SOCIOCULTURAL FACTORS AND DRUG CONSUMPTION AMONG COSTARRICAN UNIVERSITY STUDENTS

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ABSTRACT: A quantitative, descriptive and exploratory research, with a cross-sectional design aimed at examining the moderating effect of certain sociocultural factors related to drug use among university students in San José, Costa Rica. The sample was composed of 126 women and 124 men from a public university. A questionnaire was developed with 5 validated scales that interrogated about the influence of the peer group, the family relationships, the entertainment, the spirituality, and drug consumption. The SPSS ver 18 software was used for the statistical analysis. It was found that 98.4% of students had at least one friend who is drug consumer, most of them use alcohol, tobacco and marijuana. A significant association between some academic and sociocultural factors and the consumption of licit and illicit drugs was established. We concluded that some preventive strategies should be elaborated considering the influence of sociocultural factors among college students.

INTRODUCTION

Many causes explain why youngsters are vulnerable to legal or illegal drug consumption. That vulnerability results from a set of factors that can moderate consumption, either positively or negatively, and may be associated with social, cultural, political, and economic changes perceived at the global level, leading to the adoption of different risk behaviors and attitudes.

Drugs in general are substances that change physical and chemical responses in the body, acting directly on the central nervous system, and that change several normal physiological structures.\(^1\) When the central nervous system is subjected to such excitement, it triggers processes that have direct effects on awareness, orientation, and other psychical functions of the individual that directly affect individual and collective behavior. Consumption is defined as the conduct of exposing oneself to a substance through different routes of administration, such as oral, nasal, sub-lingual, intravenous, among others.

Today there is great concern about the substantial increase in legal and illegal drug consumption, not only at a global level but also in our reality as a Latin American country. Data from the Global Report on Drugs prepared by the United Nations Office on Drug and Crime (UNODC) in 2012 showed that there were 230 million illegal drug users worldwide. The report is a reference document that provides guidance for policies on drugs. According to the same report, in 2010 there were slightly more than 200 million users, evidencing a significant increase in the consumption of psychoactive substances. In that year, the global situation among the adolescent/adult population in the age group of 15 to 64 years old showed that 6.6% of that population had consumed at least one illegal drug at least once in the last year, where marijuana was the most-widely consumed drug, followed by amphetamines, other opiates, cocaine, and crack.\(^2\)

Several investigations in Costa Rica show a significant and constant increase and greater incidence of drug consumption as youngsters advance their professional training, deserving even more attention as consumption starts at earlier ages. The latest scientific findings of those investigations identify alcohol, tobacco, and marijuana as the most-widely consumed drugs.\(^3\)\(^4\)

Drug consumption among university youth can be manifested in several ways, mainly the initial consumption associated with experimental, social, regular, continuous, intermittent, intensive, and compulsive use; however, the most interesting is that standards are subject to changes in this population group, and are characterized by a lack of evident linear order. The fact is that such drugs result in addiction that, in turn, is directly dependent on the strength, type, doses, and frequency of use. These variables, like other sociocultural factors, can produce important physical-biochemical changes in the brain, causing significant modifications in some psychical and neural functions.

Drug consumption has been the object of national and international investigations. Likewise in the last few years there has been an increase in the interest in understanding which are the sociocultural protection (or risk) factors that may be involved in the increase (or reduction) of the drug consumption standard and which could be affected by macro-variables such as neo-globalization and the recent changes in international health. Among these factors, we should mention: the influence of the group of peers; changes in the understanding and application of cultural values; entertainment; spirituality; and family relations.

Based on these assumptions this survey tried to describe the influence of some sociocultural factors (entertainment, spirituality, and family relations) that moderate the correlation between the group of peers and legal and illegal consumption among young university students in the city of San José.

METHODS

This study is part of a multicenter investigation performed simultaneously in three universities in the Caribbean and five universities in Latin America. This is a quantitative, analytical, descriptive, and cross-sectoral survey. It comprises students from a public university in San José, Costa Rica attended by students from all socioeconomic backgrounds and from the seven provinces of the country. The survey comprises male and female students 18 to 24 years of age. The sample size was non-probabilistic and classified by quotas. We decided to work with 250 students from the social sciences, human sciences and health sciences colleges, as these colleges were found in all university centers in the eight countries.

The consumption of drugs was the dependent variable for this survey, and both legal and illegal drugs were investigated, such as tobacco, al-

Factores socioculturales y consumo de drogas entre estudiantes...

cohol, marijuana, cocaine, and amphetamines sold without a medical prescription. The level of influence of the group of peers was the independent variable of this study. The sociocultural variables that moderate the correlation between dependent and independent variables were family relations, participation in interactive and non-interactive entertainment based on exposure to technology, entertainment based on social activities, and level of spirituality. The socio-demographic variables surveyed were age, sex, marital status, course load, years of study, and employment status.

To correlate data, a self-administered questionnaire was elaborated comprising the scales and validities of the influence of the group of peers; the Index of Family Relations (IFR); the Spiritual Involvement and Belief Scale (SIBS); an open-ended question about how many parties the subject has attended in the last three months where alcohol, tobacco, or other substances such as marijuana, cocaine, and amphetamines might be present; and the Interactive and Non-Interactive Entertainment Scale. Finally, it employed the test of participation in the consumption of alcohol, tobacco, and other substances, designed by the World Health Organization. Content validity was obtained through the CAMH commission of experts, while internal consistency was calculated using Cronbach’s alpha (0.95; p<0.05). The English version of the questionnaire was translated into Spanish and Portuguese, considering the cultural meaning of words and the grammatical structure of the phrases. The Spanish version of the questionnaire was validated by a group of 50 Costa Rican university students at the university studied, aged 18 to 25 years old, to adjust terminologies, concepts, and semantic understanding. The questionnaire consisted of six sections with 81 questions. The areas included questions about socio-demographic information, participants’ perceptions of the influence of the group of peers, family relations, entertainment, spirituality, and consumption of legal and illegal drugs.

The study was approved by the Committee for Ethics in Research of the Centre for Addictions and Mental Health of Canada (CAMH) (report N 136/2011) and by the Ethics Committee of the University of Costa Rica (report VI-6600-2011 of November 2, 2011). The database provides an identification code for each subject, which was kept anonymous during the investigation. Before receiving the questionnaire, subjects were informed about the confidential nature of their responses. Data were collected from November to December 2011, and from January to February 2012, in groups and individually. The researchers declared to have no conflict of interest.

A bi-variate analysis was performed through categorical data (Chi-square test) obtaining an odds ratio (OR) and a confidence interval (CI) for each variable surveyed and for the independent samplings, according to their nature. Moreover, a logistic regression analysis included the model of all variables with a statistically significant association in the bi-variate analysis. For all cases, the level of significance established was lower than or equal to 0.05. The Statistical Package for Social Sciences (SPSS) software, version 18 for Windows, was used to perform data analysis.

RESULTS

Socio-demographic characteristics of drug consumption among university students

The age group of the students surveyed ranged from 18 to 24 years old, with an average of 19.20 years old for the group. Most were 18 or 19 years old. Distribution by gender displayed similar participation behavior between men and women, where 50.4% of the sample were women and 49.6% were men. Regarding residence of participants, most of them lived with the direct family, followed by students living in university residences; students living alone and out of campus represented the lowest percentage. Regarding marital status of the sample, 82% of participants were single, followed by 9.2% who were married, against the lowest percentages in categories such as divorced and living together that, altogether, represented 8.8%. As regards the variable of offspring, 91.2% of the students surveyed had no children, 8.8% had children and most had one child. In the sample surveyed, 63.6% of participants were from the college of health/humanities science (medicine, nursing, pharmacy, microbiology, dentistry, nu-
tion, physical therapy, and education); 36.4% stated that they were enrolled in some course of the college of social sciences (sociology, psychology, anthropology, social work, library science, and mass communication). In terms of academic status, most of the sample (91.2%) were full-time students, as opposed to 8.8% that affirmed to be part-time students. Regarding the year of the course participants were taking, 65.6% were in the first or second year; the lowest percentage (12.2%) were taking the sixth year, 19.8% were taking the fifth year, 5.4% the fourth, and 8% the third year.

In relation to employment status, only 14.8% of the participants affirmed that they worked in places such as call centers, stores, restaurants, and libraries. Regarding the influence of friends, 85% said that they were influenced by friends in their everyday decisions. Only 1.6% of the sample stated that they had no friends who used tobacco, alcohol, or other drugs, as opposed to the remaining 98.4% who said that they had at least one friend who is a drug user. Sixty-five point six percent of students believed that their friends engaged in unprotected sex, against 34.4% who said their friends engaged protected sex. Sixty-one point two percent of the students stated that their friends did not smoke or use tobacco, while 54.4% stated that most of their friends have five or more cigarettes during an event.

Regarding family relations, only 55% of the respondents had positive family relations, while 45% considered their relations to be "regular" or negative. This situation was confirmed by the low index of responses to the statements "I believe my family is excellent", "I really enjoy my family," and "my family members are really good with each other." It is surprising that 59.3% consider that other families seem to be better than theirs, while 38.6% affirm that families argue too frequently.

Most of the students have attended at least one party in the last three months where legal and illegal drugs were present. On average, the population sample had participated in 6.88 parties, and the highest number of parties attended by students in the last three months was 31.

In general, entertainment is part of the activities developed by young university students. Sixty-two percent of them had high exposure to interactive and non-interactive playful/recreational activities. Regarding technology-based interactive entertainment, social networks clearly represent a strong indicator of membership to them, as 84% of participants stated that they used it very frequently or frequently; 42.4% said they access e-mail frequently; and, regarding technology-based non-interactive entertainment, the main activities were associated with watching the news and pornography, either frequently or very frequently.

For the level of spirituality, 24.6% of the respondents alleged to have a high level of spirituality, against 75.4% stating to have a medium/low level of spirituality. The statements "prayers do not really change what happens" and "spiritual activities have not affected the development of my identity" were the lowest ranked, and 43.6% of the respondents reported that they had not participated in any religious activities in the last six months. It was evidenced that 49.2% never or almost never pray or meditate.

The analysis of the distribution of drug consumption in the last 12 months showed the following results: alcohol 78.4% and tobacco 31.2%. Regarding the most widely-used illegal drugs, we found marijuana (27.2%) and amphetamines (15.2%), closely followed by cocaine (6%).

**Association between sociocultural factors and drug consumption**

Tables 1 and 2 describe the correlation between demographic and sociocultural factors related to drug consumption among youth and their relation to peers in the last 12 months. Moreover, it included the resulting significance levels for each variable with legal and illegal drugs.

There is a significant correlation between the sociocultural factors evaluated and the consumption of legal and illegal substances; those sociocultural factors sometimes serve as significant risk factors for the consumption of drugs.

For legal drugs—alcohol and tobacco—the most influential general variable was academic status, where students taking fewer classes (so, with more time free) reported five times more risk of consuming alcohol and tobacco in comparison to students taking full class loads, with an OR of 5.398 (IC95%: 1.359–21.429). Results also suggest that spirituality was a positive moderating factor, as those with higher level of spirituality are less likely to consume alcohol and tobacco OR 1.114 (IC95%: 1.002–1.239). On the other hand, it was observed that family relations and entertainment had no significant moderating effect on the relation between the group of peers and consumption of drugs such as alcohol and tobacco within the last
We found a different behavior when we analyzed the phenomenon of illegal drug consumption in the last year. Some variables have served as protective factors, such as age (OR of 0.734 [IC95%: 0.554–0.972]) and gender (OR of 0.385 [IC95%: 0.206–0.720]). Students older than 20 were less likely to consume illegal drugs; in terms of gender, women were less likely to consume marijuana, cocaine, and amphetamines.

On the other hand, students taking fewer classes (part-time students) (OR of 2.868 [IC95%: 1.012–8.130]) and those who attended more parties (OR of 1.050 [IC95%: 1.001–1.102]) were more likely to consume illegal substances. According to these results, family relations had a significant influence on the correlation between group of peers and consumption of drugs such as marijuana, cocaine, and amphetamines. Moreover, students with negative family relations presented almost three times more probability of consuming illegal drugs (OR of 2.913 [IC95%: 1.023–1.023]) and students who attended parties and actively participated in interactive/non-interactive entertainment were more likely to consume illegal drugs (OR of 1.050 [IC95%: 1.001–1.102]).

Table 1 - Correlation Among the Influence of Peers, Spirituality, Family Relations, Entertainment and Legal Drug Consumption in the Last Year (Including Interactions Between Each Cultural Agent and Relation With Group of Peers' Consumption of Alcohol/Tobacco)

<table>
<thead>
<tr>
<th>Variables</th>
<th>Estimate</th>
<th>Standard Error</th>
<th>Wald Chi-square</th>
<th>Prob &gt; Chi-square</th>
<th>Odds Ratio</th>
<th>Lower 95% I.C. Odds Ratio</th>
<th>Upper 95% I.C. Odds Ratio</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
<td>-0.188</td>
<td>0.212</td>
<td>0.786</td>
<td>0.375</td>
<td>0.829</td>
<td>0.547</td>
<td>1.255</td>
</tr>
<tr>
<td>College</td>
<td>-0.682</td>
<td>0.634</td>
<td>1.157</td>
<td>0.282</td>
<td>0.506</td>
<td>0.146</td>
<td>1.752</td>
</tr>
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<td>Family relations</td>
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<td>0.010</td>
<td>0.237</td>
<td>0.626</td>
<td>0.995</td>
<td>0.977</td>
<td>1.014</td>
</tr>
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<td>Family relations and Influence of peers</td>
<td>0.013</td>
<td>0.009</td>
<td>2.003</td>
<td>0.157</td>
<td>1.013</td>
<td>0.995</td>
<td>1.032</td>
</tr>
<tr>
<td>Gender</td>
<td>-0.491</td>
<td>0.494</td>
<td>0.988</td>
<td>0.320</td>
<td>0.612</td>
<td>0.233</td>
<td>1.611</td>
</tr>
<tr>
<td>Intercept</td>
<td>5.614</td>
<td>4.262</td>
<td>1.735</td>
<td>0.188</td>
<td>0.000</td>
<td>&lt;0.001</td>
<td>&lt;0.001</td>
</tr>
<tr>
<td>Marital status</td>
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<td>0.827</td>
<td>2.537</td>
<td>0.111</td>
<td>0.268</td>
<td>0.053</td>
<td>1.355</td>
</tr>
<tr>
<td>Entertainment</td>
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<td>0.053</td>
<td>3.731</td>
<td>0.053</td>
<td>1.107</td>
<td>0.999</td>
<td>1.228</td>
</tr>
<tr>
<td>Entertainment and Influence of peers</td>
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<td>0.056</td>
<td>1.022</td>
<td>0.312</td>
<td>0.945</td>
<td>0.847</td>
<td>1.054</td>
</tr>
<tr>
<td>Influence of peers</td>
<td>0.093</td>
<td>0.263</td>
<td>0.124</td>
<td>0.724</td>
<td>1.097</td>
<td>0.655</td>
<td>1.838</td>
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<td>Academic status</td>
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<td>0.017</td>
<td>5.398</td>
<td>1.359</td>
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<tr>
<td>Residence</td>
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<td>0.498</td>
<td>0.804</td>
<td>0.370</td>
<td>1.563</td>
<td>0.589</td>
<td>4.152</td>
</tr>
<tr>
<td>Spirituality</td>
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<td>0.486</td>
<td>0.373</td>
<td>0.541</td>
<td>0.743</td>
<td>0.287</td>
<td>1.927</td>
</tr>
<tr>
<td>Spirituality and Influence of peers</td>
<td>0.108</td>
<td>0.054</td>
<td>3.988</td>
<td>0.046</td>
<td>1.114</td>
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<td>1.239</td>
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<td>0.909</td>
<td>0.213</td>
<td>3.885</td>
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<tr>
<td>Year of course</td>
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<td>0.292</td>
<td>3.076</td>
<td>0.079</td>
<td>1.670</td>
<td>0.942</td>
<td>2.962</td>
</tr>
</tbody>
</table>
Table 2 - Correlation among influence of peers, spirituality, family relations, and illegal drug consumption in the last year (including interactions between each cultural agent and relation with group of peers' consumption of marijuana, cocaine, and amphetamines)

<table>
<thead>
<tr>
<th>Variables</th>
<th>Estimate</th>
<th>Standard Error</th>
<th>Wald Chi-square</th>
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<th>Lower 95% I.C. Odds Ratio</th>
<th>Upper 95% I.C. Odds Ratio</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
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<td>4.640</td>
<td>0.031</td>
<td>0.734</td>
<td>0.554</td>
<td>0.972</td>
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<td>College</td>
<td>-0.553</td>
<td>0.372</td>
<td>2.204</td>
<td>0.138</td>
<td>0.575</td>
<td>0.277</td>
<td>1.194</td>
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<td>0.006</td>
<td>2.976</td>
<td>0.085</td>
<td>1.011</td>
<td>0.999</td>
<td>1.023</td>
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<tr>
<td>Family relations and Influence of peers</td>
<td>1.069</td>
<td>0.534</td>
<td>4.014</td>
<td>0.045</td>
<td>2.913</td>
<td>1.023</td>
<td>8.292</td>
</tr>
<tr>
<td>Gender</td>
<td>-0.953</td>
<td>0.319</td>
<td>8.955</td>
<td>0.003</td>
<td>0.385</td>
<td>0.206</td>
<td>0.720</td>
</tr>
<tr>
<td>Intercept</td>
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<td>2.911</td>
<td>2.903</td>
<td>0.088</td>
<td>0.000</td>
<td>&lt;0.001</td>
<td>&lt;0.001</td>
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<tr>
<td>Marital status</td>
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<td>0.261</td>
<td>1.545</td>
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<td>Parties</td>
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<tr>
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<td>0.024</td>
<td>4.078</td>
<td>0.043</td>
<td>1.050</td>
<td>1.001</td>
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</tr>
<tr>
<td>Influence of peers</td>
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<td>0.168</td>
<td>2.559</td>
<td>0.110</td>
<td>1.308</td>
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<td>0.532</td>
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<td>1.012</td>
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<td>Residence</td>
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<td>0.320</td>
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<td>0.538</td>
<td>1.775</td>
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<td>0.571</td>
<td>1.104</td>
<td>0.785</td>
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</tr>
</tbody>
</table>

DISCUSSION

To become acquainted with and understand the international policies dealing with the phenomenon of drugs among young university students, education professionals in health and in other areas must have a broader view on the topic, contributing to build links between their work and the neo-global reality. This neo-globalization process brought about new questions about the influence of given social agents among youth who have access to the higher education system, thus redefining the roles played by political authorities.

The consumption of legal and illegal psychoactive substances emerges in this context as a problem that is not exclusive to the field of health, belonging also to the geo-political and social areas. Drugs in general are an axiomatic issue in the news, and most of cases are associated with violence and other illegal activities. Nonetheless, there are few recent data in Costa Rica explicitly referring to the consumption of those substances among university youth, and the correlation between consumption and some sociocultural factors.

This investigation also found that alcohol is the most widespread legal drug used by university students, as nearly 78.4% of them consume alcohol one or two times a week, in line with other surveys performed by the Ministry of the Presidency, the Instituto Costarricense sobre Drogas (ICD–Costa Rican Institute on Drugs), and the Instituto sobre Alcohol y Farmacodependencia (IAFA–Institute on Alcohol and Drug Dependence) of Costa Rica, in addition to other surveys developed in Latin America.

This overview highlights the well-known risks and damages in all dimensions of developing countries, considering the harms inherent to alcohol and specifically related to low performance of students bearing this standard of binge drinking (high intake of alcohol in a short period of time). A similar situation was found regarding tobacco consumption, as the number of users was considered to be high, where 31.2% of students have smoked cigarettes in the last 12 months. This drug was mostly consumed on a daily basis or in social activities during weekends. This is supported by the World Health Organization data, according to
which tobacco is the second most widely consumed drug in the world. Regarding the consumption of legal drugs, variables such as gender have not affected the use of alcohol and tobacco, as both male and female students have reported proportional use when compared to one another. These data are in opposition to those found by several investigations about smoking, alcoholism, habits, and attitudes, where the consumption standard is higher among men than women.2,13

The influence of groups of friends on drug consumption was evident, supporting the findings of some global studies and reports proving that the social influence of sociability with the group of peers is very significant, and social attitudes play a very important role regarding the availability of drugs and social anoma1.2,13

In-depth studies about the pressure exercised by the group of peers recognize the existence of similarities between youngsters and the group of peers to which they belong.15 There are several arguments to explain this fact, but the most consistent one is that a friendship relationship exists when one socializes, shares, and has mutual understanding, which are expressed in similar everyday behaviors. In general, the similar conducts of adolescents are attributable to two well-identified processes: social selection and social influence. This means that, on one hand, youngsters are similar because they get involved with other similar youngsters (social selection) and, on the other hand, they become similar due to their close relation with peers (social influence).

Regarding the family, it plays a key role in the integral development of individuals, strongly affecting education, primary socialization, provision of care, and transmission of beliefs and values in general, as well as the health and well-being of the family components. Many times the relation of youngsters and their families is not visible or is disregarded. However, this is a clear determinant for integral well-being, and influences the general behaviors of the young population, because neither the group of peers nor any other sociocultural factor can replace the role played by parents in the transmission of social mores at home.

This investigation found and corroborated the findings that other surveys identified, that is, youngsters from well-structured families with closer communication ties, trust, and love, are less likely to consume drugs than those living in families featuring a lack of communication, violence, and neglect.7,15

Undeniably family is very important as the main educational factor and, in this sense, has been positively considered as an element to foster creativity and fulfill academic tasks; however, when relations are less than positive, these could be a factor for risk and vulnerability regarding drug consumption. The conclusions found suggest that negative family relations effectively moderate in a negative way and lead to drug consumption. Family supervision, communications, management of rules, and parents’ awareness of what their children do, are factors that contribute to resist when someone offers drugs to them. That is why positive family relations become a locus of care, fostering the promotion of healthy attitudes and capabilities and, as such, this role should be more intensively fostered.

On the other hand, party-based entertainment is strongly associated with the availability of time not only on weekends, but during the week as well. The level of satisfaction produced by university students is also associated with drug consumption. The fact is that exposure to drugs is proportional to attendance at these social activities, and thus the possibility of consuming some kind of substance is higher, corroborates the findings of our investigation.

Regarding interactive and non-interactive technological entertainment, activities such as checking e-mail and using social networks like Facebook, Twitter, and Instagram, among others, are associated with significant changes in users, while exchange of information many times is associated with leisure and recreation activities. The level of influence depends on the specific setup of the social network at the level of integration/participation of the person, messages posted during chats, and the links/meanings between the person and other members of the network. Nonetheless this is clearly a means to publicize several advertisement messages that may even entice consumption of some drug or encourage the youth’s participation in social activities that might facilitate access to some psychoactive substance. That is why interactive and non-interactive entertainment in general is many times defined as a negative moderator of drug consumption.

Regarding the evaluation of spirituality as a moderating factor in drug consumption, some surveys classify it as a factor that plays a double role: when firmly consolidated, structured, and with well-defined values, it can work as a protective factor. In contrast, if the structure is not defined,
it is considered to be a factor of risk/vulnerability.

From the analysis of existing data from strictly quantitative epidemiological surveys in the scientific literature, there is a clear inverse relation between spirituality and use of psychotropic substances, although one cannot disregard the several issues entailed in the eventual measurement of religiosity levels, in addition to some sample biases in those studies. The positive effect of religion on the recovery of drug addicts is pointed out, highlighting the key role played by church in the prevention and treatment of drug addiction. In this survey, spirituality was at least a protective factor against the consumption of legal drugs among young university students.

Therefore, we conclude that different sociocultural factors strongly influence the consumption of either legal or illegal psychoactive substances among the Costa Rican university population.

CONCLUSIONS

The phenomenon of drugs and the involvement of youth in consumption is a typologically complex movement involving different aspects related to factors such as social exclusion, vulnerability, stigmatization, family disaffection, and absence of life assignments, among others.

Universities are privileged places to develop programs on drug use prevention, as it enjoins legitimacy and validity in the community, family, and youngsters of Costa Rica. It is widely known that the drug phenomenon is not restricted to youngsters attending university centers; however, focusing on youth and developing their critical/analytical capacities jointly with a thoughtful stand towards drugs would help build alternative mechanisms of resistance to these substances.

This investigation surveyed some aspects regarding the relation of sociocultural variables as moderating agents to drug consumption and relation with peers. It found that consumption in this population locus is increasing, a concerning fact that should warn all professionals working in higher education institutions and in national policy-making institutions.

Universities cannot disregard the current issues that affect the society to which they belong; neither should situations that affect the quality of life of their young students go unnoticed. The fight against poverty and the social development of nations largely depends on their capacity to generate knowledge, and universities are one of the main institutional agents that generate and apply knowledge, jointly with other public research authorities. That is why higher education centers cannot let drug consumption interfere in the teaching-learning process of students.

All professionals working in universities should strive to meet the needs of the population they serve, in line with the global initiatives around the phenomenon of drugs. The challenges of taking care of health in general and dealing with issues related to the phenomenon of drugs demand collaboration and new approaches to other professionals in education, the social sciences, and health.

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