

PUBLIC POLICIES FOR CONFRONTING THE USE OF ILLICIT DRUGS: SOCIAL PERCEPTION IN A COMMUNITY

Lucia Margarete dos Reis¹, Anai Adario Hungaro², Magda Lúcia Felix de Oliveira³

¹ Doctoral student in Nursing on the Postgraduate Program in Nursing at the *Universidade Estadual de Maringá* (UEM). Maringá, Paraná, Brazil. E-mail: luciamargarete@gmail.com

² Master's student in Nursing on the Postgraduate Program in Nursing at UEM. Maringá, Paraná, Brazil. E-mail: hungaroanai@hotmail.com

³ Ph.D. in Collective Health. Coordinator of the Center for Control of Poisoning at the UEM Teaching Hospital. Maringá, Paraná, Brazil. E-mail: mlfoliveira@uem.br

ABSTRACT: This study aimed to identify the social perception regarding public policies for confronting the use of drugs of abuse in a community with high indicators of drug-related violence. This is descriptive and transversal research, undertaken in a community in the Northwest of Paraná, using a structured questionnaire administered to 358 inhabitants. The data were analyzed using the Statistical Analysis Software, with simple descriptive analyses being undertaken. Only 13.9% of the interviewees mentioned actions for preventing drug use and combating drug trafficking and violence in the community. The most important problems present in the community were the presence of drugs of abuse (24.9%), the weakness of health care (20.9%), and public safety (13.7%). The action referred to most as essential for combating drug use was increasing policing (55.3%). The interviewees' social perception points to unawareness of, or absence of, actions for preventing and combating drug trafficking in the community.

DESCRIPTORS: Social perception. Health public policy. Street drugs. Community integration.

POLÍTICAS PÚBLICAS PARA O ENFRENTAMENTO DO USO DE DROGAS DE ABUSO: PERCEÇÃO SOCIAL EM UMA COMUNIDADE

RESUMO: O estudo objetivou identificar a percepção social sobre políticas públicas para enfrentamento do uso de drogas de abuso em uma comunidade com indicadores elevados de violência relacionados às drogas. Pesquisa descritiva e transversal, realizada em uma comunidade do Noroeste do Paraná, utilizando questionário estruturado aplicado a 358 moradores. Os dados foram analisados no *Statistical Software Analysis*, sendo realizadas análises descritivas simples. Apenas 13,9% dos entrevistados referiram ações para prevenção do uso e combate ao tráfico de drogas e à violência na comunidade. Presença de drogas de abuso (24,9%), precariedade da assistência à saúde (20,9%) e da segurança pública (13,7%) foram os problemas mais importantes presentes na comunidade. Aumentar o policiamento (55,3%) foi a ação mais referida como essencial para combater o uso de drogas. A percepção social dos entrevistados indica o desconhecimento ou a ausência de ações de prevenção e combate ao tráfico de drogas na comunidade.

DESCRIPTORIOS: Percepção social. Políticas públicas de saúde. Drogas ilícitas. Integração comunitária

POLÍTICAS PÚBLICAS PARA AFRONTAR EL USO DE DROGAS DE ABUSO: PERCEPCIÓN SOCIAL EN UNA COMUNIDAD

RESUMEN: El estudio buscó identificar la percepción social sobre las políticas públicas para hacer frente al abuso de drogas en una comunidad con altos índices de violencia vinculada al narcotráfico. Descriptivo y transversal, realizado en una comunidad del noroeste de Paraná, utilizando un cuestionario estructurado aplicado a 358 residentes. Los datos fueron analizados con el software *Statistical Software Analysis* con análisis descriptivo simple. Sólo el 13,9% de los encuestados informaron de medidas para la prevención del uso y lucha contra el tráfico de drogas y la violencia en la comunidad. La presencia de drogas de abuso (24,9%), la inseguridad en el cuidado de la salud (20,9%) y en la seguridad pública (13,7%) fueron los problemas más importantes de la comunidad. Aumentar la vigilancia (55,3%) se reportó como la acción más importante para combatir el consumo de drogas. La percepción social de los encuestados señaló la ausencia de prevención y de lucha contra el tráfico de drogas en la comunidad.

DESCRIPTORIOS: Percepción social. Políticas públicas de salud. Drogas ilícitas. Integración a la comunidad.

INTRODUCTION

The use of drugs of abuse, both licit and illicit, has been present throughout the history of humanity and in practically all known cultures; it is considered one of the major public health problems experienced by the Brazilian population, mainly because violence is frequently associated with the context of the drugs. The issue of drugs, notably those which are illicit, has become a focus of concern for the authorities responsible for public health policies and public safety, due to the increasingly evident indications of their use by the population, and by the growing association between the trafficking of drugs and urban violence.¹⁻³

The increase in the consumption of drugs of abuse and, consequently, of their sale/trafficking, has led the inhabitants of specific communities to exposure to the consequences resulting from this context.⁴⁻⁵ The presence of drugs of abuse does not occur in a socially and territorially uniform way, as some communities are more exposed to drugs of abuse and to the impact resulting from their use.⁶

The negative effects of the drugs of abuse in the communities impact the stability of the structures, threaten political, economic, human and cultural values of the States and of the societies, and contribute to the growth of expenses through medical treatment and hospitalization. They also contribute to the increasing rates of work accidents, traffic accidents, urban violence, and premature deaths; and to a fall in workers' productivity.⁷

Efficient political action can reduce the level of problems related to the consumption of drugs of abuse, avoiding having to passively witness the ebb and flow of this problem. When public policies committed to promotion, prevention and treatment are effected, in the perspective of peoples' social integration and production of autonomy, the suffering inherent to the impact of the drugs of abuse tends to reduce significantly.⁸

For this, the establishment of intersectorial actions must allow contributions to solving the health problems which emerge in community discussions, in which the priorities listed by the population through their perception of specific problems can be transformed into a valuable tool for the elaboration of public policy actions, through continuing education with professionals working in the communities, which can actually

respond to the needs found in the communities.⁹⁻¹⁰

Considering the public health policies, the nursing professionals are key agents in the process of care and of the implementation of the actions of these policies, as they have greater contact with the inhabitants of the communities and can facilitate the identification of problems and the approach regarding drugs of abuse. In this regard, these professionals must participate in the designing and implementation of programs and projects for health promotion and prevention of the abuse of alcohol and other drugs, as well as of social integration projects, with the aim of minimizing the problems which occur in the community as a consequence of the indiscriminate use of the drugs of abuse.¹¹

The social perception of the inhabitants who coexist daily with the use of drugs of abuse and the negative effects inherent to this context must be investigated, as they can indicate the best path for thinking about strategies of prevention of the use of drugs of abuse in the communities, and make it possible to identify the effectiveness of the actions of public policies related to the problems faced by the community.

Considering this context, the present article aimed to identify the social perception regarding actions of public policies for confronting the use of drugs in a community located in a municipality in the Northwest of Paraná, which has high indicators of violence related to the use of drugs of abuse.

MATERIAL AND METHODS

The study is quantitative, descriptive and transversal research, undertaken through the use of a populational household survey and of the framework of the Social Perception Indicators System (SIPS) of the Institute for Applied Economic Research (IPEA). The SIPS underpinned the construction of a structured questionnaire, administered to a community in a municipality in the Northwest of Paraná which has high indicators of violence related to the use of drugs of abuse.¹⁰

The SIPS was developed to support analyses and decisions relating to the formulation, implementation and evaluation of public policies but also provides society with data for the knowledge and evaluation of the effective results achieved by public policies currently in place. This is home-based study undertaken through a household survey with Brazilian families, with the aim of

investigating the population's perception regarding goods and services offered in various areas, such as culture, workers' rights and professional qualification, education, gender equality, justice, urban mobility, work and income, health, and public safety. The analysis of the data serves as a pragmatic framework for optimizing the effectiveness of public investments considering those services directed to these ends.¹⁰

The term 'community' is polysemic, but in the present study refers to the presupposition of the presence of a specific type of social bond due to location, origin, and communal coexistence, and can refer to the place where an individual lives, or to his territory in terms of neighborhood and coexistence.¹²

The community studied is a housing estate inaugurated in the 1990s, destined for families considered socially "poor". The initial requirement to request a house in this housing estate was that the person responsible was to be unemployed or have an income below the minimum salary established at the time, and that the family should have a minimum of five members.

Random probabilistic sampling was used, representative of the 5140 inhabitants of the community. Considering a level of confidence of 95%, a sampling error of 0.05 and value of p equal to 0.10, a populational sample of 358 persons was established, with one person from each household, aged equal to or over 18 years old, being interviewed. A reference system was set up, with visits *in loco* to the community, made up of three stages: random selection of the blocks, of the households, and of the resident.

The questionnaire included questions referring to the interviewees' socio-economic profile, to the use of public health services and/or social work services for resolving problems related to drugs; to their relationship with the Primary Healthcare Center (UBS, in Portuguese) - the requesting of assistance from UBS professionals for resolving problems related to drugs and/or for help in ceasing to use drugs of abuse by the interviewee or family members, and confidence in the services offered by the UBS; to the perception of the existence of actions for prevention of the use of, and combating the trafficking of drugs of abuse, and violence in the municipality and in the community; to the relationship with the public safety resources in the community - confidence in the work of the Police in the community, and

requesting the services of the Police for resolving problems related to the use of drugs in the community; their opinions regarding the problems faced in the routine life of the community; and their opinion regarding actions necessary for confronting the use of drugs of abuse in the community.

Data collection was undertaken by the researcher and six students from the Undergraduate Courses in Psychology and Nursing at the State University of Maringá, during May - June 2012. The researcher informed the interviewees regarding the study object, the methodology and the administration of the instrument.

The data were compiled in an electronic spreadsheet using the Microsoft Office Excel 10.0 software, and were analyzed using the Statistical Analysis Software (SAS). Descriptive analysis was undertaken of the data, using tables and graphics presenting the results in terms of absolute and relative frequencies, and calculation of the means.

The research project was submitted for the consideration of the Committee for Ethics and Research with Human Beings of the State University of Maringá, a favorable decision being received (n. 6799/2012). The individuals participated in the research only after signing the terms of consent.

RESULTS

The interviewees had a mean age of 43.9 ± 15 years, the majority were female (68.2%), and the educational level of 36.3% of the interviewees was of between nine and 11 years of study, that is, Senior High School. The interviewees' mean family income was R\$1,602.00, varying between R\$70.00 and R\$10,000.00 (the minimum salary at the time was R\$622.00). A total of 163 (45.5%) interviewees mentioned having a family income below two minimum salaries (R\$1,244.00). The majority (53.6%) stated that they were employed or undertook autonomous activities as their source of income. Of the 244 women interviewed, 29.9% stated that they were housewives, that is, they worked exclusively for their own family, and represented 78.3% of the 46 who were unemployed.

The mean length of residence in the community was 14.3 ± 5 years, varying from six months to 20 years, it being the case that the majority of the inhabitants (89.1%) had lived there permanently for more than six years.

The majority of the interviewees (95.7%) stated that they perceived a strong circulation and

consumption of drugs of abuse in the community. A total of 65 (18.2%) interviewees reported making use of some or other drug of abuse, principally tobacco (70.8%) and alcohol (18.5%). Furthermore, a strong presence of use of drugs of abuse by interviewees' family members was ascertained (19.8%). In the majority of these families, only one member made use of drugs of abuse (88.7%), and the drug used most by the family member was also tobacco (58.5%), followed by alcohol (22.0%), and crack cocaine (11.0%).

The presence of violence in the community was mentioned by 90.2% of the interviewees, who indicated that the violence is related to drug consumption (relationship mentioned by 93.8% of these interviewees).

Of the 358 interviewees, 30.2% mentioned there being actions for preventing the use of, and combating of, trafficking in the municipality, placing emphasis on the existence of social projects directed towards young people in situations

of risk, and users of drugs of abuse (33.3%), and campaigns for raising the population's awareness for nonuse and regarding the harm caused to the life of the drug user (24.0%). Nevertheless, when questioned in relation to the perception of these actions in the community, only 14% of the interviewees responded affirmatively, the same actions being indicated.

In relation to the use of support services for confronting the use of drugs of abuse in the community, one can observe in Table 1 that 3.9% of the interviewees, at some point in their lives, sought the public health services and/or the municipality's social work service in order to resolve problems related to drugs of abuse in their community, among whom nine considered that the attendance they had received was of good quality. The access to the UBS by the interviewees or their family members for resolving problems related to drugs of abuse, and for requesting help for abstaining from their use was mentioned by 2.5% and 2.8% of the interviewees, respectively.

Table 1 - Interviewees' distribution by perception regarding actions and services of support in the confrontation of the use of drugs of abuse in the community. Maringá-PR, 2012

Perception regarding public services and their use	n	%
Existence of actions for prevention of the use of, and combat of the traffic of, drugs of abuse, and violence in the municipality	108	30.2
Existence of actions for prevention of the use of, and combat of the traffic of, drugs of abuse, and violence in the community	50	14.0
Confidence in the services provided by the community's UBS	231	64.5
Confidence in the work of the Police in the community	171	47.7
Use of public health services and/or the municipality's social work services for resolving problems related to drugs of abuse	14	3.9
Access to the UBS for resolving problems related to drugs of abuse	9	2.5
Access to the UBS for abstinence from drugs	10	2.8
Requesting the presence of Police in the community to resolve problems related to drugs of abuse	65	18.1

Regarding the relationship of trust in the public safety resources it was observed that the majority of the interviewees (64.5%) have confidence in the services offered by the community's UBS, while the majority do not have confidence in the work of the Police in security actions undertaken in the community. It was also observed that 65 interviewees had already requested the presence of the Police in the community in order to resolve

problems related to drugs of abuse, and that of these, 43% considered the work of the Police to have been of good quality.

As may be observed in figure 1, many interviewees (24.9%) indicated that the presence of drugs of abuse in the community is the most concerning problem, and that it deserves greater attention from political leaders.

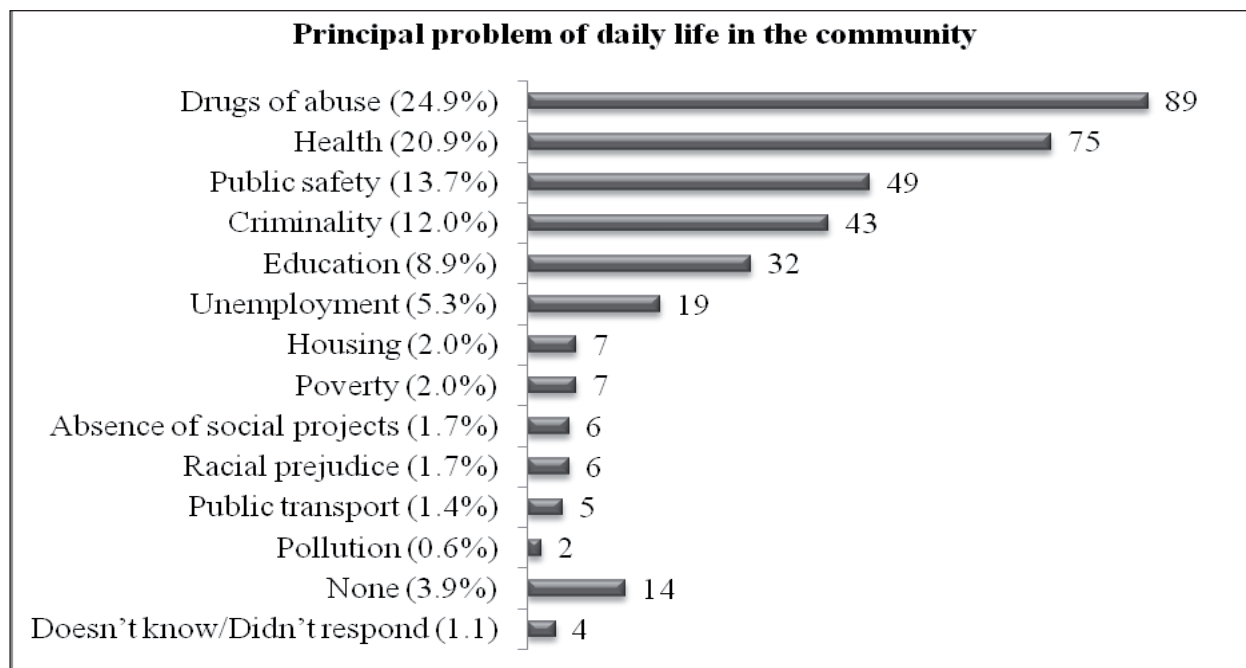


Figure 1 - Distribution of the interviewees by social perception regarding the main problems of daily life in the community. Maringá-PR, 2012

Table 2 describes the most important actions listed by the residents of the community, with emphasis placed on the actions referent to the increase in policing in the community (55.3%), encouragement for campaigns raising the population's awareness regarding the harm caused by drugs of abuse for the individual (10.9%), increasing the availability of leisure and recreation activities in the community (7.8%), and increase in the offering of employment to get youth and those with nothing to do off the streets (7.5%).

Table 2 - Distribution of interviewees by actions considered most important and necessary for confronting the use of drugs of abuse in the community. Maringá-PR, 2012

Actions necessary for confronting the use of drugs	n	%
Increase policing in the community	198	55.3
Encourage campaigns raising awareness for the nonuse of drugs	39	10.9
Increase recreation and leisure activities	28	7.8
Increase offers of employment	27	7.5
Strengthen family links and religion	18	5.0
Improve education	16	4.5
Punish drug users/imprisonment	13	3.7
'There is no point doing anything'	2	0.6
Doesn't know/Did not respond	17	4.7
Total	358	100.0

DISCUSSION

The interviewees' socio-demographic profile is within the norms for the majority data of the Brazilian population: the majority of the people are women, young adults, at an economically-active age, and educated up to Senior High School level.¹³

This socio-demographic profile was also found in a study undertaken by the Risk and Protection Factors for Chronic Diseases by Telephone Inquiry (Vigitel) system, determining the consumption of alcoholic drinks in the Brazilian adult population, which interviewed, in 2006, 54,369 persons, identifying that 38.1% of the population studied habitually consumed alcoholic drinks, and that 16.2% used these substances abusively.¹⁴⁻¹⁵

The socio-demographic profile influences the use of drugs of abuse, but can also influence the social perception regarding social problems. Women, and people with low educational levels, tend to attribute greater seriousness to problems such as drug abuse, unemployment, poverty, pollution and racial prejudice. As a result, one can infer that the perception of actions of public policies is also influenced by persons with this same profile. In relation to the women, although these are less victimized than the men, it may be observed that they are more affected emotionally by the social problems, verbalize more, and resort less to mechanisms of denial.¹⁶

Regarding the interviewees' mean family income, the value of R\$1,602.00 was found, when in the Brazilian population in general, mean income is currently R\$2,419.00. The perception of the severity of certain problems was also significantly modified, in accordance with the salary band. One study undertaken in order to identify problems which the community perceived as important identified that drug abuse, the abuse of children and women, unemployment and pollution had a higher frequency of severity among those people with an income below R\$2,000.00; it was also observed that the frequency progressively falls as income rises.¹⁶

Regarding occupation, it was observed that the majority mentioned being employed or undertaking autonomous activities as their source of income, although data for the Brazilian population in employment indicate a high percentage (54.2%). In the population studied, a higher percentage of women with no occupation (78.3% of the 46 were unemployed) was observed, while in the Brazilian population in general, the percentage of women with no occupation is 59%.¹⁷

One can infer that employment constitutes a protective factor for the use of drugs of abuse, as unemployment is considered a risk factor; however, it can cause a distancing from the community's problems, as the inhabitant removes herself from her place of residence in order to carry out her occupation in other regions of the municipality, ceasing to participate directly in the community's routine, a situation which can influence the perception of problems and the "unawareness" regarding the actions of public policies present in the community.⁷

In relation to the mean length of residence in the community, it may be inferred that length of residency also influences the inhabitants' social perception, as a long period of coexistence in the community can lead to a routine accustomization to the problems, although the use of drugs of abuse is not considered banal by those who suffer from its effects in the community.¹⁸ On the other hand, it can lead to a greater perception of the existence of actions of public policies in the community.

In relation to the use of drugs of abuse by the present study's interviewees, the percentage found for the inhabitants of the communities was lower than the national level of use of these drugs; nevertheless, this value was raised for the interviewees' family members, there seeming to be a culture of the expansion of the use of drugs

of abuse in the family. It is known that the family can exercise a fundamental role in the initiation and continuation of the use of drugs, through the presence of drugs in the family environment and the lack of clear rules regarding their use.¹⁹⁻²⁰

The use of drugs of abuse is culturally inserted in the communities, resulting in difficulty in their management, the presence of their trafficking and sale, and easy access to them.²¹

Academics indicate that civil society is already significantly mobilized and has been made aware regarding the consumption of drugs of abuse; however, in the present community, low perception was evidenced for actions linked to policies combating and preventing drug use, from which it is inferred that the actions for confronting the use of drugs of abuse in this community are insufficient, that the publicizing of these actions is low, and that these inhabitants' involvement with the community is little.²²

A community is at risk for increasing its drug consumption when it has low social and economic conditions, when there is little organization, when it lacks opportunities for employment for adults and young people, when there is easy access to drugs, when there is overt propaganda regarding drugs, and when there are no programs for prevention in the schools and in the other social segments, such as families, companies and churches.²³ Changes in behavior, principally among the young - such as symptoms of depression, affective disorders, lack of support from the parents, body dissatisfaction, and dropping out of school can also predispose to drug use, principally in these socially vulnerable communities.²⁴

It was observed that the majority of interviewees have confidence in the services provided by the Primary Healthcare Center (UBS). This perception is similar to the perception of the quality of the services offered by Primary Health Care (PHC) in Brazil. The Social Perception Indicators System interviewed 2,773 Brazilians, and 80.7% of them considered the quality of the services offered in the PHC to be very good or good.²⁵

In relation to the public security personnel in the community, when questioned regarding their trust in the work of the Police, the majority of the interviewees stated that they do not have confidence in the work of the Police.

The lack of trust in the police institutions was also found in a study undertaken by the SIPS, indicating that only 36.2% of the 3,799 Brazilians interviewed have confidence in the police

institutions. Trust in the police institutions is a fundamental variable, as, having the mandate allowing the use of physical force, each police institution must act within the law, such that the actions directed at combating the use of drugs of abuse in the communities may be perceived by the population as positive and efficient.¹⁰ Mistrust in the police institutions can indicate the perception of impaired quality of public safety in the community, as the majority of the interviewees considered this to be of normal, bad or very bad quality. On the other hand, it is observed that those who had contact with the police actions in the community considered their actions to be of better quality.

In the community, the UBS is characterized as the individual's gateway to the health system, above all in relation to the users of drugs of abuse, as these do not have the financial resources for seeking assistance in private clinics, thus needing access to health almost exclusively in the public services.²⁶

One can infer that the community's UBS promoted the embracement of the users, acting as a means for attending the demand for access and the strengthening of the link between the health team population, and the integral care at the level of the PHC.

The absence of a link between the inhabitants of one community and the professionals of the health team was observed in one study undertaken with young people receiving inpatient treatment in a hospital unit, diagnosed with poisoning by drugs of abuse. This study also found an epidemiological risk in the territory in which they lived, and the inadequate use of the health services of the community where they lived.² This situation draws attention to the need for publicizing and/or developing health promotion strategies referent to the use of drugs in this community, and strengthening the link between the professionals of the UBS and the community's residents.

The drugs of abuse, due to being taboo, also produce a pact of silence among the professionals of the health services (who do not investigate their use) and the patients (who do not reveal that they use drugs of abuse), thus reinforcing the establishment of a link between the professionals, the service users and their family members, and the residents of at-risk communities.²⁷

The present study verified that the individuals who seek assistance in the community's UBS for resolving problems related to the use of drugs of abuse, or to cease their use, received health

education and counseling, being referred when necessary for inpatient treatment in rehabilitation clinics and to the social services.

The present study's results confirmed the high perception of the presence of drugs of abuse and their negative effect in the routine life of the community; on the other hand, they also confirm this community's social vulnerability, through the perception of problems such as criminality, lack of specific education, unemployment, poverty and housing.

In other communities, these problems stand out among the residents' opinions. In Campinas, São Paulo, in 2003, one study found that the social problems considered serious by more than 45% of the population of various communities in this municipality were related to the use and sale of drugs of abuse, unemployment, criminality, poverty, physical safety, government, health services, abuse of children and women, pollution, education, housing, quality of life, transport, racial prejudice and family life, indicating that these problems are frequently perceived by the population – principally in communities which are more socially vulnerable – as lacking investment and implementation of actions of public policies.¹⁶

Another study, undertaken by the *Instituto Paraná Pesquisas*, which interviewed 1,505 citizens of the State of Paraná, identified that the most relevant problems faced by people from Panama were public safety (56%), health (43%) and the drugs of abuse (28%), corroborating the problems indicated by the inhabitants of the community.

In addition, a study undertaken in a UBS of a municipality in the south of Brazil, through group meetings, indicated that the issue under debate considered most important for discussion in the group was related to the use of drugs of abuse and to violence, which constituted a serious problem found in that UBS' territory.²⁸

Considering the problems faced in the community, among which the presence of drugs of abuse stands out, the inhabitants were questioned regarding their perception of the most important and necessary actions for combating the use of drugs of abuse and eliminating violence from the community. It is noteworthy that, although 55.3% of the interviewees stated that increasing policing in the community would be the most efficient action for combating drug use, 35.7% of the interviewees mentioned actions related to social aspects, such as consciousness-raising campaigns, recreation/leisure and employment.

The actions listed by the inhabitants interviewed coincide with the proposals of the public policies for confronting the use of drugs of abuse. The national Integrated Plan to Confront Crack and other Drugs, published in Decree n. 7179, of 20th May 2010, aims for integration and permanent articulation between health policies and actions, social work, public security, education, sports, culture, human rights and youth, in consonance with the assumptions, guidelines and objectives of the National Drugs Policy.^{8,29} It is observed that, in accordance with the perception of the inhabitants, these actions are considered urgent and necessary for combating the use of drugs in the community, but have not yet been implemented in this community.

CONCLUSION

The social perception regarding drugs of abuse and violence in the community studied made it possible to identify the routine experience of the residents interviewed with the use of drugs and actions of public policies geared towards confrontation of the use of drugs in this community.

In a community with high indicators of violence related to the use of drugs of abuse, it is considered that there was low demand for the municipality's and community's health and social services in order to resolve problems related to the use of drugs of abuse in that population; however, those who sought this service received health education and counseling, being referred when necessary for inpatient treatment in rehabilitation clinics, and to the social services.

The perception of the existence of actions for preventing the use of drugs and combating trafficking was greater for the municipality when compared to the perception of these actions in the community. In relation to the public security personnel in the community, the majority of the interviewees stated that they did not have confidence in the work of the Police, but that the presence of the Police was requested in the community for resolving problems related to the drugs of abuse.

In the perception of the interviewees, the three most important problems present in the routine of the community were related to the presence of drugs of abuse, and to the poor quality of the healthcare and public safety. Also in line with this perception, the most important and necessary actions for combating the use of drugs of abuse and eliminating the violence from the community were to increase policing in the community, although

actions related to the social aspects for preventing their use were also listed.

In addition, the social perception of the residents interviewed points to unawareness of actions of prevention of the use of drugs of abuse, which are the target of actions of public policies, but which were not effectively implemented in this community, or did not involve the residents as participative agents in this process.

The Family Health Strategy, due to selecting the family as the program's unit of care, and undertaking work directed towards the community, brings together conditions which allow the overcoming of the problems related to the abuse of and dependence on drugs, evidencing its importance in this context. It was also observed that it is necessary for there to be preventive actions involving the Police being in greater proximity to the community.

The present study constituted the first step towards identifying the perception of residents who coexist with the negative effects of the drugs of abuse; however, it presented weak points in relation to the global evaluation of these actions of public policies and the community, as it did not identify, in conjunction with the local services, which actions are provided for the community. As a result, evaluative studies are suggested for identifying the actions offered, and the reasons why the community's inhabitants do not perceive these actions or do not become involved in the process of preventing the use of drugs of abuse.

REFERENCES

1. Cogollo-Milanés Z, Arrieta-Vergara KM, Blanco-Bayuelo S, Ramos-Martínez L, Zapata K, Rodríguez-Berrio Y. Factores psicosociales asociados al consumo de sustancias en estudiantes de una universidad pública. *Rev Salud Pública Bogotá*. 2011;13(3):470-9.
2. Ballani TSL, Oliveira MLF. Uso de drogas de abuso e evento sentinela: construindo uma proposta para avaliação de políticas públicas. *Texto Contexto Enferm*, 2007 Jul-Set; 16(3):488-94.
3. Beck LM, David HMSL. O abuso de drogas e o mundo do trabalho: possibilidades de atuação para o enfermeiro. *Esc Anna Nery*. 2007 Dez; 11(4):706-11.
4. Reis LM, Uchimura TT, Oliveira MLF. Socioeconomic and demographic profile in a vulnerable community to the use of drugs of abuse. *Acta Paul Enferm*. 2013; 26(3):276-82.
5. Barros MA, Pillon SC. Programa Saúde da Família: desafios e potencialidades frente ao uso de drogas. *Rev Eletr Enferm* [online]. 2006 [acesso 2012 Nov 03]; 08(1):144-9. Disponível em: http://www.fen.ufg.br/revista/revista8_1/revisao_02.htm

6. Araújo LF, Castanha AR, Barros APR, Castanha CR. Estudo das representações sociais da maconha entre Agentes Comunitários de Saúde. *Ciênc Saúde Coletiva*. 2006 Set; 11(3):827-36.
7. Carlini EA, Galduróz JC, Noto AR, Nappo SA. II Levantamento domiciliar sobre o uso de drogas psicotrópicas no Brasil: estudo envolvendo as 108 maiores cidades do país - 2005. Brasília (DF): Secretaria Nacional Antidrogas; 2007.
8. Ministério da Saúde (BR). Política do Ministério da Saúde para a atenção integral a usuários de álcool e outras drogas. Brasília (DF); 2004.
9. Andrade LMB, Quandt FL, Campos DA, Delzियो CR, Coelho EBS, Moretti-Pires RO. Análise da implantação dos Núcleos de Apoio à Saúde da Família no interior de Santa Catarina. *Saude Transf Soc*. 2012; 3(1):18-31.
10. Instituto de Pesquisa Econômica Aplicada. Sistema de Indicadores de Percepção Social (SIPS) – Segurança Pública. Governo Federal. Brasília (DF): Secretaria de Assuntos Estratégicos da Presidência da República; 2012.
11. Gelbcke FL, Padilha MICS. O fenômeno das drogas no contexto da promoção da saúde. *Texto Contexto Enferm*. 2004 Jun; 13(2):272-9.
12. Castiel LD. Promoção de saúde e a sensibilidade epistemológica da categoria ‘comunidade’. *Rev Saúde Pública*. 2004 Out; 38(5):615-22.
13. Instituto Brasileiro de Geografia e Estatística [online]. Censo Demográfico 2010. [acesso 2012 Nov 03]. Disponível em: <http://www.ibge.gov.br/home/estatistica/populacao/censo2010/default.shtm>
14. Moura EC, Malta DC. Consumo de bebidas alcoólicas na população adulta brasileira: características sociodemográficas e tendência. *Rev Bras Epidemiol*. 2011; 14(1):61-70.
15. Ministério da Saúde (BR). Vigilância de fatores de risco e proteção para doenças crônicas por inquérito telefônico – Estimativas sobre frequência e distribuição sócio-demográfica de fatores de risco e proteção para doenças crônicas nas capitais dos 26 estados brasileiros e no Distrito Federal em 2011. Rio de Janeiro (RJ): 2011; 136p.
16. Marín-León L, Oliveira HB, Barros MBA, Dalgalarondo P, Botega NJ. Percepção dos problemas da comunidade: influência de fatores sócio-demográficos e de saúde mental. *Cad Saúde Pública*. 2007 Mai; 23(5):1089-97.
17. Instituto Brasileiro de Geografia e Estatística [página na internet]. Pesquisa mensal de emprego, 2011. [acesso 2012 Nov 03]. Disponível em: [http://www.ibge.gov.br/home/presidencia/noticias/noticia_visualiza.php?id_noticia=2222&id_pagina=1](http://www.ibge.gov.br/home/visualiza.php?id_noticia=2222&id_pagina=1)
18. Feltran GS. Fronteiras de tensão – política e violência nas periferias de São Paulo. ed. UNESP. São Paulo (SP): 2011; 256p.
19. Bernardy CCF, Oliveira MLF. O papel das relações familiares na iniciação ao uso de drogas de abuso por jovens institucionalizados. *Rev Esc Enferm USP*. 2010 Mar; 44(1):11-17.
20. Aguilar LR, Pillon SC. Percepción de tentaciones de uso de drogas en personas que reciben tratamiento. *Rev Latino-Am Enferm*. 2005; 13(spe):790-7.
21. Funes GM, Brands B, Adlaf E, Giesbrecht N, Simich L, Wright MG. Factores de riesgo relacionados al uso de drogas ilegales: perspectiva crítica de familiares y personas cercanas en un centro de salud público en San Pedro Sula, Honduras. *Rev Latino-Am Enferm*. 2009; 17(esp):796-802.
22. Laranjeira R. Legalização de drogas e a saúde pública. *Ciênc Saúde Coletiva*. 2010 Mai;15(3):621-31.
23. Dahlber LL, Krug EG. Violência: um problema global de saúde pública. *Ciênc Saúde Coletiva*. 2007; 11(supl):1163-78.
24. Marti CN, Stice E, Springer DW. Substance use and abuse trajectories across adolescence: a latent trajectory analysis of a community-recruited sample of girls. *Journal Adolesc*. 2010; 33(3):449-61.
25. Instituto de Pesquisa Econômica Aplicada (BR). Sistema de Indicadores de Percepção Social (SIPS) – Saúde. Governo Federal. Secretaria de Assuntos Estratégicos da Presidência da República, Brasília (DF): 2011; 21p.
26. Marangoni SR, Oliveira MLF. Uso de crack por múltipara em vulnerabilidade social: história de vida. *Ciênc Cuid Saúde*. 2012 Jan. 11(1):166-72.
27. Melchior R, Nemes MIB, Alencar TMD, Buchalla CM. Desafios da adesão ao tratamento de pessoas vivendo com HIV/aids no Brasil. *Rev Saúde Pública*. 2007; 41(supl.2):87-93.
28. Oliveira SG, Ressel LB. Grupos de adolescentes na prática de enfermagem: um relato de experiência. *Ciênc Cuid Saúde*. 2010; 9(1):144-8.
29. Brasil. República da Presidência. Casa civil. Decreto n. 7179, de 20 de maio de 2010. Institui o Plano Integrado de Enfrentamento ao Crack e outras Drogas, cria o seu Comitê Gestor, e dá outras providências. Brasília (DF): 2010.