease, and the continuous use of psychoactive substances causes changes in the structure and functioning of the brain. In this sense, the use of psychoactive substances is understood as a consequence of a disorder of the whole person, affecting the various areas of life. Among the various psychosocial and biological damage, there are situations involving the use, such as the occurrence of risk sexual behaviors, involvement with violent acts and damage to health, such as malnutrition, neurological problems and comorbidities.⁴⁻⁵

With the Psychiatric Reform, the number of psychiatric beds for the treatment of chemically dependents financed by the Unified Health System (UHS) reduced. Thus, various services arose, such as the Psychosocial Care Centers (CAPS - *Centros de Atenção Psicossocial*) and the therapeutic communities. These are methods of health attention that arose in Britain in 1940, for the treatment of psychiatric patients and, subsequently, were adapted to treat chemically dependents. In Brazil, it appeared in 1968 in the city of Goiânia-GO, resulting from an evangelical religious movement, called *Desafio Jovem*.⁶⁻⁷

Thus, they are characterized as private institutions and often with confessional character, in which religion is the main treatment strategy. Moreover, this type of community has a specific treatment program,

which lasts from six to twelve months, depending on the institution, rigid rules and mandatory activities, which must be followed by all who are admitted. The visits of relatives are meager and restricted and there is no external contact, including school and professional activities.⁸

OBJECTIVE

- To characterize the profile of chemically-dependent users in treatment at a therapeutic community.

METHOD

Quantitative, descriptive and exploratory study, conducted at a therapeutic community for chemical dependency, located in a municipality in the state of Piauí, in the month of September 2016, with 22 male users who were in full admission. The inclusion criteria considered those aged greater than or equal to 18 years and who were in the Community during the collection period. Those aged less than 18 years were excluded.

Data were collected by means of a questionnaire with closed questions. After studying and analyzing the material, the obtained results were entered into tables. In this way, the descriptive statistical analysis was performed based on the responses from the questionnaires and presented in percentage by the statistical program SPSS version 19, expressing the variables in absolute numbers and percentages, which enabled the discussion according to the literature.

This article came from the research project, approved by the Research Ethics Committee of the University Center UNINOVAFAP, CAAE 56959316.7.0000.5210, obtaining a favorable opinion number 1,709,504 on 31 August, 2016. The ethical precepts were safeguarded in accordance to Resolution 466/2012 of the National Health Council.

RESULTS

Table 1 shows the Age Range; City of Origin, Nationality; Ethnicity; Education; Religion; Marital Status; Current City; Federative Unit; Occupation; Social Benefit; Monthly Income and Affiliation. Most participants were in the age range from 18 to 24 years and in the age range from 32 to 38, both with 22.7%; followed by the age range from 39 to 45 (27.2%), and by the age from 25 to 31 years, which accounted for 18.2% of the participants.

In relation to city of origin, most participants (63.6%) of the study came from

cities in the countryside of the state of Piauí. Regarding ethnicity, 59.1% are *pardos*, 31.8% are black, and 9.1% correspond to the white color. Most participants (45.4%) had incomplete primary education and the minority (4.6%) had incomplete higher education.

Regarding religion, almost all (81.8%) members of the study were Catholics. With regard to marital status, there was a predominance (68.2%) of singles, followed by those with stable union (18.1%); married accounted for 9.1% and the rest was divorced. Furthermore, 72.7% lived in the countryside of the state of Piauí; 22.8% in another state and 4.5% in the capital of the state.

In relation to the labor market, half (50%) reported having a job and the other party did not. Furthermore, regarding occupation, most participants (36.4%) were unemployed; 31.8%

were self-employed and 31.8% were working; however, they did not mention the occupation. In the aspect of receiving social benefits: those that did not receive any benefit prevailed (81.9%); and among those that received, half received the *Bolsa Família* program benefit, and the other half received retirement.

The majority (77.3%) received from one to two minimum wages; 18.1% reported a monthly income of two through four wages and 4.5% stated an income of four or more minimum wages. With regard to the affiliation: 59.1% reported having children and 40.9% had no children, as seen in Table 1.

Table 1. Sociodemographic and occupational characterization of the participants (n=22). Teresina (PI), Brazil, 2016.

Variables		N	%
Age group	18 - 24 years	5	22.7%
	25 - 31 years	4	18.2%
	32 - 38 years	5	22.7%
	39 - 45 years	6	27.2%
	46 - 52 years	1	4.6%
	53 - 60 years	1	4.6%
City of origin	Capital	3	13.6%
	Countryside	14	63.6%
	Other state	5	22.8%
Nationality	Brazilian	22	100%
	Others	0	0.0%
Ethnicity	White	2	9.1%
	Black	7	31.8%
	<i>Pardo</i>	13	59.1%
	Yellow	0	0.0%
	Indigenous	0	0.0%
Education	Incomplete elementary school	10	45.4%
	Complete elementary school	2	9.1%
	Incomplete high school	4	18.1%
	Complete high school	5	22.8%
	Incomplete higher education	1	4.6%
	Complete higher education	0	0.0%
Religion	Evangelical	2	9,1%
	Catholic	18	81.8%
	Others	2	9.1%
Marital status	Unmarried	15	68.2%
	Married	2	9.1%
	Divorced	1	4.6%
	Widower	0	0.0%
	Stable union	4	18.1%
Current city	Capital city of Piauí	1	4.5%
	Countryside of Piauí	16	72.7%
	Other state	5	22.8%
FU	Piauí	17	77.3%
	Other state	5	22.7%
Part of the working market	Yes	11	50.0%
	No	11	50.0%

Which occupation?	Unemployed	8	36.4%
	Self-employed	7	31.8%
	Own business	0	0.0%
	Teacher	0	0.0%
	Others	7	50.0%
Any social benefit?	<i>Bolsa Família</i>	1	4.5%
	Retirement	1	4.5%
	Others	2	9.1%
	None	18	81.9%
Monthly income (Minimum Wages)	1 - 2	17	77.3%
	2 - 4	4	18.1%
	More than 4	1	4.5%

Table 2 shows the data related to drug consumption and the health conditions of the participants based on questionnaire responses. Thus, when questioned about legal problems or ongoing legal process, there was a predominance (72.7%) of those who denied such questions. In addition, regarding the time using drugs: 68.3% said they had been using for more than 10 years.

Regarding the different types of drugs that participants reported using, alcohol use predominated (90.9%), followed by crack

(81.8%) and cigarettes (72.7%). The majority (81.8%) did not use any medication, and among those who used it: 9.1% had been using for less than one year and 9.1%, between one and five years.

Among the survey participants, only 16.6% completed the treatment. Moreover, the majority (27.3%) reported performing the treatment at a therapeutic community, and 18.2%, in the CAPS. The data also showed the predominance (81.8%) of non-carriers of chronic disease.

Table 2. Datat related to consumption of psychoactive substances and self-reported health condition. Teresina (PI), Brazil, 2016.

Variables		N	%
Any ongoing legal process	Yes	6	27.3%
	No	16	72.7%
Time using drugs	Less than 1 year	0	0.0%
	1 - 5 years	6	27.3%
	5 - 9 years	1	4.6%
	10 years or more	15	68.2%
Type of drug	Cocaine	14	63.6%
	Alcohol	20	90.9%
	Cigarette	16	72.7%
	Crack	18	81.8%
	Heroin	3	13.6%
	Marijuana	15	68.2%
	LSD	3	13.6%
	Ecstasy	3	13.6%
	Amphetamine	0	0.0%
	Solvents	7	31.8%
	Morphine	1	4.6%
	Others	4	18.2%
Using any medication	Yes	4	18.2%
	No	18	81.8%
Time using medication(s)	Less than 1 year	2	9.1%
	1 - 5 years	2	9.1%
	5 - 9 years	0	0.0%
	More than 10 years	0	0.0%
Type of medication	Antidepressants	0	0.0%
	Benzodiazepines	3	13.6%
	Anticonvulsants	0	0.0%
	Antihypertensives	1	4.6%

Fernandes MA, Ribeiro MMM, Britto LB de et al.		Characterization of chemically dependents...	
	Neuroleptics	1	4.6%
	Others	0	0.1%
Recovery clinic	Yes	9	40.9%
	No	13	59.1%
Completed the treatment	Yes	3	13.6%
	No	6	27.3%
Admission site	Psychiatric hospital	0	0.0%
	CAPS	4	18.2%
	Therapeutic community	6	22.7%
	None	2	9.1%
Reason for leaving	Conclusion	3	13.6%
	Escape	0	0.0%
	Withdrawal	5	22.7%
	Termination	1	4.5%
Chronic disease carrier	Yes	4	18.2%
	No	18	81.8%
Chronic disease	Arterial hypertension	1	4.6%
	Diabetes	1	4.6%
	HIV/Aids	0	0.0%
	Tuberculosis	0	0.0%
	STI	0	0.0%
	Schizophrenia	1	4.6%
	Bipolar disorder	1	4.6%
	Others	0	0.0%
	None	18	81.8%

Table 3 shows the data related to the family support in the user’s treatment. The questionnaire had several alternatives with respect to the members who supported the participants, so they could mention more

than one family member. In this way, the data revealed that the support was mainly represented by the mother (59.1%), followed by the father (27.2%), and other family members (27.2%).

Table 3: Family support to the user’s treatment. Teresina (PI), Brazil, 2016.

Variables		n	%
Family support	Yes	21	95.4%
	No	1	4.6%
Family member that most supported the treatment	Mother	13	59.1%
	Father	6	27.2%
	Wife	3	13.6%
	Children	2	9.1%
	Others	6	27.2%
	None	1	4.6%

DISCUSSION

The study demonstrated the predominance of young and adult male participants, aged between 18 and 45 years. The expectation for the age range is that individuals were at the college or starting the professional life, but with the abusive use of psychoactive substances, they commonly fail to study to compose the group at risk for unemployment, responding legal problems or getting involved in violent acts and suicide.^{9,10}

The data of the United Nations (UN) show that around 10% of the population living in large urban centers use in an abusive way some kind of psychoactive substance,

regardless of sex, age, level of education, purchasing power and housing conditions. With regard to race, 59.1% of the participants are *pardos*, corroborating a study that reported the white skin color as the most mentioned color.¹¹

Most participants (45.4%) had incomplete primary education. Therefore, this information shows that low schooling among chemically dependents can be associated to the development of dependency, since the school deficiency causes a low qualification. This can exacerbate the dependency problem due to social vulnerability and lead to crime, since the user requires money for the maintenance of consumption of substances.¹²

The results showed the predominance (68.1%) of singles. This is a common condition resulting from changed values that emerges as the dependency installs itself, since the search and the consumption of the product will be a priority for the dependent. With regard to religion, almost all (81.8%) affirmed to be catholic. Thus, the evangelicals are the least prevalent group for treatments in CAPS-ad, in addition to using less alcohol in relation to catholics. Moreover, the prevalence of alcohol use is higher in those who have no religion.^{13,14}

The employment situation of the participants of this study is another relevant aspect, because 36.4% are unemployed and 31.8% reported being self-employed. This condition may worsen the dependency problem due to social vulnerability. Thus, it becomes one of the major risk factors related to drug use, because it can generate secondary problems, such as crime, since the dependent needs money for the maintenance of consumption of substances. When asking those that reported having some monthly income, the majority (77.3%) receives from one to two minimum wages.¹⁵

Another fact that draws attention is in relation to paternity: most participants (59.1%) have at least one child. In this way, living with a chemically dependent is affected as the disorder worsens, because the negative consequences, besides reaching the user, also affect all those close to the user.¹⁶

The data showed that the first contact with drugs occurred in adolescence. In addition, 90.9% of the participants used alcohol, 81.8% crack and 72.7% cigarette. The excessive consumption of drugs, even those socially accepted, can bring serious risks to health and predisposes the consumption of illicit drugs.¹⁷

Among the most commonly used illicit drugs, there was prevalence of crack (81.8%). There is a high prevalence of illicit drug use among those who use alcohol. Thus, the use of multiple drugs is a common habit among chemically dependents, and the combination of substances is often associated to a method to contain the cleavage or the withdrawal syndrome caused by lack of the chosen drug.^{13,18}

The participants were asked about the use of some medication and 18.2% answered yes. Therefore, the inmates had been using various drugs, in addition to their substance of preference. This context justifies the diagnosis for mental and behavioral disorders due to use of multiple drugs and the use of other psychoactive substances.

Regarding self-reported health conditions, 18.18% of the survey participants are carriers of chronic disease and 81.8% are not. Of these, 4.5% have hypertension, 4.5% diabetes, 4.5% schizophrenia and 4.5% bipolar disorder. Therefore, there were psychiatric comorbidities among the participants. However, the overlapping of symptoms hinders the treatment path, thus, the interventions must also involve the comorbidity.¹⁰

The family is part of the primary prevention of various psychopathologies, among them, the chemical dependency. Since it is the individual's first reference, it can minimize or add consequences of exposure to risk factors. In this item, 95.4% of the participants reported receiving family support, and the mother represented 59.1%; followed by the father with 27.2%. In this sense, the multidisciplinary team must be trained for comprehensive health actions, articulating the user, the family and society in the care production, incorporated in the rehabilitation process.^{19,20}

CONCLUSION

The population using psychoactive substances received in the Therapeutic Community of this study consists predominantly of young adults, in productive phase and are, mostly, out of the formal labor market or unemployed. In addition, all male participants stated using more than one type of drug, including alcohol, followed by crack, marijuana and cigarette.

Thus, these individuals are exposed to various risk situations and social vulnerability. Furthermore, the abuse of chemical substances interfere with the family bond, justifying the high index of unmarried users. The daily consumption of drugs has contributed to the distancing from the labor market, because as the dependent spends most of his time to acquire or use drugs, he abandons or disregards the daily responsibilities.

The actions directed to the population must be preventive, focusing on primary care, aimed at preventing the use of drugs since adolescence, with differentiated and earlier approaches, which sustain the user prior to the installation of the dependency syndrome, avoiding losses in life in adulthood. The data found intends to stimulate reflections on health promotion and assistance to families, in order to minimize the social impacts caused by drugs in the Brazilian reality.

REFERENCES

1. United Nations Office on Drugs and Crime. World drug report United Nations. New York (US): ONU; 2013[cited 2017 Nov 02]. Available from: https://www.unodc.org/unodc/secured/wdr/wdr2013/World_Drug_Report_2013.pdf
2. World Health Organization (WHO). Global status report on alcohol and health 2014. Geneva (CH): WHO; 2014[cited 2017 Nov 02]. Available from: http://apps.who.int/iris/bitstream/10665/112736/1/9789240692763_eng.pdf
3. Lima HS, Seidl EMF. Street outreach office:attention to people on psychoactive drug/substance abuse. *Psicol Estud* [Internet]. 2015[cited 2017 Nov 02]; 20(1): 57-69. Available from: <http://www.redalyc.org/articulo.oa?id=287142227007>
4. Longo MAT. A dependência de substâncias psicoativas na perspectiva da comunidade terapêutica. *UNOPAR Cient Ciênc Biol Saúde* [Internet]. 2015[cited 2017 Nov 02];17(4):286-91. Available from: <http://pgsskroton.com.br/seer/index.php/JHealthSci/article/view/3272/3003>
5. Seleglim MR, Oliveira MLF. Influence of the family environment on individuals who use crack. *Acta Paul Enferm* [Internet]. 2013[cited 2017 Nov 02]; 26(3):263-8. Available from: http://www.scielo.br/scielo.php?script=sci_arttext&pid=S0103-21002013000300010
6. Brito RMM, Sousa TM. Dependência química e abordagem centrada na pessoa: contribuições e desafios em uma comunidade terapêutica. *Rev Abordagem Gestalt* [Internet]. 2014[cited 2017 Nov 02]; 20(1):77-85. Available from: http://pepsic.bvsalud.org/scielo.php?script=sci_arttext&pid=S1809-68672014000100010
7. Pacheco AL, Scisleski A. Vivências em uma comunidade terapêutica. *Rev Psicol Saúde* [Internet]. 2013[cited 2017 Nov 02];5(2):165-73. Available from: http://pepsic.bvsalud.org/scielo.php?script=sci_arttext&pid=S2177-093X2013000200012&lng=pt&nrm=iso&tlng=pt
8. Fossi LB, Guareschi NMF. O modelo de tratamento das Comunidades Terapêuticas: práticas confessionais na conformação. *Estud Pesqui Psicol* [Internet]. 2015[cited 2017 Nov 02]; 15(1): 94-115. Available from: http://pepsic.bvsalud.org/scielo.php?pid=S1808-42812015000100007&script=sci_abstract
9. Botti NCL, Machado JSA, Tameirão FV. Perfil sociodemográfico e padrão do uso de crack entre usuários em tratamento no Centro de Atenção Psicossocial. *Estud pesqui psicol* [Internet]. 2014[cited 2017 Nov 02]; 14(1): 290-303. Available from: http://pepsic.bvsalud.org/scielo.php?script=sci_arttext&pid=S1808-42812014000100016
10. Gusmão PP, Fernandes RFD, Rezende RC, Bonfim RS, Porto YV, Fernandes LC, et al. Perfil epidemiológico de uma população de usuários de drogas de Anápolis, Goiás. *Rev Educ Saúde* [Internet]. 2017[cited 2017 Nov 02]; 5 (1): 28-37. Available from: <http://revistas.unievangelica.edu.br/index.php/educacaoemsaude/article/view/2380/2037>
11. Reis LM, Uchimura TT, Oliveira MLF. Perfil socioeconômico e demográfico em uma comunidade vulnerável ao uso de drogas de abuso. *Acta Paul Enferm* [Internet]. 2013[cited 2017 Nov 02]; 26(3):276-82. Available from: http://www.scielo.br/scielo.php?script=sci_arttext&pid=S0103-21002013000300012&lng=en&nrm=iso&tlng=en
12. Capistrano FC, Ferreira ACZ, Silva TL, Kalinke LP, Maftum MA. Perfil sociodemográfico e clínico de dependentes químicos em tratamento: análise de prontuários. *Esc Anna Nery Rev Enferm* [Internet]. 2013[cited 2017 Nov 02];17(2):234-41. Available from: http://www.scielo.br/scielo.php?script=sci_arttext&pid=S1414-81452013000200005
13. Monteiro CFS; Fé LCM, Moreira MAC; Albuquerque IEM; Silva MG, Passamani MC. Perfil sociodemográfico e adesão ao tratamento de dependentes de álcool em CAPS-ad do Piauí. *Esc Anna Nery Rev Enferm* [Internet]. 2011[cited 2017 Nov 02]; 15(1): 90-5. Available from: http://www.scielo.br/scielo.php?script=sci_arttext&pid=S1414-81452011000100013
14. Freitas EAM, Luis MAV. Perception of students about alcohol consumption and illicit drugs. *Acta paul enferm* [Internet]. 2015[cited 2017 Nov 02]; 28(5):408-14. Available from: http://www.scielo.br/scielo.php?script=sci_arttext&pid=S0103-21002015000500408&lng=en&nrm=iso&tlng=en
15. Pereira LC, Jesus IS, Barbuda AS, Sena EL, Yarid SD. Legalização de drogas sob a ótica da bioética da proteção. *Rev bioét* [Internet]. 2013[cited 2017 Nov 02]; 21 (2): 365-74. Available from: http://www.scielo.br/scielo.php?script=sci_arttext&pid=S1983-80422013000200021&lng=en&nrm=iso&tlng=pt

16. Oliveira VC, Capistrano FC, Ferreira ACZ, Kalinke LP, Felix JVC, Maftum MA. Sociodemographic and clinical profile of people assisted in a caps ad in the south of brazil. Rev Baiana Enferm [Internet]. 2017[cited 2017 Nov 02]; 31(1):e16350. Available from: <https://portalseer.ufba.br/index.php/enfermagem/article/view/16350/14060>
18. Elicker E, Palazzo LS, Aerts DRGC, Alves GG, Câmara S. Use of alcohol, tobacco and other drugs by adolescent students from Porto Velho-RO, Brazil. Epidemiol Serv Saúde [Internet]. 2015[cited 2017 Nov 02]; 24(3):399-410. Available from: http://www.scielo.br/scielo.php?script=sci_arttext&pid=S2237-96222015000300399&lng=en&nrm=iso&tlng=en
19. Santos RCA, Carvalho SR, Miranda FAN. Perfil socioeconômico e epidemiológico dos usuários do Centro de Atenção Psicossocial Álcool e Drogas II de Parnamirim, RN, Brasil. Rev bras pesq saúde [Internet]. 2014[cited 2017 Nov 02];16(1):105-11. Available from: <http://periodicos.ufes.br/RBPS/article/view/8497/5993>
20. Jimenez L, Andrade EM, Bianchini LGB. Uso de drogas e ato infracional: revisão integrativa de artigos brasileiros. Rev latinoam Cienc Soc Niñez Juv [Internet]. 2016 [cited 2017 Nov 02]; 14(2): 939-55. Available from: <http://revistaumanizales.cinde.org.co/index.php/Revista-Latinoamericana/article/view/2583>
21. Azevedo DM, Miranda FAN. Práticas profissionais e tratamento ofertado nos CAPSad do município de Natal-RN: com a palavra a família. Esc Anna Nery Rev Enferm [Internet]. 2010 [cited 2017 Nov 02];14(1):56-63. Available from: http://www.scielo.br/scielo.php?script=sci_arttext&pid=S1414-81452010000100009&lng=en&nrm=iso&tlng=pt

Submission: 2017/12/10

Accepted: 2018/04/13

Publishing: 2018/06/01

Corresponding Address

Márcia Astrês Fernandes
Campus Universitário Ministro Petrônio Portela, ,
Bloco 12
Bairro Ininga
CEP: 64049-550 – Teresina (PI), Brazil