Integrative Community Therapy as a strategy for coping with drug among inmates in therapeutic communities: documentary research

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The aim of this study was to analyze the records from rounds of Integrative Community Therapy regarding the problems listed and the strategies named for dealing with them. This is retrospective documentary research conducted in Barra do Garças/MT, the data for which were taken from 22 records of therapy conducted in two male therapeutic communities in 2015. Content analysis of the data revealed the problems most commonly discussed (feelings of loss stemming from the processes of drug addiction, and Anxiety and fear of relapse), as well as showing the representativeness of TCI as a support strategy, helping the inmates deal with their problems through trust and renewed links and providing emotional support through hope and faith.

Descriptors: Social Support; Therapeutic Community; Substance-Related Disorders; Community Participation.

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Terapia Comunitária Integrativa como estratégia de enfrentamento às drogas entre internos de comunidades terapêuticas: pesquisa documental

Neste estudo, objetivou-se analisar os registros de fichas de rodas de Terapia Comunitária Integrativa, quanto aos problemas enunciados e estratégias enunciadas para enfrentamento. Trata-se de pesquisa retrospectiva, documental, realizada em município do Estado do Mato Grosso, cujos dados foram coletados por meio de 22 fichas de registro de rodas realizadas em duas comunidades terapêuticas masculinas, no ano de 2015. Na análise categorial dos dados, foram evidenciados os problemas (sentimentos de perdas geradas pelo processo de dependência de drogas, ansiedade e medo da recaída) mais discutidos, bem como apontou-se a representatividade da Terapia Comunitária Integrativa como estratégia de apoio no auxílio para o enfrentamento por meio da confiança e do resgate de vínculos, bem como no estímulo, mediante conceitos como esperança e fé, ao suporte emocional.

Descritores: Apoio social; Comunidade Terapêutica; Transtornos Relacionados ao Uso de Substâncias; Participação Comunitária.

Terapia Comunitaria Integrativa como estrategia de afrontamiento de las drogas entre internos de comunidades terapêuticas: investigación documental

Este estudio se realizó con el objetivo de analizar los registros de las ruedas de Terapia Comunitaria Integrativa en cuanto a los problemas enumerados y estrategias para el enfrentamiento. Se trata de una investigación retrospectiva, documental realizada en ciudad de Mato Grosso, cuyos datos fueron recolectados por medio de 22 fichas de registro de ruedas realizadas en dos comunidades terapêuticas masculinas en el año 2015. En el análisis de categorías de los datos evidenció los siguientes problemas (sentimiento de pérdidas generadas por el proceso de dependencia de las drogas, ansiedad y miedo a la recaída), mas discusiones revelaran como el TCI es una estrategia de apoyo, la cual auxilia el enfrentamiento por medio de la confianza y rescate de vínculos lo que proporciona, estímulo, el apoyo emocional a través de la esperanza y la fe.

Descriptores: Apoyo Social; Comunidad Terapéutica; Trastornos Relacionados con Sustancias; Participación Comunitaria.

Introduction

The problems caused by chemical dependence have provoked an increasingly worrying problem in Brazil, provoking the search for preventive actions, rehabilitation and reinsertion of this subject in society (1-2). Although Brazil has a National Drug Policy guaranteeing comprehensive treatment to drug users, its activities have not always been effective in reducing consumption among the various age groups, social classes and genders, and nor has it slowed violence connected with drug dealing and consumption (3-4).

In Brazil the most commonly consumed legal and illegal drugs are alcohol and marihuana, respectively. As for consumption according to gender, alcohol, tobacco, marihuana, cocaine and crack are the most prevalent among men and the use of stimulants, benzodiazepines, appetite suppressants and opiates among women(5).
Thus, the 2nd Household Survey on Psychotropic Drug Use, carried out in Brazil in 2004, indicated that marihuana was the most commonly consumed illegal drug in the Midwest region (7.8% of those interviewed), consumption of which was three times greater among men, especially in the 25 to 34 year old age group\(^6\). The latest survey, carried out in 2010, revealed an increase in marihuana use, compared with the 2004 survey, in Campo Grande (from 3.7% o 4.5%) and Cuiabá (from 3.7% to 4.8%) and in cocaine use in Brasilia (from 1.8% to 4.1%) and Cuiabá (1.4% to 3.0%)\(^5\).

Studies indicate that drug use has devastating consequences for the user’s life affecting family structure, social life, health and commitment to studies and, consequently, professional life\(^1,2\).

For the individual who uses drugs and becomes addicted, there are various forms of health care organized to meet the needs of this community such as hospitalization in a general hospital for detoxification, treatment at the Psychosocial Care Centers for Alcohol and Drugs - *Centros de Atenção Psicossocial para Álcool e Drogas* (CAPSsad) and treatment in Therapeutic Communities (CT)\(^5\).

Treatment should use an “interdisciplinary approach based on psychotherapeutic and social interventions, aiming at the social rehabilitation and reintegration of the addict”\(^7\).

Integrative Community Therapy (TCI) is used to offer the drug addict complementary care in the rehabilitation process. Integrative Community Therapy was created in 1987 by the psychiatrist and anthropologist Dr. Adalberto de Paula Barreto, lecturer at the Department of Community Health, part of the Faculty of Medicine of the Universidade Federal do Ceará\(^8,4\).

Esta abordagem complementar é inserida no contexto do SUS (Sistema Unificado de Saúde), sendo usado como um método de cuidados leves, usado para prevenir o surgimento de doenças causadas por situações estressantes e conflitantes vivenciadas na vida diária das pessoas\(^4\).

TCI is “based on the community exchanging their experiences through discussing their life stories and how they overcame suffering, in which all are equally responsible for finding solutions and overcoming the challenges of day-to-day life”\(^9\). This method of execution takes place in a wheel and comprises five stages: reception, choice of theme, contextualization, problematization and closure\(^9\).

TCI began to be used in Cuiabá (MT) by the Health and Citizenship Nursing Research Group - *Grupo de Pesquisa Enfermagem Saúde e Cidadania* (GPESC) and the Connecting Knowledge PET group at the Universidade Federal de Mato Grosso in Cuiabá in 2009. In Barra do Garças (MT), TCI began to be used in the care network for drug users in therapeutic communities in 2015, after therapeutic community nurses were trained at the Universidade Federal de Mato Grosso (UFMT), Universitário do Araguaia Campus (CUA) operating mainly in mental health care facilities.

TCI has been shown to be important for certain groups formed of drug addicts in the process of recovery, recognizing their vulnerabilities in relationships, life experiences and addiction\(^10\). Given this, the aim of this study was to analyze the records regarding the problems revealed during TCI and the strategies discussed to deal with them.

**Methodology**

This was a piece of retrospective, qualitative documental research undertaken at the Universidade Federal de Mato Grosso (UFMT), Universitário do Araguaia Campus (CUA) in Barra do Garças-MT. The records form part of the archives of the “Integrative Community Therapy: within our group” extension group at the UFMT/CUA, and thus use of the documents was authorized by the extension project coordinator.

The source of the data collected for this study were the original records of the TCI known as “information organization sheets for the TCI groups” containing information such as the number of participants in the groups, the main problems experienced, strategies suggested to deal with them and spontaneous statements on the therapy experienced. For this study, the records collected were completed by three municipal nurses giving treatment between February and December 2015.

Thus, 55 records were consulted, although only 40% of these met the study inclusion criteria: records of TCI conducted with inmates at Therapeutic Communities and with all of the fields on the TCI groups appropriately completed. Thus, 22 records were selected for this study, concerning TCI groups in two therapeutic communities in the municipality, religious institutions with capacity for 30 males, aged 18 and over, addicted to alcohol, crack or other drugs and who may or may not have been homeless.

These users accessed the therapeutic communities voluntarily, by means of a court order or through informal referral through the psychosocial care network in the region. Admission can vary between six
(alcohol) and nine months (alcohol and other drugs). Medical care was provided to the CT users through the Psychosocial Care Centers for Alcohol and Drugs (CAPSad) in partnership with the municipal health secretariat. Other health promoting, rehabilitation and social reintegration activities are undertaken by professionals on a voluntary basis or by academics linked to health care research and extension projects at public and private universities.

The data were analyzed according to the categorical analysis and the findings were organized by analytical categories according to the topics most stated by the participants.

The research was approved by the research ethics committee of the UFMT/CUA, protocol nº 515/705 and followed the ethical observation precepts laid out in National Health Council Resolution 466/2012 dealing with research involving human beings.

Results and Discussion

The sample consisted of 22 records of information organization of the Integrative Community Therapy performed in two male Therapeutic Communities, from January to December 2015. The mean number of participants in the TCI groups was 14.63, with ages ranging from 19 to 68 years old.

A. Problems revealed by the participants

The problems experienced by the male drug addicts in their recovery processes form the fourth and fifth items on the information sheet. During the TCI, the collection of this information occurs in the phase of choosing the theme of the wheel, in which all the participants are instigated to speak of problems that are distressing them.

According to studies, these problems may be emotional or psychological, related to family breakdown or social or health problems encountered in the addicts’ lives (4). In this study, problems will be presented in two subcategories: feelings of loss stemming from drug addiction and fear or relapse.

A.1 Feelings of losses generated by the drug addiction process

The feelings of loss are related to the harm drug addiction causes to all aspects of life (family, social, economic and health) and, in the long term, these losses may lead to the user to crime and/or begging to support the addiction (12).

In this study such losses were represented by the lack of family contact (27%), feelings of frustration (9%) and health problems (5%).

For Ferro and Meneses-Gaya (13) drug abuse and addiction cause harm and frustration that affect various dimensions of the human being, especially that of the family. These consequences are related to the entire process of addiction involving the individual and the family. For Silva (14), the family suffers a constant state of crisis, threatening relationships between members and requiring the constant reforming and/or reorganizing of ties (14).

Studies indicate that family can contribute to the recovery process for the addict, collaborating actively in planning treatment for the user and preparing to welcome them following their treatment (7).

The feelings of frustration revealed included financial difficulties and fear of relapse. Such feelings are occasioned by drug addiction. From the perspective of the user’s recovery, he needs to learn to deal with frustration, be it caused in all areas of life (social, economic, emotional etc) (15).

A study by Brito (10) conducted in the interior of Mato Grosso state with inmates of therapeutic centers also revealed feelings of frustration (loss and fear) among participants, corroborating the research presented here (10).

For Barreto (8) TCI provides a place in which individuals can communicate and come to know themselves, becoming a living network of communication in which each one can express their sentiments, be they of happiness, sadness, fear, anguish or frustration, strengthening them to react to adverse situations, being considered that the wheels of TCI is a place where the feelings of frustrations can be reviewed and worked (8).

Another problem revealed in this study was concerns about health. It should be emphasized that an individual’s physical and mental health are weakened by drug abuse compared with many other diseases, representing one of the greatest problems facing public health (5).

It is, therefore, common for drug users to develop health problems, resulting from their lifestyle and from risk taking behavior in order to feed their addiction, such as psycho-emotional changes (e.g. impulsiveness, mood swings) as well as acute or chronic illness (e.g. AIDS, hepatitis, tuberculosis, leprosy, malnutrition, endocarditis or pulmonary emphysema). Such conditions appear as complications requiring health care service intervention combined with the proposed treatment for the addiction (16).
A.2 Anxiety and fear of relapse

Feelings such as anxiety and fear are common in drug users, especially during the process of recovering from addiction, due to uncertainties and loss experienced, aggravated by the sensation of imminent relapse.

In this study, anxiety was expressed as anguish, restlessness and fits of weeping in 14% of the records, and fear of relapsing expressed through feelings such as shame, guilt, rage and desperation in 14% of the problems recorded.

As for anxiety, this is a common symptom among inmates of Therapeutic Communities or any other place of treatment, and may be present through sadness, distress, motor agitation and even expressed by frequent crying\(^{(10)}\).

In the case of the ICT participants in this study, the process of anxiety may be the result of the inmates spending most of their time idle, far from their families and the routines established before their internment, or even result from the process of withdrawal.

Allied to this there is still the fear of relapse. The process of relapsing refers to the pattern of use prior to the intervention; this whole process is rooted in feelings like shame, guilt, rage, sadness, frustration and desperation. Rezende and Pelícia\(^{(17)}\) state that, socially, during the recovery process most users commit themselves to no longer using drugs, but feel under constant threat of relapse upon leaving the treatment facility\(^{(17)}\).

Given the problems revealed in the two subcategories mentioned above, Community Therapy seeks to minimize participants’ feelings and suffering, opportune provides users with a moment in which they listened to, respected, express their sentiments and share, and this can be expressed through speaking, weeping or even singing\(^{(8,18)}\).

Thus, by placing the situation-problem before the group, the individual offers the whole group the chance for wider reflection in which diverse factors and elements of the context of the economic and social systems are included, they are able to perceive that the problem in question is common and the solution lies, above all, in social transformations in which each can contribute to the recovery process of the others and together they can achieve better results\(^{(8,19)}\).

The problem that the participant had, up until then, experienced in an individual way is shared with the treatment group, when they all share in the pain suffered by the others\(^{(19)}\). Suffering shared with the group becomes, in a way, a common, human and community feeling\(^{(19)}\).

The records reveal the TCI provides a place to mediate, verbalizing between the individuals who have the chance to lay out their fears, explain their problems based on their feelings and their anguishs, being able to develop a relationship through exchanging experiences, sharing, changing, relating to each other and seeking alternatives for their wellbeing\(^{(20)}\). This situation confirms the importance of individuals finding internal and external resources to overcome their difficulties, exchanging experiences, realizing that they are not alone in their abandonment and marginalization\(^{(20)}\).

B. Representativeness of TCI as a support strategy

Community Therapy allows people to feel called to express their everyday suffering and in turn contributes to pain relief, understood as a place for sharing for the relief of mental suffering that afflicts many addicts\(^{(9,21)}\).

In this study, the most commonly recorded strategies were: trust (77%), recovering ties (68%), faith (55%), hope (50%), resilience (23%), empowerment (23%) and self-awareness (17%) which will be discussed in the subcategories below.

B.1 Confrontation through trust and redemption of links

The records indicate that one of the most cited coping strategies was trust, mainly related to the treatment of chemical dependency, manifested through the desire to overcome the addiction and in the quest to support each other to overcome the difficulties faced. Trust is a feeling of conviction for something or someone that is necessary for people to relate to and keep commitments. As for using trust as a strategy for coping with addiction, one of the theoretical foundations of TCI is encouraging personal empowerment of the participants, through socialization of the day-to-day experiences expressed by the other participants\(^{(22)}\).

Other terms used by the inmates to describe coping strategies were overcoming, empowerment and self-awareness, represented in this study as resilience. According to Braga et al\(^{(23)}\), resilience is an inherent human ability to transform oneself and transform our reality, overcoming or adapting to day-to-day adversity based on internal elements and others in the environment that allow us to create this ability to overcome\(^{(23)}\).
Studies point out that TCI provides a common world of argumentation especially because, the participants of the TCI wheels have the opportunity to reflect on their lives, providing changes in their daily lives (18, 21, 23, 24). In addition, it launches into the context of its participants, enabling them to recognize their own reality by stimulating them to new discoveries and reinventions built collectively (24).

TCI is also a tool that values the participants’ powers of resilience as activities take place in groups, strengthening participants individually and collectively through the search for new strategies for their problems (20).

Another strategy of the participants, relevant to this study, which appears in the records, was that of recovering ties through getting closer to family, forming new friendships and seeking paid work. Paucity of social relationships is harmful to health, as can be seen in the breaking of family ties, nuclear or otherwise, as these breaks may be surrounded by anguish, sadness, stress, exhaustion and lack of trust due to the addiction and relapses during treatment (21). It must be noted that such breaking down of family and social ties leads the user to feel lonely, discouraged and of no significance in life (12).

For Braga et al. (23) “Integrative Community Therapy plays an important role as a space for constructing a support network, a strategy for creating and strengthening social ties and a tools for awakening the capacity of resilience, it being a space in which stories are recounted and the participants get to know each other’s stories.” (23).

TCI, then, collaborates in forming and/or strengthening ties within the community, an important strategy that encourages changes by focusing more on the collective. The individual is transformed into the collective, leading to the empowerment of the community through shared experiences (22).

B.2 Stimulating to emotional support

In this study, emotional support was expressed mainly through hope and faith, feelings described by the participant inmates during the closing rituals of the TCI groups.

Hope is related to inmates’ expectations of having positive experiences. Thus, Community Therapy participants are strengthened by believing in positive results in their struggle against addiction (4).

The records also show faith related with the search for inner peace, the alleviation of suffering. It should be noted that the therapeutic communities which participated in this study were of a religious nature, considered a reference for the subject and for the families, contributing as they do to distancing the individual from troubled proximity to drugs, offering an environment in which they can recover as well as offering spiritual support, dealing with users’ and family members’ immediate anxieties, which often remain undealt with by the public services (25, 10).

Encouragement towards spirituality favors the recovery process in alcohol and/or other drug abuse and addiction, and this process can be associated with being included in a new style of life in which ties, daily practices and even participation in religion are encouraged in order for the inmates to distance themselves from situations that may lead to use of psychoactive substances (20).

For many, faith is an instrument for overcoming problems. Together with new behavior, faith can awaken the individual’s inner strength, contributing to the recovery process (12). However, Braga et al. (23) emphasize that there should be other (social, political) alternatives, in addition to religion, when seeking to support those with drug addictions (23).

Thus, the data presented here reveal that the participants transform themselves and are transformed during their interaction in TCI groups, contributing to developing elements that encourage the critical and reflexive capacity as well as reestablishing or creating ties that create the understanding necessary for change (8).

Final Considerations

The records enable us to identify the most commonly mentioned problems as loss of family, health problems, anguish and fear. On the other hand, positive feelings were related to confidence in the rescue of affective bonds and obtaining emotional support.

These records revealed that the momentum of TCI’s implementation encouraged users to talk about their problems, helping them and encouraging them to recover their strengths and autonomy, provided by an environment conducive to the reception of the different and unique circumstances of life, which could aid in the process of coping with suffering.

The limitation of this study refers to if it is a documentary research, in this way the participants were not contacted directly, which makes it impossible to identify the particular expressions and experiences of the group.
In order to do so, the results of this study and others described in the literature in similar contexts already indicate that Integrative Community Therapy shows itself in the understanding of a collective care space, where it promotes health and well-being to the subjects through socialization and sharing of their stories, an important tool for the complementary care of people with addiction to drugs.

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