The use and abuse of alcohol and other drugs has been increasing at a significant pace.

Consumption of alcohol and psychoactive substances entails physical, mental and social consequences for addicts as well as their environment.

According to WHO, addiction is characterized by a set of physiological, behavioral and cognitive phenomena.

It is acknowledged that the drugs phenomenon is above all a social problem that is directly related with the population’s health.

Data from the UN World Drug Report 2005 already appointed about 200 million users around the world, with consumption predominantly in young people.

Knowledge production on the theme has advanced enormously, supporting the elaboration of public policies to cope with the problem.

Prevention and care for chemical addicts remain unarticulated actions however, and do not constitute a practice with integrated networks. Actions are focal and immediatist, without any assessment of impact on policies, working to improve the current picture of use and abuse of alcohol and other drugs.

Particularly young people have not been a source of concern for the health system. There are childcare programs, programs for women and, more recently, for some types of diseases, including hypertension, diabetes or groups like the elderly.

Specialized services like CAPs-AD are few, recent and their specific goal is to deliver care to patients with disorders deriving from consumption and addiction to psychoactive substances. This confronts professionals with serious challenges at care as well as prevention level.

School, in turn, restricts itself to offering young students the minimum contents set by the Ministry of Education, without any concern with young people beyond the classroom.

In “modern” families, fathers, mothers and all adults go out to work; grandparents no longer live in the same space and many young people are alone.

Research keeps demonstrating that the youth starts using tobacco, alcohol and other drugs when they are between 12 and 18 years old. These people are at the mercy of the relations they establish with other young people and at the mercy of traffickers and addicts. They are fighting empty-handed against all dangers involved in using and abusing these substances.

Groups include those maltreated by the illusion brought about by the effects of the substances that “relieve” their anguish and are valued because they have the courage of using these products as if it were totally normal. When they start to perceive that they are victims and do not master what is happening, they hide the problems they have added to their daily life from their parents, teachers and friends. Hence, they become increasingly dependent. They reach out for support and help, which they do not find, except in some religious and self-help organizations.
That explains the importance of research on the risk factors for alcohol and psychoactive drugs associated with age, gender and other social conditions, including work, study, religion, violence, traffic accidents etc. Also, knowledge about the risks of use and abuse is important in terms of pregnancy, old age, stress, as well as mental illnesses, hypertension, diabetes and other conditions.

In view of this picture, what actions could health services offer to alcohol and drugs users? Are physicians, nurses, psychologists prepared to welcome and manage the situations they are confronted with?

Hopefully, information resulting from research and reflections, like those published in this issue of SMAD, among others, will be able to facilitate the dialogue between educators and young people, between professionals and health policies on alcohol and drugs use and abuse.

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