Reports on social vulnerability of being different and their approach in the health context

In worldwide context, the human rights of drug users have been rarely mentioned or considered in specific public policies or in studies. In most countries, policies and laws about drugs are not based on the commitments of international human rights\(^{(1)}\). Likewise, these users are little mentioned in the fields of human rights, since issues related to drug use are rarely informed by monitoring mechanisms and structures of human rights. Drug use approaches are focused on criminalization and the imposition of severe penalties to users more than to public health measures\(^{(2)}\).

However, there are human rights laws which apply to all people and these users are part of the whole population, even though the society’s behavior is to exclude more rather than attempt to incorporate them into contact with other beings.

The right to achieve high physical and mental health standards includes the right to health services that are used by customers without fear of punishment or being subjected to moral judgment. Implementing credible policies to result in unnecessary morbidity and mortality prevention of the population is part of the obligations related to health. The right to health, with no discrimination, is an inherent right as any other right\(^{(2)}\). People who use drugs, as any citizens, have also the right to life, freedom, bodily integrity, privacy, education, equality before the law, freedom of movement, participation in social and association events and access to information\(^{(3)}\).

The Brazilian Constitution (1988) recognizes health as a citizen’s right and duty of the State; in it the foundation for the creation of the Unified Health System (SUS, in Portuguese) is established, based on the principles of universality, integrality and social participation. The constitutional recognition of the right to health was the result of prolonged political clashes and actions of the Movement of the Brazilian Health Reform, created by health workers. Despite the advances and institutional innovations, including the decentralization process by transferring to municipalities the responsibilities for managing local health, the SUS is a system under continuous development which is still struggling to enable universal and equitable coverage to all Brazilian citizens\(^{(4)}\).

The Psychiatric Reform movement is linked to the Brazilian health structure, creating the Centers for Psychosocial Care (CAPS and CAPS-alcohol and drugs), and proposing a psychosocial action. Such a support service has started the change from the perspective of mental health treatment, emphasizing on healing to the welcoming of individualities and people’s relationships inserted in a physical and social environment; therefore, under the care scope offered in service health, it was considered that it occurs in a network of interdependencies at the boundary between the individual and the collective\(^{(5)}\).

At the moment, the professionals of mental health services (CAPS and CAPS-ad) need to renew their commitment to “the values of autonomy and leadership of individuals of co-responsibility among them, of solidarity of established ties, of the rights of users and collective participation in the management process”\(^{(6)}\). Considering the service users as participants of their process of treatment means placing them to the position of active agents, as health work co-managers\(^{(5)}\).

As regards service to users with mental health disorders, included in this group those with disorders or harmful use of alcohol and other drugs, in spite of advances in care, with more humanized and participatory treatment, there are shortcomings that hinder the incorporation of the assumptions mentioned above, such as the professional qualification\(^{(7-9)}\), the obstacles in work development in interdisciplinary logic\(^{(7,11)}\), the deficit connection with the health Care network as a whole\(^{(7,10)}\), the precariousness in infrastructure and problems in management\(^{(8)}\).

As an additional obstacle to the paradigm of the Brazilian psychiatric reform, the little reflection on the use
of psychotropic medications is noticed, such as if prescription alone were sufficient for treatment, not including the users in the decisions of a care that can last a lifetime, restricting their participation to be listeners of some guidance on the symptoms of their illness and clarification of prescription drugs\(^{(5)}\), given in a standardized way for all individuals.

In fact, it is more important that the professionals recognize the patients’ experience than just listening to what they think and feel, in order to actually consider them as participants in the management of their treatment. The great challenge is to create the conditions to change the attitude among the health team that include the experiences of all people involved (professionals and patients) in the process of producing health actions\(^{(5)}\).

In this issue, the magazine presents five articles that discuss issues related to the previously focused topics, the legal impact on the human rights of drug users, a fact itself that places them on the margins of society and causes many of personal and social losses. Attitudes of professionals in Primary Care for individuals who have abusive use of alcohol were also investigated, and as a result there were positive attitudes in all items of the scale used (EAFAAA) in relation to the patient, which is a great advance in the health care of this population.

Still with the group of psychoactive substance users, one of the articles refers to the association between nutritional status and the pattern of use among patients at a Psychosocial Care Center for Alcohol and Drugs, which is a little studied topic, whose the results have indicated both the weight loss as overweight on users, associated with the drug used and the pattern of consumption. In trying to create ways to approach based on respect for the rights of this user, the article that discusses on the perception of drug users about harm reduction is a good example of how to establish a dialogue between the discourses of health and those who are usually relegated to abandonment for not meeting the prerogatives of health services.

As for working conditions in Centers for Psychosocial Care, in general, two articles address the need for professional training; one adds the presence of other problems mentioned in the beginning, such as the challenges for interdisciplinary work, the effectiveness of the network health, among other “obstacles” that interfere with attention given to the families of patients. The other text, which is an integrative review, before the analysis of the articles found, emphasizes the need for training of nurses to meet the care requirements for the mentally ill patients, from the perspective of those Psychiatric Reform assumptions.

In the mental health spectrum the article is nonetheless important, which is also and integrative literature review, whose purpose is to identify the care provided by nurses to the individual with suicidal behavior, and more relevant is the observation on the limited number of found articles that mention the theme. As a recommendation, it is emphasized the importance of the nursing staff, managers and society in general to turn their attention to the problem in order to better understand suicidal behavior. Apart from the fact that patients with such behavior are not to the liking of health professionals and sometimes are avoided or target of judgments, the recommendation of the authors makes sense.

It becomes even more relevant, based on the global epidemiological data, as suicide is among the three and five causes of death among young men (15-44 years) in most of the samples of countries with high and average admissions, and in which accidental deaths remain the leading cause of death in this group of countries from all economic levels. It should be also noted that the number of suicide deaths is substantially underestimated, mainly due to underreporting and inadequate classification (diagnosis) in general, due to legal and cultural reasons\(^{(12)}\).

The expectation is that such articles inspire readers in developing new studies, searching for other facets of the themes, and even motivate them to deepen the outcomes and discussions presented.

References


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