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Consequences of drug use: perspective of the adolescent in rural areas

Consequências do uso de drogas: a ótica de adolescente pertencentes ao

Consecuencias del abuso de substancias: la perspectiva de adolescentes pertenecientes a las zonas rurales

Janaina Carneiro de Camargo¹, Fabiana Romancini², Luana Roberta Schneider³, Lucimare Ferraz⁴

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ABSTRACT

Objective: To know the perspective of rural teenagers on drug use consequences. Method: This is a qualitative research, carried out by the creative - sensitive method, with teenagers in the eighth year of a rural school. Result: During artistic productions and testimonials, the teenagers from rural areas expressed that the use of drugs entails health and social consequences, highlighting the exposure to unsafe sex (early pregnancy and STD), physical and sexual violence (rape and indecent assault) and car accidents. Conclusion: Adolescents from the rural area have a broader look about the consequences of drug use. However, this does not mean that they are protected against this problem. In this case, the health sector and school need to keep/take actions to prevent drug use and abuse among adolescents.

Descriptors: Adolescent; drug effects; Rural Population.

RESUMO

Objetivo: Conhecer a ótica de adolescentes rurais sobre as consequências do uso de drogas. Método: Trata-se de uma pesquisa qualitativa, realizada pela metodologia criativo-sensível, com adolescentes do oitavo ano de uma escola rural. Resultado: Durante as produções artísticas e depoimentos, os adolescentes do meio rural expressaram que o uso de drogas gera consequências de saúde e sociais, destacando a exposição ao sexo inseguro (gravidez precoce e doenças sexualmente transmissíveis -DSTs), a violência física e sexual (estupro e atentado ao pudor) e os acidentes de trânsito. Conclusão: Os adolescentes pertencentes ao meio rural têm um olhar ampliado a respeito das consequências do uso de drogas. Contudo, isso não significa que estão protegidos diante dessa problemática. Nesse caso, os setores saúde e escolar precisam manter/realizar ações de prevenção ao uso e abuso de drogas junto aos adolescentes.

Descritores: Adolescente, Efeitos de drogas, População rural.

- Naturologist. Master in Health Sciences-Unochapeco.
- Scholarship holder for scientific initiation. Academic of the Medicine-Unochapeco course.
- Nurse. Master student of the Post-graduation program in Health Sciences-Unochapeco.
- Nurse. PhD. Professor of the Post-graduate program in Health Sciences-Unochapeco.

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RESUMEN

Objetivo: Conocer la perspectiva de los adolescentes rurales sobre las consecuencias del consumo de drogas. Método: Se trata de una investigación cualitativa, llevada a cabo por el método creativo - sensible, con los adolescentes octavo año en una escuela rural. Resultado: Durante las producciones artísticas y testimonios, los adolescentes de las zonas rurales expresaron que el uso de drogas genera consecuencias sociales y de salud, destacando la exposición a relaciones sexuales sin protección (el embarazo precoz y enfermedades de transmisión sexual), la violencia física y sexual (violación y exposición indecente) y accidentes de tráfico. Conclusión: Adolescentes del área rural tienen una mirada ampliada sobre las consecuencias del consumo de drogas. Sin embargo, esto no quiere decir que están protegidos contra este problema. En este caso, el sector de la salud y la escuela necesitan mantener/adoptar medidas para prevenir el uso y abuso de drogas entre los adolescentes.

Descriptores: Adolescente, Efectos de drogas, Población rural.

INTRODUCTION

Drugs are psychoactive substances not produced by the body and that are capable of changing their organic, psychological and behavioral functions. Psychoactive substances are characterized as licit and illicit. Licit drugs are legally marketed, and may or may not be subject to some kind of restriction, and illicit substances are those prohibited by law, according to Resolution n. 8/2015.¹

In the health area, these drugs are considered to cause various damages, such as intoxications, hallucinations, depression, seizures, coma, sudden death, cancers, respiratory, cardiovascular, gastrointestinal and liver diseases. In addition, they can cause social consequences, such as accidents, aggressive and violent behavior.²⁻³⁻⁴

Among the users of psychoactive substances, the adolescents stand out. Adolescence is the stage of life between childhood and adulthood, marked by a complex process of physical, psychic and social transformation, a frank expansion of the ways of interacting and being in the world, and dealing with successes, failures and confrontation of adversities.⁵

Adolescence is a critical phase of human development, for in this period one experiences meaningful discoveries and the affirmation of personality and individuality occurs. It is during this stage of life that experimentation of psychoactive substances such as alcohol and other illicit drugs usually takes place. This is because the youth is more predisposed to adverse situations, either by influences, curiosities, escape from difficulties or contradiction of family values.⁶ The risk of exposure to drugs during adolescence is the result of curiosity, inexperience, insecurity and the need for self-affirmation.⁷

In their study with 18,767 young people, the American authors found that for adolescents living in rural areas, the use of psychoactive substances, mainly alcohol and tobacco, equals or surpasses the use by urban adolescents. However, rural youth in Brazil have not been adequately addressed by epidemiological surveys or scientific research investigating the problem of drug use. The researcher Schowze emphasizes

that the historical, cultural and social specificities of Brazilian rural youth have not yet been recognized 9.

Faced with a gap in the Brazilian literature that addresses the issue of psychoactive substances among young people in rural areas, a survey was conducted with the objective of assessing the optics of rural adolescents about the consequences of drug use.

METHOD

This study is a descriptive research with a qualitative approach. The qualitative method makes it possible to explore in what way individuals or groups give meaning to a problem, whether social or human.¹⁰ It is concerned, therefore, with aspects of reality that cannot be quantified, focusing on the understanding and explanation of the dynamics of social relations.¹¹

The research was conducted at a Municipal Primary School, located in the rural area of the city of Chapecó - Santa Catarina, between the years 2015 to 2016. The population was composed of adolescents of the eighth grade of the academic year 2015, totaling 21 students. The study series was suggested by the manager and by school teachers, since they identified the need to approach the drug issue with these adolescents.

The information was collected through an active methodology, using Sensitive Creative Dynamics (SCD), in order to instigate dialogue with adolescents about the issue of 'consequences related to drug use'. According to Cabral, SCD proposes a space for collective discussion, in which the lived experience is approached through artistic production and playful language, in which the research group becomes subject in the formation of a new knowledge. ¹²

To this end, four meetings were held with the adolescents and in each one the dynamics was developed, being: Tree of Knowledge, Scene Games, Almanac and Modelling. All the dynamics were based on the following problematic question: what are the consequences that drugs bring to the lives of adolescents? In all the dynamics five stages occurred, as suggested by Cabral: 1) preparation of the environment, reception of the group and presentation of the dynamics 2) issue guiding the problem; 3) artistic production and codification; 4) production presentation and decoding; and 5) recoding, through the group discussion, with the validation of the data. All steps were recorded and transcribed. The analysis and validation of the information occurred at the time of codification, decodification and recoding proposed.

The research project was developed according to the guidelines of Resolution n. 466/2012, of the National Health Council (NHC), for research conducted on human beings. ¹³ For the data collection, it was first sent to the school's consent, followed by the ethics committee that approved its development under protocol number 1266442. After the approval, the consent of the adolescents and of their respective responsible was requested, clarifying all the doubts about the dynamics.

RESULTS AND DISCUSSION

In order to verify whether or not the adolescent uses drugs, but rather to know his or her perspective on the subject, we initially sought to identify the drugs that rural adolescents recognized. Before the analysis of the results, it was observed that adolescents in rural areas are aware of various psychoactive substances. This happened already in the first encounter, in the dynamics of construction of the knowledge tree. Adolescents have shown, through reports and artistic productions, that they know of licit and illicit drugs, such as alcohol, marijuana, cocaine and crack cocaine. In figure 1 and in the following speeches, such findings are exposed:

"Alcohol (...) most common"

"Alcoholic beverage".

"Vodka, whisky and Raiska"

"Marijuana, alcohol..."

"Smoking crack"

"Marijuana, ecstasy, cocaine"

"Cocaine"

Figure 1. Presentation of the production on the types of drugs among adolescents of the rural school of the municipality of Chapeco-SC, 2016.



Source: authors

Among the drugs reported, it is highlighted that alcohol was the psychoactive substance most mentioned by adolescents. This information is in line with other studies, which point to alcohol as the first drug that young people consume. ⁴ A study based on data from the National School Health Survey (NSHS) identified that the prevalence of regular alcohol use, defined as consuming alcoholic beverage at least one day in the last 30 days, has been associated with students aged 15 years or more. ¹⁴ One factor that facilitates the consumption of alcohol by adolescents may be the easy access and

availability that young people have in acquiring this substance. In Brazil, although it is prohibited (Article 81 of Law 8,069/90)¹⁵, the marketing of alcoholic beverages for children under 18 years usually occurs without restrictions. It is worth mentioning that alcohol consumption can also trigger the use of other drugs among adolescents.³

Other substances reported by rural adolescents during SCDs were marijuana and cocaine. These drugs are considered to be the most popular illicit drugs and marijuana is usually the first to be experienced by

adolescents. Marijuana is easily diffused because of the average price, the easy access and the fact that it is perceived as the regular consumption psychoactive substance of lower risk and easier to abandon.¹⁶

Among all the drugs mentioned by adolescents in rural areas, mention is made of crack. According to Gonçalves, this drug is advancing in rural areas, and can no longer be considered an urban drug. In his study of both rural and urban teachers, he found that educators in both contexts (rural and urban) have already encountered students involved in drug use. About crack, a relevant factor regarding this drug is the speed with which the adolescent can become chemical dependent.

Regarding the consequences of drug use for adolescents in rural areas, these substances have generated organic and social consequences for their users. Among the organic consequences were liver cirrhosis, neurological damage, chemical dependency and even death, as can be seen in figure 2 and in the following reports:

- "He/she used once and got hooked, he/she use all the time"
- "Destruction of neurons"
- "He/she was in a zone [brothel] and drank too much ... mixed cocaine and is in coma"
- "How's that liver disease called?" Group reply: "Cirrhosis".
- "To die (...) "......"

Figure 2. Presentation of an artistic production on the consequences of drug use from the perspective of the adolescents of a rural school in the municipality of Chapeco-SC, 2016.



Source: authors

In the perception of rural school students, one of the consequences of drug use is chemical dependence. Regarding this aspect, the Brazilian Association of Psychiatry emphasizes that the use of a psychoactive substance can be considered as a type of consumption that does not harm the health of the organism, while abuse and chemical dependence would lead to health problems and may be considered as a disease. Psychoactive substances, when used repetitively, can lead to changes in adaptation, such as tolerance. On the other hand, signs of abstinence arise when substances are no longer available, defining dependence. The compulsive use of psychoactive substances is called drug addiction and can become a serious health and social problem, and can lead to death. 18

According to rural adolescents, the use of drugs causes extermination of neurons, a finding that is coherent since the repetition of the use of psychoactive substances can cause destruction of the neurons, causing irreversible lesions.¹⁹

According to the adolescents, the use of drugs causes chemical dependency, a conception that is appropriate, because psychostimulant substance, such as cocaine, entail high propensity to drug addiction. 4-20 In addition, cocaine generates 'fissure' by its use, making the risks of episodes of loss of control and intoxication more prevalent and serious. 21

Regarding the damages to health, the adolescents emphasized, at various moments of the SCD, the harmful consequences of alcohol in the 'liver'. Perhaps this correlation between alcohol and liver cirrhosis is due to family experiences and also because it is a more evident and common consequence among alcoholics. However, alcohol-dependent individuals may develop various diseases, which go beyond the liver, such as gastritis, malabsorption syndrome, pancreatitis, heart problems, hypertension, among others.⁴ Situations not mentioned by adolescents.

Death is one of the consequences of drug use according to adolescents. In this perception, the relation that the students have between overdose, cardiac arrest and death was made explicit. From this point of view, it is emphasized that this understanding is consistent, since cocaine can lead to hyperthermia and convulsions of difficult treatment, resulting in coma and death. Crack and merla can also cause muscle contractions and seizures, leading to death. Even the ingestion of alcoholic beverages above the tolerated level generates acute intoxication, anesthesia, coma, respiratory depression and even, more rarely, death. When alcohol consumption is exaggerated, the respiratory depressant effect is exacerbated and can cause coma or death.

Amid the consequences of drug use, adolescents also expressed, during the course of SCD, social aspects. According to the students, the use of drugs exposes them to the risk of an early and undesirable pregnancy, physical and sexual violence and accidents, as it happens in these mentions:

- "Risk of being raped"
- "She could be at risk of becoming pregnant."
- ".....accidents"
- "Boy who used drugs always beat her, broke her cell phone. He went to jail."

For adolescents, another aspect that makes drugs conceived as harmful is the practice of unsafe sex. The deleterious effects of sexual intercourse practiced under the effect of drugs, evidenced in our research, was also recorded in Machado's study.²² According to the author, drug use negatively influences sexual health, since it leads to sexual relationships with unknown people, favors the sharing of contaminated materials and the non-use of condoms.

In addition to the practice of unsafe sex, which exposes Sexually Transmitted Diseases (STDs) and early pregnancy, rural adolescents also perceive that drug use leads to exposure to sexual violence (rape and indecent assault). According to the Directorate General of Health, the risk of violent behavior among adolescents under the influence of alcohol is higher when compared to those who do not drink (50% to 22%).²³ And girls have a nine times greater risk of being sexually abused while under the influence of alcohol. They also have twice the risk of getting pregnant when compared to teens who do not drink alcohol.²³

According to Costa and Mello, individuals under the effect of drugs and/or alcohol have behaviors prone to homicide and sexual aggressions.²⁴ Andrade mentions that the joint use of alcohol and illicit drugs, among adolescents, increases the chance of involvement in situations of violence.²⁵

Adolescents also expressed that drug use is a risk factor for traffic accidents. A study conducted in the Federal District to analyze the presence of alcohol in fatal traffic accident victims identified that this substance was present in most cases, with most of the victims being young and male.²⁶ In addition, alcohol-exposed adolescents are exposed to a five-fold fatal risk of fatal accident compared to drivers over 30 years of age, regardless of blood alcohol.²³

In order to reduce traffic accidents, in 2008 Brazil approved Law No. 11,705, which establishes zero blood alcohol and imposes more severe penalties for the driver that drive under the influence of alcohol. For the State, driving under the influence of alcohol or any other psychoactive substance is a very serious infraction, subject to fine and suspension of the right to drive, in addition to the retention of the vehicle.²⁷

It is worth noting that among the consequences of alcohol consumption, there is a decrease in critical judgment, an increase in aggression and an impaired social and occupational functioning.¹⁹ Another negative aspect, according to the General Directorate of Health,²³ is suicidal ideation; which is twice as present among young people who drink alcohol.

The Brazilian Ministry of Health considers that the use of alcohol and other drugs has been one of the main causes of vulnerability in adolescence, such as accidents, suicides, violence, unplanned pregnancy and the transmission of sexually transmitted diseases in cases of injecting drug use. To Ferrreira, the use of illicit drugs is related to acts of delinquency by young people, such as violence, aggressive behavior and school absenteeism. The author emphasizes that, in addition to the immediate insults, in the long term, the use of illicit drugs can jeopardize the physical, mental and social development of the young user.

Among the social consequences, the correlation between drug use and poor school performance is also elucidated, since the use of this substance is associated with lower grades, lack of schooling, dropping out of school and reduction of the expectation of school progress, such as attending higher education.⁵

CONCLUSION

The adolescents belonging to the rural school show that they know many legal and illegal drugs. The most mentioned were: alcohol and marijuana. Students, when instigated to manifest their perceptions about the consequences of drug use, have expressed, through speeches and artistic productions, that drugs entail health and social problems.

Among the deleterious effects of drugs on health, adolescents know / recognize the state of dependence, coma and death. In addition to these consequences, they highlighted the development of hepatic cirrhosis. This relationship between alcohol consumption, addiction and liver problems that adolescents conceive may stem from their family and community experiences, because alcoholism is relatively frequent in our society. Other organic problems, such as gastrointestinal, malnutrition, dementia, among others, were not mentioned by adolescents, elucidating that the consequences of chronic drug use need to be worked out with these youngsters.

An important aspect is the perception that these rural adolescents have about the social consequences that drug use can generate. In the conception of these students, drugs expose them to traffic violence, physical and sexual aggressions, such as sexual assault and rape. It also provides unsafe sexual intercourse, which exposes them to an early and unwanted pregnancy, as well as STD contamination.

Although adolescents have shown a broader view of the consequences of drug use, this does not mean that they are not vulnerable to this problem. Thus, intersectoral strategies, especially among the health and school sectors, for health promotion need to be implemented with a view to empowering adolescents in their self-care decisions/actions.

Finally, it highlights the need for more study on this problem in the rural environment, because it was difficult to discuss our results with other authors since research on drugs and adolescence are mostly carried out in the urban context.

REFERENCES

- BRASIL. Ministério da Saúde. Resolução RDC n. 8, de 13 de fevereiro de 2015. Dispõe sobre a atualização do Anexo I, Listas de Substâncias Entorpecentes, Psicotrópicas, Precursoras e Outras sob Controle Especial, da Portaria SVS/MS nº 344, de 12 de maio de 1998 e dá outras providências. [Acesso em 10 jun. 2016]. Disponível em: http://bibliofarma.com/rdc-n-8-de-2015-lista-atualizada-port-344/>.
- BRASIL. Ministério da Saúde. Marco legal: saúde, um direito de adolescentes. 1ªed. Brasília: 2007.
- BRASIL. Presidência da República. Secretaria Nacional de Políticas sobre Drogas. Relatório brasileiro sobre drogas / Secretaria Nacional de Políticas sobre Drogas; IME USP; organizadores Paulina do Carmo Arruda Vieira Duarte, Vladimir de Andrade Stempliuk e Lúcia Pereira Barroso. Brasília: SENAD; 2009.
- KATZUNG, BG. Farmacologia Básica e Clinica. 10 ed. Porto Alegre (RS): AMGH; 2010.
- FELIPE, AOB. Saúde Mental, consumo de drogas, problemas na vida e o suporte familiar entre os adolescentes [tese]. Ribeirão Preto (SP): Universidade de São Paulo; 2015.
- FERREIRA, SMO. Promoção da saúde na prevenção de comportamentos de risco para a saúde na adolescência. Instituto Politécnico de Santarém; 2014.
- GOMES, VLO; MENDES, FRP. Representações de adolescentes Lusobrasileiros acerca do conceito de "Risco": Subsídios para actuação de enfermagem. Rev. Eletr. Enf.2009; 11(3): 688-94. [Acesso em 09 jun. 2016]. Disponível em: https://www.fen.ufg.br/fen_revista/v11/n3/v11n3a29.htm>.
- 8. RHEW, IC.; HAWKINS, D.; OESTERLE, S. Drug use and risk among youth in different rural contexts. Health Place. 2011; 17(3): 775-83.
- SCHOLZE, AR; ZANATTA, LF; BRÊTAS, JRS. Dados sobre o consumo de álcool entre a juventude rural: Uma constatação de ausências. Rev. Contexto & Saúde. 2015; 15: 63-68.
- CRESWELL, JW. Projeto de pesquisa: métodos qualitativo, quantitativo e misto. Tradução Magda Lopes. 3. ed. Porto Alegre (RS): Artmed; 2010. 296 p.
- 11. MINAYO, CS. O desafio do conhecimento: pesquisa qualitativa em saúde. 14 ed. São Paulo: Hucitec; 2014. 407 p.
- 12. CABRAL, IE. O método criativo sensível: alternativa de pesquisa na enfermagem. In: GAUTHIER, JHM et al. (Org.). Pesquisa em enfermagem: novas metodologias aplicadas. Rio de Janeiro: Guanabara Kookgan, 1998. p. 177-203.
- 13. BRASIL. Conselho Nacional de Saúde. Comissão Nacional de Ética em Pesquisa. Resolução n. 466, de 12 de dezembro de 2012. Brasília, DF, 2012. [Acesso em 22 nov. 2014]. Disponível em: http://conselho.saude.gov.br/resolucoes/2012/Reso466.pdf>.
- MALTA, DC et al . Exposição ao álcool entre escolares e fatores associados. Rev. Saúde Pública, São Paulo. 2014; 48(1): 52-62.
- 15. BRASIL. Presidência da República. Lei nº 80.069 de 13 de julho de 1990. Dispõe sobre o Estatuto da Criança e do Adolescente e dá outras providências. [Acesso em 28 abr. 2016]. Disponível em: http://www.planalto.gov.br/ccivil_03/LEIS/L8069.htm.
- 16. LISBOA. Serviço de intervenção nos comportamentos aditivos e nas dependências. Relatório anual 2013: a situação do país em matéria de drogas e toxicodependências. Lisboa, 2014. [Acesso em 28 abr. 2016]. Disponível em: http://www.sicad.pt/BK/Publicacoes/Lists/SICAD_PUBLICACOES/Attachments/7/ Relat%C3%B3rioAnual_2013_A_Situa%C3%A7%C3%A3o_do_Pa%C3%ADs_em_mat%C3%A9ria_de_drogas_e_toxicodepend%C3%AAncias.pdf>.
- 17. GONÇALVES, A. Álcool, tabaco e outras drogas: concepções de professores e alunos do ensino básico e secundário e análise de programas e manuais escolares [tese] Portugal: Universidade do Minho; 2008.
- ASSOCIAÇÃO BRASILEIRA DE PSIQUIATRIA. Abuso e Dependência de Múltiplas Drogas. 2012. [Acesso em 06 jun. 2015]. Disponível em: http://www.projetodiretrizes.org.br/index.php.
- DIEHL, A et al. Dependência química: prevenção, tratamento e políticas públicas. Porto Alegre (RS): Artmed; 2011.
- BRASIL. Ministério da Justiça. Prevenção do uso de drogas: capacitação para conselheiros e lideranças. 5° Ed. Brasília: SENAD; 2013.

- 21. BRASIL. Ministério da Justiça do Brasil. Observatório Brasileiro de Informações Sobre Drogas. [Acesso em 06 jun. 2015]. Disponível em: http://www.obid.senad.gov.br/portais/OBID/index.php>.
- 22. MACHADO, NG *et al.* Uso de drogas e a saúde sexual de adolescentes. Rev. Enferm., Rio de Janeiro. 2010; 18(2): 284-90.
- 23. DIRECÇÃO GERAL DE SAÚDE. Abordagem da Intoxicação Alcoólica Aguda em Adolescentes e Jovens. Norma nº035/2012. Lisboa; 2012.
- 24. COSTA, CS, MELLO, MF. Indicadores comportamentais de propensão ao homicídio em agressores sexuais. J Bras Psiquiatr, São Paulo. 2012; 61(1): 33-8.
- 25. ANDRADE, SSCA, et al. Relação entre violência física, consumo de álcool e outras drogas e bullying entre adolescentes escolares brasileiros. Cad. Saúde Pública, Rio de Janeiro. 2012; 28(9): 1725-1736.
- 26. MODELLI, MES; PRATESI, R; TAUIL, PL. Alcoolemia em vítimas fatais de acidentes de trânsito no Distrito Federal, Brasil. Rev. Saúde Pública, São Paulo. 2008; 42(2): 350-352.
- 27. BRASIL. Presidência da República. Lei nº 11.705 de 19 de junho de 2008. Altera a Lei nº 9.503, de 23 de setembro de 1997, que 'institui o Código de Trânsito Brasileiro', e a Lei nº 9.294, de 15 de julho de 1996, que dispõe sobre as restrições ao uso e à propaganda de produtos fumígeros, bebidas alcoólicas, medicamentos, terapias e defensivos agrícolas, nos termos do § 4º do art. 220 da Constituição Federal, para inibir o consumo de bebida alcoólica por condutor de veículo automotor, e dá outras providências. [Acesso em 28 abr. 2016]. Disponível em: http://www.planalto.gov.br/ccivil_03/_ato2007-2010/2008/lei/l11705.htm.

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Contact of the corresponding author:

Lucimare Ferraz

Av. Senador Attílio Fontana, 591-Efapi ZIP-code: 89809-000

Chapecó-SC

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E-mail: <lferraz@unochapeco.edu.br>