PERCEPTION OF FAMILY ABOUT THE INITIATION OF THE USE OF CRACK FOR ADOLESCENT

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ABSTRACT
The study consists of an exploratory - descriptive qualitative study, performed in 2011 with 10 families of adolescent crack users admitted to a treatment facility for drug detoxification. With the objective of to understand the perception of the family in relation to situations that may have contributed to the start of crack use by adolescents. Data were collected through the technique of the focal group subjected to content analysis group. The results shows that family members feel guilty for insertion of your family with crack use and in some cases transfer the blame to other family members. Also realize the influence of friendships and romantic relationships in the insertion of your family to use crack. We considered that it is necessary to engage the family in caring for adolescents, being next to them in the sense of being present, support and guidance, as this is a time of many changes in all aspects of life of these individuals.

Keywords: Family. Crack cocaine. Adolescent.

INTRODUCTION
Drugs of abuse are being used by the company for a long time, being part of the history of mankind(1) and the use can be considered as a cultural phenomenon, which occurs in different contexts from the social, economic, religious to the aesthetic. Soon, the consumption of drugs of abuse can change the structure of people, creating challenges for both the society as for family unity(2).

In Brazil, a drug that lately has been gaining prominence is the crack, which can already be considered a devastating phenomenon by virtue of its wide repercussions not only for users, but also for families and the community at large(3). The crack is configured as a potent stimulant that causes euphoria and causes physical and mental implications, which cause direct and indirect consequences of harms to health range from traffic accidents, violence, conduct disorders, weakness of social and family ties, to loneliness and social exclusion. That damn intense urban rebound, which is also known as “stone”, is derived from cocaine and can cause addiction since the first use(4).

The consumption of drugs is present in all age groups, including teenagers gain greater visibility in contemporary society. Drug use in adolescence has occurred so early and thus the consequences or losses arising out of such use can also be anticipated(5). The relation to the profile of users of crack, it is evidenced that they meet in age between 15 and 25 years, predominantly male, black or brown color, low schooling, unemployed and users of other drugs(6).

In this context, we highlight the adolescence, for being a phase characterized by physical changes in behaviors and attitudes, which could make drugs a means of insertion and statement before social groups(6). Sometimes, the initiation of drug use occurs in adolescence, stimulated by family and colleagues, as well as for advertising and appeals by curiosity(7).
When it comes to teens, the family can be considered a dynamic system that operates in the construction of both individual and collective identity of these individuals, so it is necessary to know its role in social formation. Plays an important role in the formation of the individual and is the first unit of promotion and prevention \(^9\). Thus, the search for support and understanding occurs in the nuclear family, as it is in this kind of establish relations more intense \(^7\). The family is fundamental to the maintenance of health and quality of life of the drug user. However, it also needs to be inserted in the context of the strategies of health professionals' attention, because it suffers from an overload to take care of your family member dependent on drugs\(^9\). Soon, the health system must carry out contacts with these families, seeking to support them, and strengthen them to deal with drug use in the family\(^8\).

The development of this study is justified because of the importance in giving voice to the families, because it is believed to understand the family is indispensable in attention to drug users, favoring thus the relationship between the family members, professionals/service and users. In addition, it will provide the professionals reflect on their health practices to elaborate possible restructuring in his work to be made necessary for the rescue and assistance of link between the families and teenagers.

Thus, on the principle that the nursing needs involve the family in the care, it is necessary the development of thematic studies relating to the crack in adolescents in the perception of the family.

With that, this study survey question: what is the perception of the familiar in respect of situations which may have contributed to the use of crack by a teenager? As goal, understand the perception of the familiar in respect of situations which may have contributed to the beginning of the use of crack cocaine by the teenager.

**METHODOLOGY**

This is an exploratory research-descriptive qualitative approach that has been developed in a unit of drug detoxification treatment of a midsize hospital, located in the Central region of the State of Rio Grande do Sul, for the treatment of crack users (adolescents from 14 to 18 years), who remain hospitalized for periods ranging from 9 to 12 weeks.

The criterion for inclusion of subjects was be familiar to adolescents crack users in the process of detoxification and have age greater than or equal to 18 years. Subsequently the formal invitation, ten relatives if provided to participate in the research.

Data collection was performed between the months of April to May 2011, through the focal group technique, which makes it possible to study the different opinions and perceptions about a particular topic through a group interaction\(^10\). Four meetings were held approximately an hour and a half each, which took place in the Conference Room of unit with 10 family members. The meetings were recorded with the audio device and subsequently transcribed. During the discussions were reported different experiences, reviews and trials, in a context in which the crack was always placed on the agenda, associated with the fact that the individual possess a member of your family involved in chemical dependency.

The lead researcher acted as Coordinator (moderator) and a nurse acted as an observer. It is noteworthy that this professional did not participate as a subject of research. The researcher organize and coordinate the meetings. The notes made in writing by the observer during the realization of the groups also were analyzed. The data and information were analyzed by categorization, based on the method of content analysis\(^11\). This analysis is constituted of three moments: the first consists of a frequency with identification of the main perceptions that relatives attribute in relation to situations which may have contributed to the beginning of the use of crack cocaine by the teenager. The second analyzes the content that identifies the categories that emerged from the data collected, and the third refers to the interpretation of the categories, looking guilty and influence of relationships.

Ethical considerations have been met and the participants signed an informed consent (TFCC) as resolution nº 196/96\(^12\) the National Health Council, in force during the period of production of the data. Complied with the resolution No.
RESULTS AND DISCUSSION

10 family members were interviewed, which are: fathers, mothers and grandparents. The age ranged between 30 and 60 years; 8 subject female and 2 male. The occupation of the family home and service sellers prevailed autonomous.

Based on the analysis of the results, two categories emerged: influences of family behavior and influence of relationships.

Influences of family behavior

In this category have been identified two themes: feeling guilty and transferring it to another family member.

It is evident that the family feels guilty for initiation to crack consumption by teenager due to several factors, such as the over-protective, lack family and lack of affection.

I think I was guilty because I was holding her too much, I wouldn't let her go out, because I always watched on TV violence, but she always had everything in the House, but wanted to go out with friends and I never left, then I had to start working and she started to get quite some time alone (F6).

There was a problem with me and we started to pull away and I think she mistook the things he thought he was leaving her, then wanted me to draw attention so much that she say that to this day for me. [...] I think that's also I allowed certain things, a lot of permissiveness, I think is the right term, because I had to take care of another problem (F2).

She has a brother who wore too and I went after him so she thought this was the correct way to get my attention (F5).

This fault is identified to "hold" your too familiar, i.e. the excess protection, perhaps by fear that something unexpected could happen, in this case, the violence on the streets. On the other hand is pointed to the absence of the familiar in the midst of everyday life. This absence is justified due to the remoteness of the familiar to develop its industrial activities. Thus, both the over-protective as the absence are identified by familiar, feeling responsible for the fact that the family member if you enter in the "world" of crack.

The absence, which may also be characterized by the lack of affection, is perceived by the family as a propulsion to the use of crack. As well as the negligence, the neglect and the deprivation of care, expressed by the absence, refusal or lack of attention required are situations that can stimulate the use of drugs. The lack of social support and the stability of the family unit have a direct relation with the contact and with the consumption of crack\(^\text{(14)}\).

In addition, another situation reported by family members is the issue of boundaries that is considered, in the present day, as a recurring problem in educational practices, representing one of the most disturbing issues discussed by professionals in the field of education and development\(^\text{(15)}\). However, it is relevant to point out that the lack of limits can be understood as the lack of commitment and care on the part of family members responsible. The lack of limits, linked to the lifestyles of their children, is another factor pointed to as the cause drug addiction.

The family settles into a group, in which individuals begin their first contact with social norms and rules. Therefore, it is up to the family to provide necessary support for the healthy development of its members, guide the socially accepted behavior patterns, the moral, social, ethical values and spiritual\(^\text{(16)}\). However, when there is the incoherence of family values, the teenager becomes susceptible to use drugs, including crack cocaine.

The family structure, the interpersonal relationship and dialogue are important tools for the healthy development of adolescents. In turn, the excess of freedom, the lack of dialogue, the dismantling and the bad examples in the family nucleus are considered as the main responsible for the increasingly early initiation of young people on drugs\(^\text{(7)}\). It is evidenced thus that the family is central to the development of adolescents regarding the prevention of crack. Therefore, it is important your presence and support during this phase of life.

But, while some relatives feel guilty, other family members transfer the blame to another
family member, as illustrating the Testimonials below:

Who was the culprit, was her mother; she had to be here today to tell. I’ve always been a model father to her. I can say that I have never slapped her [...]. She (user) spoke to me: I didn’t go to the drug because of the father, my father always emitted a responsibility for me, you, mother, that was irresponsible, said that all my girlfriends were sluts, you thought why my friends were so was I, it was not because of his father, was the lady guilty? (F7).

It is evidenced in this statement that the family sometimes tries to blame another familiar by use of crack, in this case the father blames her mother. That, in some cases, it may mean certain “relief” for that familiar, because he knows he’s not to blame for the use of this drug, making it easier the interaction with the user without feeling guilty, i.e. transfer the blame to another family member.

The families seek to understand what is happening and, unknowingly, seek to "find" the person responsible for placing the user in the consumption of crack, becoming common relatives blamed each other, thereby triggering the destructuring of family relationships, causing family conflict. This situation is that the drug is a potent disintegrating families and deteriorates the relationship for that user with all people who live.(8)

During the discussions, the relatives of the crack users pointed to some factors that interfered for the insertion of the son into the world of drugs, based on the events that each experienced, and they could be influence for crack addiction. The omission of the parents, transferring it from one to the other, associating the power of liberty or imprisonment in excess of children, are flagged as facilitators to the use of the drug.

It should be noted so that the family can have a protective role or induction of drug use. We can affirm that adverse events in the family environment can act as inducer factor to the use of drugs such as: broken families, various marital arrangements, difficult socioeconomic condition, who experience situations of violence and even those responsible for unemployment.(17) However, dialogue, understanding, respect and constant surveillance are important precautions to prevent your teen start the use of drugs. Still, the family relationship based on the principles of conversation and understanding is essential for the establishment of a relationship of closeness with their children.(7)

**Influence of relationships**

In this category you can identify how relationships influence adolescents’ insertion in the use of crack. Have been identified in this category two themes: the influence of friendships and the influence of romantic relationships.

With regard to the topic influence of friendships were highlighted factors such as bad company, in this case represented by friends/acquaintances with which these teenagers keep a close contact. Is the period of adolescence that people seek to unveil the new, try things and identify with the peer groups.(5)

Thus, drug use may be related with the reciprocity of respect and acceptance, acceptance and social pressure, as well as the desire to enter into a group. Also, may be related to influences from friends.(18) This is consistent with the statements from relatives, to report the influence of use of crack cocaine by his friends.

I think it was the friendships, she was quite… (F4).

Her friends were mad… (F7).

In relation to the influences of friendships, family members reported that the teenager uses crack due to the influence of socializing with people who “believe” also be users of the same drug. This is consistent with a study that showed that parents of teenagers from drugs recognize adolescence as a vulnerable period for involvement with drugs and harms to health. Still, mentioning the groups of friends, the need to insert and belong to groups and curiosity as risk factors for drug use.(7,18)

In the same context, another study, conducted through probing with charts, which aimed to meet the initial reason of drug use, showed that the use by adolescents is due to curiosity (6.2 percent), the influence of friends (20.6%) and the other reasons (6.2%) among them, family dysfunction and the easy access to drugs.(19) Despite the disclosure of the harm that drugs cause, they increasingly continue to
stimulate the interest of people, mainly, because they are used to promote fun and socialization, and can bring devastating losses to the lives of the users\(^{(15)}\).

It is evidenced thus that, in the context of the crack, the family realizes the use of psychoactive substance associated with the influence of friends and users of the drug, which can occur because of the lack of limits and/or excess of freedom by their family members responsible.

As for the influence of romantic relationships, it was highlighted the bad companies, in this case, represented by boyfriends (the), spouses or companions with which these teenagers maintains a bond.

This can be seen below:

Was her husband; he fooled everybody. We thought it was a good person, but took her to this path of no return, what I can do is take care of her children (grandchildren) (F1).

She started using drugs by her boyfriend, and freedom too much; I’m talking about, but she wouldn't listen; beat up and out, it's always been that way. A little while ago that I discovered, she knew no bounds, kept at home, just as she was, was no longer (F9).

My daughter felt sorrow when her husband began to betray, mock and humiliate her. The first time she used was with him, asked him if he could use and he left (F2).

Adolescence is characterized for being a stage of life filled with quests, of discovery, in which teenagers value to their groups, their relationships, and can sometimes come into conflict with themselves and with the family when participating in new spaces and develop new behaviors. These spaces can make them more vulnerable to external situations, such as drug abuse, delinquency and sexual risk behaviors\(^{(1)}\).

You can tell by statements from family members that the use of crack in these situations is due to the influence of romantic relationships. This is consistent with a study\(^{(18)}\) conducted with users of crack, which claim that the initiation of drug use and crack is related to influences from friends and family, in this case specifically, the spouses, boyfriends/partners.

For being a teenager a vulnerable period of life can predispose to drug use. So, act now by the families can minimize the negative consequences of drug use, in addition to serve as a support in the prevention of use\(^{(6)}\).

Another issue that we can observe is the early age at which these teens establish relationships, who get married, assuming many responsibilities during this period of life. This suggests that perhaps these individuals are not yet emotionally prepared to deal with the difficulties imposed by everyday life, what makes us reflect if the crack sometimes has been used as a way to ease the tensions of everyday life.

Thus, evidence that, in the perception of families, teens may suffer influences for using crack by romantic relationships, since adolescence is a stage of life in which are influenced by the companions. In addition, this search for insertion into certain groups, teenagers seeking to establish relationships with people that have similarities, namely, like-minded people.

**FINAL CONSIDERATIONS**

This study allowed understand the family's perception of the individual dependent on crack in relation to actions which may have contributed to the insertion of the user in the chemical dependency. Was possible to evidence that in a few moments the families they feel guilty for the insertion of the teenager in the world of drugs, and sometimes transfer the blame to another family member. Yet it was noted that the influence of relationships, as the influence of friendships and the influence of romantic relationships interfere directly in the insertion of the individual depending on the crack.

Based on the results, showing the importance of the family to be closer, to get involved in caring for adolescents, because this is a period of many changes in all aspects of life of the subject, of the biological society. The family is important in the sense of being present, to support, to guide. Thus, the bond is important, both for the observation of the problem, and to aid in treatment. This shows the importance of nurses and health professionals in General in order to enhance the understanding of the families about the consumption of crack and the crack user, as well as their family dynamics.

Therefore, it is up to the nurses and healthcare professionals in General meet the
problems and situations that lead adolescents to become addicted to crack, with the purpose of developing actions to promote health education. There is the need of integration of different spaces, communities, involving since health services to education services, to carry out health promotion and prevention of crack use, involving teens and families in these spaces, in order to minimize as much as possible the risks arising from the use of crack.

Points as limitation of the study the realization of societies in time for the visit of the familiar to adolescents admitted to the unit. Although it has been previously negotiated with the team of unity the permanence of family members after hours established normally, we realize that this may have been a factor that caused greater anxiety to participants, limited to empresses in more depth about their experiences.

We suggest the development of other studies that contribute to a better understanding of the dynamics of families of crack users, highlighting their experiences and experience, their needs, overloads and coping strategies, so that we can thus draw up more appropriate and realistic public policy, involving the care of these families, also inserting them in care.

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Submitted: 02/13/14
Accepted: 09/23/14