Capítulo 48

Drug use by high school students in Brazil's inland and factors associated with use

https://doi.org/10.56238/methofocusinterv1-048

André Luis da Silva Castro
Postdoctoral fellow in Human Sciences at the University of Porto. He is a professor at the Goiano Federal Institute
andre.castro@ifgoiano.edu.br

Diêgo Alberto Teodoro
Master in Conservation of Cerrado Natural Resources by the Federal Institute of Goiano, Urataí
dateodoro7@gmail.com

Edson Olivari de Castro
Assistant Professor at the Department of Psychology at UNESP Bauru
edson.castro@unesp.br

Beatriz Gaiotto Abud
Undergraduate student of the Psychology course at UNESP Bauru
b.abud@unesp.br

ABSTRACT
The aim of the study was to carry out an epidemiological characterization of drug use in the interior of Brazil and to identify factors associated with it. For this purpose, 1806 high school students from 10 municipalities in the state of Goiás participated of the survey. The results indicate the beginning of the use of alcohol and illicit drugs in the early years of adolescence, influenced mainly by friends and family. There was a greater consumption of drugs, alcohol and tobacco in relation to illicit substances. Protective factors such as adherence to a religion proved to be relative and family situations that involved violence and significant losses were revealed as risk factors. Finally, the epidemiological data collected on drug use, indicate the urgent need to plan and implement a public educational policy for adolescents that is broad enough to address the various facets of legal and illegal drugs.

Keywords: High school students, Substance abuse and Addiction, Education and Research Institutions, Public Health, Government Policy

1 INTRODUCTION

In a recent survey carried out with adolescents about alcoholic beverages and sexuality, it was known that alcohol — but it can be said that other drugs as well — whenever treated as a transversal theme in educational situations, only the pernicious aspects are highlighted, as something that is harmful to health — which is not even what you see in the media: in the case of legal drugs (alcohol, drinks with a high concentration of caffeine, etc.) pleasure is highlighted, and in the case of illegal drugs (present only in police news) the emphasis is on the negative aspects. In any case, little is said about the pleasure involved in the use of illicit psychoactives, just as little is said about the problems arising from the abuse of licit drugs (Pastana & Maia 2019)

It is not uncommon, however, for a range of other reasons to be listed in reports by users of alcohol and other drugs, and not all of them have a negative or objectionable background – since psychiatry follows almost all of the same reasons: drug (alcohol and other psychoactives - licit, regulated or illicit) in order to

enhance pleasures, relieve pain, increase disposition, stimulate, alleviate sadness, reduce tension, provide calm, modify sensibilities, perceptions, moods, in addition to experiences of "going out of oneself" (not necessarily in the pejorative sense of escaping from reality), differentiating oneself, unreasoning, "othering" in short.

The point is that this type of approach, that is, the one that also highlights the pleasure involved in the use of psychoactive chemical substances, is usually received as an apology for the use and complacency with the abuse, since everyone knows that the latter has been the source of countless problems. public health, fraying of social and work relations, etc. (Carlini, Nappo, Galduróz, & Noto, 2001; Meloni & Laranjeira, 2004). It is due to this conception that Harm Reduction, as a strategy to face the phenomena of alcoholism and addiction or drug addiction, has been treated with so much reserve, although indicated as a priority in the formulation of public health policies in Brazil. (Ministry of Health, 2003)

On the other hand, we understand that the relationship with drugs has been changing over time, and is currently extremely contaminated by the culture of the consumer society (Bauman, 2008), markedly narcissistic (Costa, 1989) – which means that individuals, seeing themselves threatened and forced to protect themselves from the feeling of impotence in obtaining complete satisfaction and success proclaimed by the "happiness industry", seek survival "by taking refuge in a basic defensive core of their personalities", which results in in what Lasch (1986) calls minimal self.

Added to this is a medicalizing social and media discourse, that is, the one according to which all (or almost) human hardships are resolved with the administration of medications that will act on the brain's reward system; in addition to generalist and moral assessments of the diverse relationships between subjects/drugs/society, which disregard all the variations involved. In fact, what we found is that there are different types of drugs; countless situations and contexts of use and abuse; an immeasurable number of people who use them in different ways so that there is no need to have a single discourse that tries to encompass all the complexity contained therein. Such behavior cannot be reduced to isolated and single explanations: it must be borne in mind that there are multiple determinations in the psychic, biological (physical), socio-economic and religious spheres, which influence and are influenced by the context in which they are to generate the desire to use psychoactive substances.

In any case, in relation to drug consumption, use and abuse by young people and adolescents generates greater concern, as this phase is considered conducive to experimentation, as this is a period of physical and psychological changes that can generate conflicts, doubts and discoveries, in addition to the desire for independence from parents and the search for acceptance in groups of people of the same age (Ferreira, Alvini, Teixeira, & Veloso, 2007; Almeida, Silva, Ferreira, Santos, & Gomes, 2007).

It is considered, then, that the school, as it represents a meeting space for young people and adolescents, in addition to favoring different experiences of coexistence, is a favorable and conducive institution for the development of studies on the use of psychoactive drugs by this population (Giacomozzi, Itokazu, Luzardo, Figueiredo, & Vieira, 2012). However, we cannot lose sight of the fact that, sometimes,

it becomes an ally of the market and encourages consumption (in terms of adherence to the current ideology), ceasing to be a space for prevention and discussion about the entry of young people into the labor market. , as it happens that, in some large centers, they will be recruited to work informally in trafficking. (Research by the Brazilian Institute of Innovation in Social Health (2003), as cited in Kehl, 2003).

Faced with the problem related to the use of psychoactive drugs by young people in the school context, epidemiological studies are important, as they diagnose certain situations, and may help to identify the factors that are associated with their occurrence, collaborating for the planning of more effective measures aimed at problem reduction (Sarriera, Moreira, Rocha, Bonato, Duso, & Prikladnicki, 2003). However, epidemiological knowledge and public policies related to drug use prioritize capitals and large urban centers, highlighting an important gap in knowledge about this problem in small and inland municipalities (Cf. Carlini, et. al, 2010) . Thus, the objective of the present study was to carry out an epidemiological characterization of drug use in the interior of Brazil and to identify the factors associated with the use of these substances.

2 MATERIAL AND METHODS

The present study was carried out in 16 public schools of the state and federal network, located in 10 municipalities that belong to the micro-region of Pires do Rio (Orizona, Pires do Rio, Silvânia, Gameleira de Goiás, Palmelo, Santa Cruz de Goiás, Cristianópolis, São Miguel do Passa Quatro, Urutaí and Vianópolis), Midwest region of Brazil, interior of the state of Goiás, as detailed by Castro et al. (2019) A total of 1806 high school students enrolled in the morning and afternoon shifts, as well as full-time students, participated in the survey. The average number of students per school in this location was 112.87 ±77.46. The micro-region of Pires do Rio has 3,168 students enrolled in the state and federal public secondary education network (Segplan, 2015), so the sample used in this work corresponds to 57% of the total number of secondary education students in that micro-region.

For data collection, a questionnaire was prepared for the students. The investigative questionnaire was self-administered and anonymous and was previously approved by the Ethics Committee of the Instituto Federal Goiano, under protocol nº 45/2013. The questionnaire was based on the World Health Organization (WHO) data collection instrument, adapted by Carlini-Cotrim and Rosemberg (1991) for Brazil (Amato, 2010) and readjusted to the needs of this research. In this questionnaire, a non-existent substance (Alucinex) was inserted to detect false positives. Questionnaires in which students indicated the use of this substance, which contained three or more unanswered questions and/or were incoherent, were discarded. As this questionnaire was adapted, a pre-test was carried out with 31 people to validate it. Data collection in schools took place between April and December 2014.

Before applying the questionnaires, school principals were contacted by telephone to authorize and schedule a visit for data collection. The questionnaires were applied to the students in the classroom, after

reading and signing the Informed Consent Form. Students who were in the classroom and who were not participating in the evaluation activity participated in this stage, with the authorization of the teachers present in the classroom. Visits to schools took place in the morning and afternoon shifts. The social class of the students was defined according to the Economic Classification Criterion of Brazil, developed by the Brazilian Association of Research Companies (Abep), in which class "A1" indicates the highest class and "E" indicates the lowest class. low. The Chi-square test was used for statistical analysis of categorical data. All calculations were performed using the free software R (R: A Language and Environment for Statistical Computing® , 2014).

3 RESULTS AND DISCUSSION

During the research, data were collected from 1806 high school students enrolled in state and federal public schools located in the micro-region of Pires do Rio - GO. Of these, 78 questionnaires were canceled because they were incomplete (three or more questions unanswered), inconsistent or because they were false positives (students indicated the use of the fictitious substance Alucinex).

With regard to the use of licit and illicit drugs, Table 1 presents data on which drugs were used by high school students in the micro-region of Pires do Rio and how often those surveyed use these substances. The table only contains data from those who use or have used some type of psychotropic drug, excluding those who have never used, null and those who did not answer this question. From their analysis, it was found that licit drugs were the most consumed, especially alcohol, and there was a higher percentage of students who consumed alcohol only once in their lives, in relation to the other frequencies of use (38.01% , n=428). Heavy use (20 times or more in the last 30 days) was reported by only 2.39% (n=27) of the students who participated in the survey. The results are similar when compared with the work by D'Orazio et al. (2013), Giacomozzi et al. (2012) and Almeida Filho et al. (2007), who also point to alcohol and tobacco as the drugs with the highest incidence. The fact that tobacco and alcoholic beverages are allowed to be sold makes these drugs more accepted in society, becoming part of the routine of many families, making them more accessible to adolescents, which may also explain the higher incidence of use of these drugs. (Almeida Filho et al., 2007). In addition, it is worth noting that this licit/illicit dichotomy often leads to the concentration of the idea of danger and panic in the face of the latter and suggests concealment of risks and problems from the former, even enabling their encouragement (Galduróz, 1998).

Tranquilizers/tranquilizers (anxiolytics) were the third most consumed drug by students in the region (7.69%, n=133), and their highest frequency is also found only once in a lifetime (58.64%, n= 78). Then come solvents (6.01%, n=104) and marijuana (4.62%, n=80) with the highest use among illicit drugs. These results are similar to those found by Carlini et al. (2010), who demonstrated that the illicit drugs most consumed by high school and elementary school students in the 27 Brazilian capitals are marijuana, solvents and anxiolytics (tranquilizers and tranquilizers). The study carried out by D'Orazio et al. (2013) also

presents marijuana and solvents as the most consumed illicit drugs and the most recent study by Fiocruz (2017) points to cocaine between the two.

Chart 1. Substances used by high school students in the interior of Brazil and their frequency of use. Data presented in percentage and absolute frequency (n).

Substance	At least 1 time in life	At least 1 time (last 12 months)	At least 1 time (last 30 days)	6 or more times (past 30 days)	20 or more times (last 30 days)	Frequency of users of each substance
Alcohol	38,01% (n=428)	25,84% (n=291)	21,40% (n=241)	12,34% (n=139)	2,39% (n=27)	65,16% (n=1126)
Tobacco	53,13% (n=144)	15,87% (n=43)	13,28% (n=36)	7,01% (n=19)	10,70% (n=29)	15,68% (n=271)
Calmants/	58,64% (n=78)	18,79% (n=25)	8,27% (n=11)	8,27% (n=11)	6,01% (n=8)	7,69% (n=133)
tranquilizers	37,5% (n=39)	10,57% (n=11)	18,27% (n=19)	23,07% (n=24)	10,57% (n=11)	6,01% (n=104)
Solvents	56,25% (=45)	16,25% (n=13)	8,75% (n=7)	7,5% (n=6)	11,25% (n=9)	4,62% (n=80)
Marijuana/hashish	59,18% (n=29)	12,24% (n=6)	6,12% (n=3)	4,08% (n=2)	18,36% (n=9)	2,83% (n=49)
Slimming	71,43% (n=15)	4,76% (n=1)	4,76% (n=1)	4,76% (n=1)	14,28% (n=3)	1,21% (n=21)
LSD/	65% (n=13)	10% (n=2)	5% (n=1)	0% (n=0)	20% (n=4)	1,15% (n=20)
mushroom tea	50% (n=9)	16,67% (n=3)	5,56% (n=1)	11,11% (n=2)	16,67% (n=3)	1,04% (n=18)
Ecstasy	57,14% (n=12)	14,28% (n=3)	14,28% (n=3)	0% (n=0)	14,28% (n=3)	1,21% (n=21)
Hallucinogens	80% (n=4)	0% (n=0)	0% (n=0)	0% (n=0)	20% (n=1)	0,28% (n=5)
Cocaine	33,33% (n=1)	33,33% (n=1)	33,33% (n=1)	0% (n=0)	0% (n=0)	0,17% (n=3)

It was also found that, among the 1728 questionnaires that were analyzed, 76.96% (n=1330) of the students had already tried/used some type of psychotropic drug, whether licit or illicit. The most used drug was alcohol, since 73.37% (n=1268) of respondents stated that they had already consumed alcoholic beverages, followed by tobacco with 17.18% (n=297) of users. Figure 1 shows the age students were when they used alcohol and/or tobacco for the first time. It is noted that the 15-year-old age group was more frequent than the other age groups, both in terms of alcohol use (18.77%, n=238) and tobacco use (16.49%, n=49), demonstrating that, in the region studied, students of this age deserve greater attention regarding the initiation of the use of these substances.

Figure 1: Age that high school students from state and federal public schools in the interior of Brazil were when they drank alcoholic beverages and used tobacco for the first time. Data expressed in percentage (%).

SUBTITLE: 12 YEAR OR LESS/ 13 YEARS/ 14 YEARS/ 15 YEARS / 16 YEARS/ 17 YEARS/ 18 YEARS OR MORE/ DON'T REMEMBER

AGE OF THE STUDENTES / PERCENTAGE OF STUDENTS

ALCOHOL/TOBACCO

Regarding the abusive use of alcohol, 33.91% (n=430) of the students who have already used or are using this substance answered that they had already gotten drunk at least once in their lives and 8.59% (n=109) said that , in the last 30 days before the survey, had drunk 5 drinks or more on 2 occasions. Chart 2 shows the frequency of alcohol abuse by students who participated in the survey. This data reinforces the lack of small towns to offer alternatives for culture, leisure and sports, leaving nightclubs and convenience stores as spaces for meeting and having fun with peers. It is also interesting to point out that convenience stores are often located at gas stations, despite the motto "If you drink, don't drive" conveyed in advertising campaigns for alcoholic beverages.

Chart 2. Frequency of heavy alcohol use by students in the last 30 days prior to the survey.

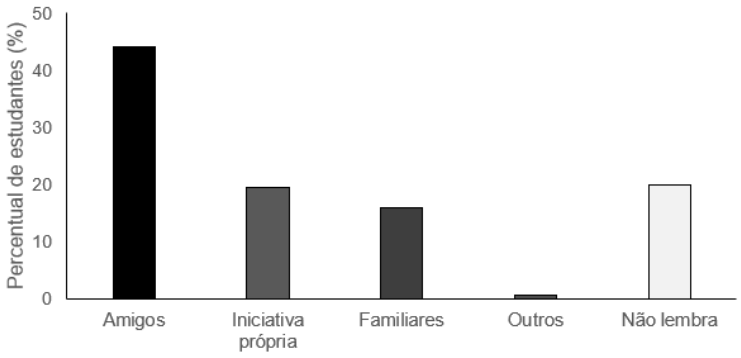
Use of 5 doses or more on the same occasion (last 30 days)	**% (n)**
did not use	69,2% (n=591)
1 time	8,43% (n=72)
2 times	8,66% (n=74)
3 to 5 times	4,45% (n=38)
6 to 9 times	2,34% (n=20)
more than 10 times	1,41% (n=12)
Do not remember	5,5% (n=47)

In Brazil, the sale of alcoholic beverages to children and young people under 18 years of age is prohibited by the Child and Adolescent Statute, Law 8069 of July 13, 1990. However, in the present study it was found that, of the 974 students who stated having bought alcoholic beverages (even if not for him), 85.62% (n=578) were minors. Thus, the results indicate that this law was not being fulfilled in the region studied. Non-compliance with said Law was also pointed out by Prado, Azeredo, Oliveira and Garrote

(2006), carried out with FF/UFG undergraduates, also in the State of Goiás, which indicates that there is little control in the sale of alcoholic beverages to minors. age, demonstrating that this is not a specific problem in the studied region. In other words, it seems that just enacting a law, without greater surveillance and control by the authorities and without a change in culture, does not achieve effectiveness in the intended practice.

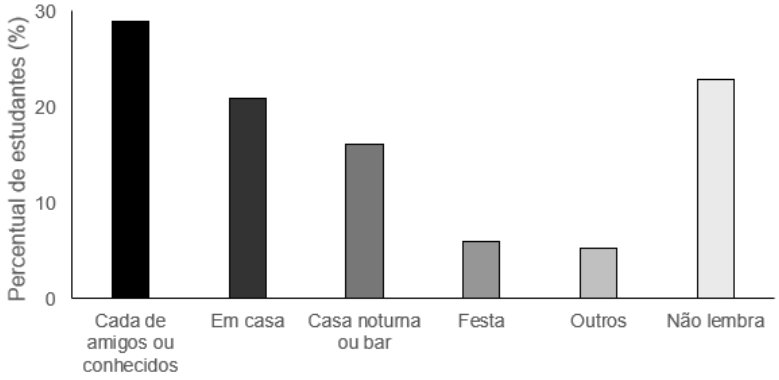
It was also known that 43.61% (n=553) of the students stated that it was their friends who offered them the drink when they drank it for the first time (Figure 2). On the other hand, figure 3 shows the place where the students were when they consumed alcoholic beverages for the first time, showing a higher percentage of those who claimed to have drunk at friends or acquaintances (28.48%, n=349), which is related to the data already mentioned about the first direct contact with the drug. Another data that draws attention is the fact that 20.81% (n=252) claimed to have drunk at home and that in 15.77% (n=200) of cases, the drink was offered by a family member. Sanceverino and Abreu (2003) report that despite the concern that many parents have about their children using drugs, it is often the family itself that influences the child or young person in the first contact with the drug.

Figure 2: People who offered alcoholic beverages to high school students from state and federal public schools in the interior of Brazil when they drank them for the first time.



SUBTITLE: PERCENTAGE OF STUDENTS / FRIENDS/ OWN INITIATIVE/ FAMILY MEMBERS / OTHERS / DON'T REMEMBER

Figure 3: Place where they were when high school students from the interior of Brazil drank alcoholic beverages for the first time.



SUBTITLE PERCENTAGE OF STUDENTS/ WITH FRIENDS OR KNOWN PERSON / HOME/ NIGHTS CLUBS OR BAR/ PARTY/ OTHERS/ DON'T REMEMBER

In addition, Table 3 presents the sociodemographic data of the students. Based on their analysis, it was found that gender did not influence the use of alcohol ($\chi2$= 0.08; gl=1; p=0.76) and illicit drugs ($\chi2$= 3.54; gl=1; p =0.059). These data are in line with the survey on drug use by adolescents (Carlini, et. al., 2010), in which the difference between the sexes is almost imperceptible when compared to the national survey by the Oswaldo Cruz Foundation (Bastos, De Vasconcelos , De Boni, Dos Reis, Coutinho, 2017) — encompasses different ages — in which men use significantly more illicit drugs and alcohol than women. A fact that leads us to reflect, however, to what extent this is not due to the social roles that men and women assume in adulthood. However, male students in the present study consume more tobacco ($\chi2$= 32.08; gl=1; p<0.01), data that corroborates the II National Survey on Alcohol and Drugs (II LENAD) (Laranjeira, 2014) . As in other studies (Carlini, et. al., 2010), the students' age group influenced the use of alcohol ($\chi2$=17.7; lg=4, p<0.01), tobacco ($\chi2$=54, 33; df=4; p<0.01) and illicit drugs ($\chi2$=9.66, df=4, p=0.04). Regarding marital status, there was no significant difference in this factor in relation to the use of alcohol ($\chi2$=0.005; gl=1; p=0.94) and tobacco ($\chi2$=0.265; gl=1; p=0.60) , but married students showed to use more illicit drugs than single ones ($\chi2$= 6.274; gl=1; p=0.01), a fact that would deserve a specific study to understand the possible causes.

The social class to which the students belong was not a factor that influences the frequent use of alcohol ($\chi2$=2.17; df=5; p=0.82), although heavy use is pointed out in other studies as more common in lower classes (Laranjeira, 2014). However, students from the highest social classes (A1-A2) and the lowest (D-E) showed a higher percentage of tobacco use than the other classes, 33.85% and 31.43% respectively, that is, the class students' social status is related to tobacco use ($\chi2$= 33.68; gl= 5; p<0.01), leading us to question ourselves about the place of "class differentiator" that tobacco represented at a given moment of history, as pointed out by Goblot in his book La barrière et le niveau (as cited in Puterman, 1994).

Social class also influenced the use of illicit drugs ($\chi2$=17.62; gl=5; p<0.01), and belonging to the upper class (A1-A2) was considered a risk factor for the use of these drugs , since this class had the highest percentage of users (30.77%), corroborating the study by Neri (2007). Belonging or not to a certain religion did not affect the use of alcohol ($\chi2$=8.03; gl=4; p=0.09) nor the use of tobacco ($\chi2$=9.17; gl=4; p=0.056). However, the category of students who claimed to have no religion had a higher percentage of illicit drug users (28.17%) ($\chi2$=17.17; gl=4; p<0.01). This finding is in line with other studies that cite religion as a protective factor against the use of illicit drugs. (Hawkins, Catalano & Miller, 1992 as cited in Feijó & Oliveira, 20

Chart 3. Sociodemographic data of students related to the use of alcohol, tobacco and illicit drugs (marijuana, solvents, cocaine, hallucinogens, crack, heroin, LSD, esctasy, tranquilizers and slimming drugs - when used without a prescription). Different letters indicate statistical difference (Chi-square) in the comparisons in each category.

Category	Frequency(%)	Alcohol use	Chi square (χ^2)	Tobacco use	Chi square (χ^2)	Use of illicit drugs	Chi square (χ^2)
Sex			χ^2= 0,08; gl=1; p= 0,76		χ^2= 32,08; gl=1; p= 0,00		χ^2= 3,54; gl=1; p= 0,059
Masculine	45,65% e (n=789)	73% a e (n=576)		22,81% a e (n=180)		15,84% a e (n=125)	
Female	54, 22% e (n=937)	73,74% a e (n=691)		(12,37%) b e (n=116)		19,31% a e (n=181)	
Did not answer	0,1% e (n=2)	50% e (n=1)		50% e (n=1)		100% e (n=2)	
Age			χ^2=17,78; gl=4, p= 0,00		χ^2=54,33; gl=4; p= 0,00		χ^2= 9,66, gl=4, p= 0,04
14 years old or younger	2,72% e (n=47)	59,57% b e (n=28)		6,38% c e (n=3)		4,25% b e (n=2)	
15 years	22,97% e (n=397)	66,75% b e (n=295)		11,58% c e (n=46)		15,86% a; (n=63)	
16 years	35,93% e (n=621)	75,20% a e (n=467)		18,03% b e (n=112)		19,48% a e (n=121)	
17 years	22,45% e (n=388)	77,06% a e (n=299)		17,78% b e (n=69)		17,26% a e (n=67)	
18 or older	12,38% e (n=214)	75,7% a e (n=162)		26,16% a e (n=56)		21,02% a e (n=45)	
Did not answer	3,53% e (n=61)	77,05% e (n=47)		18,03% e (n=11)		16,39% e (n=10)	
marital status			χ^2=0,005; gl=2; p= 0,94		χ^2=0,265; gl=2; p= 0,60		χ^2= 6,274; gl=1; p= 0,01
Not married	93,51% e (n=1616)	73,27% a e (n=1184)		16,89% a e (n=273)		17,01% b e (n=275)	
Married	3,41% e (n=59)	74,57% a e (n=44)		20,33% a e (n=12)		30,51% a e (n=18)	
Separate	0,4% e (n=7)	71,43% a e (n=5)		28,57% a e (n=2)		28,57% ab e (n=2)	
Null	2,49% e (n=45)	76,77% e (n=35)		18,6% e (n=10)		27,91% e (n=13)	
Social class			χ^2=2,17; gl= 5; p= 0,82		χ^2= 33,68; gl= 5; p= 0,00		χ^2=17,62; gl= 5; p= 0,00
A1-A2	3,76% e (n=65)	78,46 a e (n=51)		33,85% a e (n=22)		30,77% a e (n=20)	
B1	11,68% e (n=202)	73,76% a e (n=149)		20,79% b e (n=42)		19,8% ab e (n=40)	
B2	33,1% e (n=572)	72,72% a e (n=416)		17,66% b e (n=101)		19,05% b e (n=109)	
C1	24,54% e (n=424)	72,4% a e (n=307)		11,55% c e (n=9)		17,69% b e (n=75)	
C2	8,1% e (n=140)	75% a e (n=105)		10,71% c e (n=15)		7,85% c e (n=11)	
D- E	2,03% e (n=35)	80% a e (n=28)		31,43% ab e (n=11)		17,14% abc e (n=6)	
Not identified	16,78% e (n=290)	73,1% e (n=212)		19,65% e (n=57)		16,21% e (n=47)	
Religion			χ^2=8,03; gl= 4; p= 0,09		χ^2=9,17; gl=4; p= 0,056		χ^2=17,17; gl=4; p= 0,00
catholic	57,46% e (n=993)	74,92% a e (n=744)		15,41% a e (n=153)		15,21% b e (n=151)	
Evangelical	27,89% e (n=482)	69,09% a e (n=333)		18,05% a e (n=87)		18,88% b e (n=91)	
spiritist	3,99% e (n=69)	72,46% a e (n=50)		24,64% a e (n=17)		23,19% ab e (n=16)	
Others	0,98% e (n=17)	58,82% a e (n=10)		11,76% a e (n=2)		23,5% ab e (n=4)	
Hasn't religion	8,22% e (n=142)	76,05% a e (n=108)		23,24% a e (n=33)		28,17% a e (n=40)	
Didn't answer	1,5% e (n=26)	88,46% e (n=23)		19,23% e (n=5)		23,08% e (n=6)	

The survey also investigated the influence of family members who live with students on drug use and found that respondents who live with relatives who consume alcoholic beverages are more likely to also consume them ($\chi2$= 104.369; gl=1; p <0.01). It was also found that students who live with smoking relatives are more likely to smoke ($\chi2$=21.268; gl=1; p<0.01) and those who live with illicit drug users have more contact with this type of drug than students who do not have user relatives ($\chi2$=31.793; gl=1; p<0.01). There seems to be no doubt that family members are the most available identification models for adolescents, surpassing the abundant media models that this population has access to.

Still in relation to family life, the data showed that 4.74% (n=82) of the students surveyed reported having already suffered some type of abuse at home and that this group had a greater tendency to use alcohol ($\chi2$=19.41 ; gl=1; p<0.01), tobacco ($\chi2$= 7.90; gl=1; p<0.01) and illicit drugs ($\chi2$= 19.377; gl=1; p<0.01). The influence of situations that could lead to family stress in the last 12 months prior to the survey and their relationship with alcohol use in this same period were analyzed: 11.05% (n= 191) of the students reported that the person in charge was unemployed in the last 12 months prior to the survey. However, this situation did not influence the use of alcoholic beverages in this same period ($\chi2$= 3.794; gl=1; p=0.051); 10.06% (n= 174) of those surveyed stated that a relative who lived in their house died in the last 12 months, influencing the use of alcohol by this group ($\chi2$= 4.95; gl=1; p=0.02); 6.19% (n=107) of the students said that their parents had separated in the last 12 months before the survey, and this situation of family stress also influenced the use of alcohol in this same period ($\chi2$= 10.107; gl=1 ;p<0.01). It is interesting to note that these situations experienced by adolescents, such as family violence, unemployment, marital separation and death, are aspects that public policies are still unable to efficiently reach.

Chart 4 analyzed whether there was a relationship between seeing advertisements for alcoholic beverages and consumption. Thus, students were asked whether or not they had seen advertisements for alcoholic beverages in the last 30 days, as well as their frequency and, subsequently, these data were related to alcohol consumption in the last 30 days prior to the survey. The data showed that there was no difference in alcohol consumption in the last 30 days before the survey between students who did not see advertisements and those who did, regardless of frequency ($\chi2$= 2.878; gl=3; p=0.41) (Table 4). The fact that this data disagrees with other studies (Faria, Vendrame, Silva, & Pinsky, 2011) may indicate that the reality portrayed in current advertisements offers fewer models of conduct for the population of this region.

Chart 4. Frequency in which students saw advertisements for alcoholic beverages in the last 30 days prior to the survey and use of alcohol in the same period.

	Frequency of viewing advertisements for alcoholic beverages (last 30 days) % (n)	**Did not consume alcoholic beverages (last 30 days) % (n)**	**Consumed alcoholic beverages (last 30 days) % (n)**	**Chi square**
Did not see	29,51% (n=510)	75,10% (n=371)	24,90% (n=127)	χ^2= 2,878; gl=3; p=0,41
From 1 to 5 days	22,1% (n=383)	77,81% (n=290)	22,19% (n=85)	
From 6 to 19 days	13,54% (n=234)	76,93% (n=173)	23,07% (n=54)	
20 days or more	17,41% (n=301)	72,43% (n=212)	27,57% (n=83)	
Do not remember	17,30% (n=299)	80,2% (n=241)	19,38% (n=58)	

When investigating possible protective factors for the use of psychoactive drugs, it was found that students who participate in youth groups linked to the church are less likely to consume alcohol ($\chi2$= 6.485; gl=1; p=0.01) and tobacco ($\chi2$=6.945; gl=1; p<0.01). However, there was no difference between students who participate in youth groups and those who do not in relation to the consumption of illicit drugs ($\chi2$=2.903; gl=1; p=0.08). It should be noted, therefore, that the effective engagement in a religious practice is what made the difference, for the initiation of the use of licit substances (alcohol and tobacco) and that in relation to illicit substances, as the common practice is to seek groups of young people religions to try to "recover", there was no significant difference in this regard.

Another possible protective factor against drug use analyzed would be the regular practice of physical activities. However, the data showed that there was no difference in alcohol consumption ($\chi2$=1.936; gl=1; p=0.16), tobacco ($\chi2$=0.033; gl=1; p=0.85) and illicit drugs ($\chi2$ =1.214; gl=1; p=0.27) between practitioners of physical activities and non-practitioners. Therefore, it would be necessary to consider whether physical activities in themselves work as a protective factor in any situation and/or population, as indicated by Bedendo, Andrade and Noto (2015).

Regarding the negative impacts on school performance, it was investigated whether the use of psychoactive drugs influences students' school failure. 20.89% (n=265) of students who use or have used alcohol had failed school, while only 13.24% (n=60) of students who never drank had already failed a year. Thus, there was a positive relationship between drinking alcohol and repeating a school year ($\chi2$=13.707; gl=1; p<0.01). There was also a relationship between tobacco use and school failure ($\chi2$=46.161; gl=1; p<0.01), as well as the use of illicit drugs also influenced the greater number of students who failed ($\chi2$=16.045; gl =1; p<0.01). It seems to us, then, that studying or going to school, as they appear in the school context, is not always a substitute alternative — because it is sublimatory — to more “direct” ways of satisfying and obtaining pleasure.

4 CONCLUSION

In general, the pattern of drug use by students in the interior of Brazil is in line with other national surveys carried out in large urban centers, except for a few specific points: we did not find differences between male and female adolescents in terms of alcohol use and illicit drugs, but some differences are found when the research covers all age groups (Bastos, et al. 2017), which we understand as a result of the social role of women — the requirement of the health system is more common, or even the social pressure, that they avoid the use of tobacco, alcohol and other drugs during pregnancy, for example.

Alcohol remains the most common drug of abuse in the Brazilian population, regardless of social class and housing region. However, tobacco use, perhaps due to the scope of current restrictions on places of use and prohibition of media advertising, has been maintained predominantly by the highest and lowest social classes. With regard to illicit drugs, contrary to what the media generally makes us think, their use is

more common in the upper classes (62%, according to Neri, 2017) - notoriously, the one with the most resources capable of sustain illegal trade, even if the mainstream media claims otherwise.

In addition, it was noticed that the most used substances are those whose legislation allows usufruct, such as alcohol and tobacco, since their risks are euphemized in our culture and attention is mostly invested in illicit drugs, in addition to the anchorage they find within the social relationships since its use is accepted and sometimes encouraged.

With regard to risk factors, it was concluded that living with family members who use psychotropic substances, in addition to situations of mistreatment and loss (death of a close family member, unemployment, marital separation), are predominant elements in the sample of users surveyed. So much so that most refer that their first drink was with friends or at home, offered by their own family members; even if one considers that in the interior of the country, alcohol use rates are high and that "going out drinking" is almost the only leisure activity available to everyone — including, due to the lack of control over the sale of beverages to minors .

On the other hand, we found that adherence to a religion may or may not work as a protective factor, depending on the degree of personal commitment. And, contrary to common sense, physical activity does not always fulfill its role of keeping practitioners away from numbing situations.

Finally, it is important to highlight the urgent need for planning and implementing a public educational policy, considering the crucial role of the school in relation to this issue. Furthermore, the school, as a space for socialization, needs to offer open and sufficiently broad discussions on the various facets of the drug issue, since it is mainly in adolescence that the first experiments occur.

REFERENCES

Almeida, A. S., Filho Silva, R. C., Ferreira, M. A., Santos T. C. F., & Gomes, M. L. B. (2007). O adolescente e as drogas: consequências para a saúde. Escola Anna Nery Revista de Enfermagem, 11(4), 605-610.

Amato, T. de C. (2010). Resiliência e o uso de drogas: como a resiliência e seus aspectos se relacionam aos padrões no uso de drogas por adolescentes (Tese de Mestrado). Escola Paulista de Medicina, Universidade Federal de São Paulo, São Paulo, SP, Brasil..

Bauman, Z. (2008). Vida para consumo: A transformação das pessoas em mercadorias. Rio de Janeiro: Zahar Ed.

Bastos, F. I. P. M. De Vasconcelos, M. T. L. De Boni, R. D. Dos Reis, N. B. Coutinho, C. F. S. (Org.). (2017). III Levantamento Nacional sobre o uso de drogas pela população brasileira. Rio de Janeiro: FIOCRUZ/ICICT. Recuperado de: https://www.arca.fiocruz.br/handle/icict/34614.

Bedendo, A. Andrade, A. L. M. & Noto, A. R. (2015) Prática esportiva e uso de substâncias entre estudantes do ensino médio: diferentes perspectivas dessa relação. SMAD, Revista Ele-trônica Saúde Mental Álcool Drogas, 11(2).

BRASIL. (2003). Ministério da Saúde - Secretaria Executiva, Coordenação Nacional de DST/Aids, A Política do Ministério da Saúde para atenção integral a usuários de álcool e outras drogas, DF: MS

Carlini, E. L. A., Nappo, S. A., Galduróz, J. C. F., & Noto, A. R. (2001). Drogas psicotrópicas – o que são e como agem. Revista IMESC, (3), 9-35.

Carlini, E., Noto, A. R., Sanchez, Z., Carlini, C., Locatelli, D., Abeid, L., . . . Moura, Y. G. (2010). VI levantamento Nacional sobre o Consumo de Drogas Psicotrópicas entre Estudantes do Ensino Fundamental e Médio das Redes Pública e Privada de Ensino nas 27 Capitais Brasileiras. São Paulo: Centro Brasileiro de Informações sobre Drogas Psicotrópicas - CEBRID.

Carlini-Cotrim, B., & Rosemberg, F. (1991) Os livros didáticos e o ensino para a saúde: o caso das drogas psicotrópicas. Revista de Saúde Pública, 4(25), p. 299-305.

Castro, E.O., Teodoro, D.A., Castro, A.L.S., Sciensa, E.F. (2019) Quem sabe, sabe? Concep-ções e abordagens de professores do ensino médio sobre drogas. Revista Psicologia e Educação, 2(1): 1-9.

COSTA, J.F. (1989) Narcisismo em Tempos Sombrios. São Paulo: Brasiliense Ed.

D'Órazio, W., Carvalho, S., Lima, T., Borges, A., Picoli, M., Marques, A., ... Malafaia, G. (2013). Uso de drogas e desempenho escolar entre jovens e adolescentes do ensino médio de uma escola pública de Pires do Rio - GO. HOLOS, 5, 305-314. doi: https://doi.org/10.15628/holos.2013.1479.

Faria, R., Vendrame, A. Silva, R., & Pinsky I. (2011). Propaganda de álcool e associação ao consumo de cerveja por adolescentes. Revista de Saúde Pública, 4(53). doi: https://doi.org/10.1590/S0034-89102011005000017

Feijó, R. B., & Oliveira, É. A. (2001). Comportamento de risco na adolescência. Jornal de Pediatria. 125-134.

Ferreira, M. A., Alvini, N. A. T., Teixeira, M. L. O., & Veloso, R. C. (2007). Saberes de adolescentes: estilo de vida e cuidados à saúde. Texto & Contexto – Enfermagem, 2(16), 217-324.

Giacomozzi, A. I., Itokazu, M. C., Luzardo, A. R., Figueiredo C. D. S., & Vieira, M. (2012) Levantamento sobre o uso de álcool e outras drogas e vulnerabilidades relacionadas de estudantes de escolas públicas participantes do Programa Saúde do Escolar/Saúde e Prevenção nas escolas do município de Florianópolis. Saúde e Sociedade, 21(3), 612-622.

HUXLEY, A. (2015). As portas da percepção céu e inferno. (1a ed.). São Paulo: Biblioteca Azul

Kehl, M. R. (2003, março, 31). As drogas e a saúde no país. Época, 254. Recuperado em 08 de maio de 2019 de: http://revistaepoca.globo.com/Revista/Epoca/0,,EMI36439-15230,00.html

Laranjeira, R. (2012). Bases do tratamento da dependência de crack. In: M., RIBEIRO, R., LARANJEIRA, (org.). O tratamento do usuário de crack (2a ed.). Porto Alegre: Artmed.

Laranjeira, R. (Org.) (2014). II Levantamento Nacional de Álcool e Drogas (LENAD). São Paulo: Instituto Nacional de Políticas Públicas do Álcool e Outras Drogas (INPAD).

Lash, C. (1986). O mínimo eu: Sobrevivência psíquica em tempos difíceis. São Paulo: Brasiliense.

Meloni, J. N., & Laranjeira, R. (2004). Custo social e de saúde do consumo do álcool. Revista Brasileira de Psiquiatria, 26, 7-10.

Neri, M. C. (Coord). (2007). O estado da juventude: drogas prisões e acidentes. São Paulo: FGV/IBRE, CPS, 3. Recuperado de: https://www.cps.fgv.br/ibrecps/EDJ/index.htm

Pastana, M. & Maia, A. C. B. (2019). Entre copos e corpos: bebidas alcoólicas, sexualidade e encontros. Curitiba: CRV.

Prado, D. S., Azeredo, F. S., Oliveira, T. B., & Garrote, C. F. D. (2006). Uso de álcool, tabaco e drogas ilícitas por estudantes de farmácia da Universidade Federal de Goiás. Infarma, 18(11/12), 3-9.

Puterman, P. (1994). Indústria cultural: a agonia de um conceito. São Paulo: Perspectiva.

Linton, R. (1976) O homem: uma introdução à antropologia. (ed. 10). São Paulo: Martins Fontes.

R: A Language and Environment for Statistical Computing. (2014). Vienna: R Foundation for Statistical Computing. Recuperado de: http://www.R-project.org
(EspaçoReservado1)
Sanceverino, S. L., & Abreu, J. L. C. (2004). Aspectos epidemiológicos do uso de drogas entre estudantes do ensino médio no município de Palhoça. Ciência & Saúde Coletiva, 9(4), 1047-1056.

Sarriera, J. C., Moreira, M. C., Rocha, K. B., Bonato, T. N., Duso, R., & Prikladnicki, S. (2003). Paradigmas em psicologia: compreensões acerca da saúde e dos estudos epidemiológicos. Psicologia & Sociedade, 15(2), 88-100.

Secretaria De Gestão e Planejamento do Estado De Goiás (SEGPLAN). Recuperado em 7 janeiro, 2015, de: http://www.seplan.go.gov.br/sepin/perfilweb**/Def_perfil_bde.asp. Acesso em: 7 jan. 2015.**