

PREVENTIVE DIALOGUE WITH ADOLESCENTS ON THEIR KNOWLEDGE AND PRACTICES OF ALCOHOL CONSUMPTION¹

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ABSTRACT

This is a qualitative research, convergent, whose object is focused on the understandings and practices of adolescents on the consumption of alcoholic beverages. The objectives are: to find information about the understandings of adolescents about alcohol consumption and to discuss the influence of this knowledge in their practices regarding consumption. The participants were 12 adolescents from Oscar Tenorio Technical School, from September to December 2010. For the production of data, a socioeconomic questionnaire was applied, as well as group discussion and participant observation. This study was approved by the Ethics Committee of Anna Nery School of Nursing / St. Francis of Assis College Hospital, under protocol 082/2010. From the triangulation of data collection techniques, the information went through thematic analysis and then traversed according to the found categories of analysis: Discussing the socializing function of alcohol consumption by adolescents, Dialoguing about (i) morality of alcohol consumption, Reflecting on the family context and its relationship with alcohol consumption by adolescents, Consumption alcohol: talking about the selfcontrol. We conclude that the results supported the preventive care to be developed with adolescents through a participatory methodology that brings effectiveness for this care.

Keywords: Adolescent. Alcohol drinking. Health education. Nursing.

INTRODUCTION

Adolescence is a time in life characterized by intense transformations in growth and development that include psychological and social changes. In this context of building identity, values, habits and attitudes are constructed in the adolescent, which starts to give more importance to group behavior to which this teenager identifies with⁽¹⁾.

The common characteristics of the adolescents, such as: the necessity to be accepted by their group of friends, the sensation of omnipotence and the desire to experiment new behaviors, make adolescence a stage of high risk to get a harmful involved with alcohol and other drugs. On the other hand, the use of those psychoactive substances can compromise the process of biopsychosocial development the individual experiences during this stage of life⁽²⁾.

Alcohol is a licit substance in Brazil, being the most consumed drug in the world⁽¹⁾. It is a psychoactive substance depressant of the central

nervous system, which dependency reaches 10-12% of the world population, being more frequent in the age range between 18 to 35 years old. We underline that the average age of the first contact is 12.5 years old⁽²⁾.

In Brazil, the consumption of alcohol is culturally accepted and, among the adolescents, it has become even more frequent, and with a high prevalence rate. Due to the fact its abusive use is always associated with injuries, this habit is a threat to the quality of life of these adolescents, being considered a serious public health issue^(3,4).

Yet, the consumption of alcohol is socially stimulated without enough information about a responsible consumption of the substance, and the consequences of the use that reflect upon this part of the population⁽⁵⁾. Therefore, besides some adolescents already present some characteristics of alcohol dependency, they understand that this standard is a habit, linked to socialization, and they do not recognize the risks involved in this practice⁽⁶⁾.

To know the understandings and practices of

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the adolescents regarding alcohol consumption is fundamental to direct the preventive actions regarding the health issues generated by the consumption of alcohol by youngsters, in order to amplify the observation upon the process of health-disease-care, collaborating to a holistic process⁽⁷⁾.

It is important to mention that “a holistic care in the abusive use of alcohol and other drugs by young people” is included as one of the fundamental axis of the Brazilian National Directives to Holistic Health Care to Adolescents and Youngsters in Promotion, Protection and Recuperation of Health, in which the promotional actions of health are based on the motivation of the participation of the young^(1:94).

The theoretical foundations are based on the pedagogy of Freire and the concepts come from the Brazilian Ministry of Health, which support the notion that the practices in education in health must provide instruments to the adolescents so they can be autonomous in their decisions and recognize their capacity to take a position in different scenarios, living the exercise of their citizenry.

It is seen a fragility regarding the scientific productions focused in preventive actions related to the consumption of alcoholic beverages by adolescents. Such finding is based on the results found through the access of virtual libraries and databases, such as Medline, Lilacs, Adolec, Scielo Brazil, Thesis Databank of the Brazilian Coordination of Improvement of Higher Education Personnel (Capes, in Portuguese) and at Rio de Janeiro Federal University (UFRJ, in Portuguese) and lead to conclude that, among the vast bibliographical production about adolescents' health, there is a lack of participative proposals that intervene in the reality of the adolescents preventively.

When dealing with how the understandings of the adolescents about alcoholic beverages influence their practices regarding this same very consumption, this research is characterized as an important scientific support to assisting practices related to the harmful consumption of alcohol, once since the Program Health of the Adolescent (PROSAD, in Portuguese)⁽⁸⁾, the promotion of the health of the adolescents is an

important goal to be reached through early detection of risk groups and health issues.

Hence, this study is centered in the understandings and the practices of adolescents about the consumption of alcoholic beverages. The objectives of this research are: to know the understandings of the adolescents about the consumption of alcoholic beverages, and to discuss the influences of these understandings in their practices related to this consumption.

MATERIALS AND METHODS

This study is approached by qualitative techniques, using the method of convergent care research (CCR)⁽⁹⁾, in which the strategies of intervention and the techniques used to elaborate the data are incorporated one to the other during the development of the research itself by using educational care.

The research was performed at the Oscar Tenório State Technical School (ETEOT, in Portuguese), during the year of 2010. A total of 12 adolescents participated in this research, with ages varying from 15 to 18 years old, being two male adolescents and ten female ones. There were included in this research all students with age between 10 to 19 years old, from both sexes, that were available at the time of the interview and that accepted to participate.

There were no rigid criteria for the size of the sample due to the fact that the method of this research did not motivate the principle of generalization, but on the other side, the depth and diversity of the information in a way that the subjects, more than just informers, are considered an integrated part of this investigation.

The following tools were adopted in this research: the application of a socio-demographic questionnaire and the discussion in the group of convergence, following a semi structured guideline with open questions about the consumption of alcohol, besides participative observation, which permitted to capture the participation of the subjects during two meetings to produce the data – one to apply the questionnaire, and another to have the discussion group.

From the triangulation of the techniques used in the collection of data, this same data went

through thematic analysis. The proceeding of analysis and interpretation of the findings followed four processes: apprehension, synthesis, theorization and transfer⁽¹⁰⁾. The most important topics were synthesized and grouped in categories that compose the results that follow.

In accordance to the Resolution 196/96, of the Brazilian National Council of Health, the research was approved by the Committee of Ethics in Research of Anna Nery Nursing School (EEAN, in Portuguese) and the St. Francis of Assisi School Hospital (HESFA, in Portuguese), at the Rio de Janeiro Federal University (UFRJ, in Portuguese), under protocol number 082/2010. The anonymity of the adolescents was kept, and the identification of the subjects was done through an alpha-numeric code, to guarantee this anonymity. The registration of the data is protected by the researcher and will stay with her for five years.

RESULTS AND DISCUSSION

From the application of the socio-demographic questionnaire, it was identified that: only one adolescent works; all subjects are single, childless; they usually practice leisure activities, being enjoying the nightlife the most common activity; all live among people in their homes who are consumers of alcoholic beverages, and among the twelve subjects, eight consume alcoholic beverages, and two of those individuals present a scenario of risky consumption. From the discussions in the group, results emerged in a way that they include some information used to describe the understandings and the practices of the adolescents about the consumption of alcoholic beverages, as well as the influences of one to the other.

In the category "Problematising the Socializing Function of the Consumption of Alcoholic Beverages by the Adolescents", it is seen that the construction of a group identity is part of the process of the development of the individuality of the adolescent. Therefore, it is possible to identify a tendency in behavior, which is a reflex from the preoccupation with finding friends and group interaction. The consumption of alcoholic beverages is used by the adolescents as a way to self-identify with the

culture of the whole society, being an instrument of group insertion, or in other words, of socialization, as it was mentioned in the following testimonies:

The consumption starts as to be fashionable, to be with the guys, going out at night, bars (C2). With the pressure of the group, you want to stand out (G1). There are people that end up doing what others tell them to do, to look nice in the group and they end up becoming dependent (C2). I don't drink so often, it's quite rare. It is more to show up and be part of that group, to go out with friends (G1).

As an instrument of social interaction, filled with immaturity, alcohol becomes a representation of the necessary element that, from the point-of-view of the adolescent, is the "passport" to have a social life. Many times, the adolescent drinks not with the intention to appreciate the alcoholic beverage, reinforcing the social question of the substance.

I don't drink because I like it, but only when I am with my friends... (C2). When I go out, I drink Vodka Ice, or Vodka with Ades® (B2).

The new products, such as malternatives (malt beverages that imitate vodka-based drinks), seem to be directed to this age group, because such beverages, despite containing alcohol, have similar taste to sodas and other non-alcoholic beverages, which means that the pleasure to consume them is not in appreciating the flavor of an alcoholic beverage, but consume alcohol as a component of social life. In this relationship between the consumption of alcoholic beverages and social interaction, alcohol is understood as a "passport to socialization"^(6: 160), in such fashion that in another study, the alcoholic beverages was represented using the metaphor "social lubricant"^(6: 161).

In the discussions that follow about the social dimension of the consumption of alcoholic beverages, it is possible to see that, besides society acknowledges the negative aspects of the consumption of alcohol, the social appeal of the alcoholic beverage is almost authoritative:

The alcoholic beverage) doesn't bring you good things. Everybody when going out, drinks and everybody knows it doesn't give you good things (D1). – Why does one person have fun without drinking and the other, to get loose as much as the

first one, needs to drink to feel more secure? (Researcher) – I don't know why, but when I drink I feel more secure (F1) – How is that thing of wanting and needing (alcohol) to have fun? (Researcher) – I don't need it, I don't know (F1). – To make things clearer: it's not that; you don't need it. You will have fun without it, but if you have it, it will be much better (B1).

The social role of the alcoholic beverage, despite being evident in the testimonies of some subjects, for others this relationship seem not to be applicable, as in the testimonies of E1 and E2, as follows:

You've got to drink for yourself (E2). [During the discussions about the social appeal of the alcoholic beverage and the necessity of group insertion]. I don't see the reason to get drunk (...), there's no reason to drink (E1). [When asked about the consumption of alcohol among youngsters and if there were negative points in this consumption]. I don't like being beside someone who drinks, because everything becomes more boring (D2).

At the category "Discussing the (I)morality of the Consumption of Alcoholic Beverages", when problematizing with the adolescents the question regarding alcoholic beverage as a drug, which despite being licit, it is forbidden for individuals under eighteen years old, the moral dimension of the issue was brought up. This occurred because they criticized some elements and also the determination of what is right/adequate and what is wrong/inadequate regarding the consumption of alcoholic beverage in this age group, demonstrating a moral issue, as it follows:

It (the alcoholic beverage) changes you, you do it and you know it's wrong, but you don't care about what you're doing at the moment (F1). There are some youngsters that think that, when they drink, getting drunk is cool, fun. I've heard people saying: I get drunk! Like, they think it's funny. I think it's terrible because the person makes the fool out of himself: he does a lot of stupidity and stills thinks it was for fun, laughs out and surely will do it all again (B1). There is religion, the school, some institutions that work so we can have some moral education to say what is right or wrong, what is going to be good or bad for your life (G1). [answering F1, who considers that religion interferes in the consumption of alcoholic beverages, by mentioning that his

parents are protestants and will prohibit the consumption of alcohol by their children].

The mentality and behavior of the adolescents call attention, which are worried in evaluate what is right or wrong, but their practices do not match their understandings. Therefore, despite they know the effects of alcohol not only in the physical world. But also in the sphere of the morals, adolescents attribute to religion and to school the role to be institutions that promote this moral education.

Another element that contributes to the use of alcohol among adolescents is the commercial availability and the price. Alcoholic beverages are found easily, anywhere and with accessible price to youngsters, besides there are laws that prohibit the selling of these beverages to people under the age of 18 years old. The testimonies that follow illustrate this situation from the point-of-view of the adolescent:

This last weekend, my cousin and me went to the bar to by some beer. Then we took a seat to watch part of the game that was on TV, and then the guy in the bar said: "– You guys can't stay here", because we are underage and we couldn't be there. "– And if we pay for the beer and leave? – Well, then it's OK", he said (C1).

If you drink in a party is considered normal, and the bars are for adults, so if an adolescent arrives there to drink, I think it looks awful. Especially because those drinks are not for adolescents, they are for those above eighteen years old (B1). And also, there are some young guys that see that this is bad for you, but they like it, they think it's normal, and there are places that they sell drinks even when they know you are an adolescent (B1). I don't drink at home, I think it not funny to drink at home; if you want to drink it has to be in a party (B2).

In the testimonies of B1 and B2, it is possible to see a moral dimension, when they talk about in which environment is normal for an adolescent to consume alcohol and about the places this consumption is criticized. It is important to mention that these thoughts are part of social habits and are acquired by the adolescents through what they experience everyday. The adolescents know the illegality of alcohol consumption by them, but that does not stop this consumption. The easiness of this consumption and the lack of vigilance by the State are stimulating situations for the use of

alcohol by adolescents, which are a reflex of the society as a whole, where laws are not followed.

Because it is a stage of biopsychosocial transformations, the adolescence is also characterized by a period of moral development in which “the individual emits judgments based on the rules of the group and the expectations over the individual himself”^(11:40). Thus, adolescents try to follow the values emitted by the society and end up revolting when they see that society as a whole do not follow the values it determines, in a way they can continue attacking and defending these conventions, or simply disobeying them. This is seen in the testimonies of D2 and B2, who demonstrate that the consumption of alcoholic beverages have an idea of freedom in the sense they are away from the repression of their parents/legal guardians, and then having a behavior that is forbidden to them:

The fun is having friends around, not parents (D2). [During the discussions about the positive aspects of consuming alcoholic beverages] (I drink) when I’m not with my parents around! It’s much more fun, because my mom and my dad are not around (B2). [When asked if she only consumes alcoholic beverages when going out] (B2).

The moral development of the adolescent is harmed once society understands that alcohol is “an ally to licit pleasure”, and has “a simplistic view of the adolescent as a consumer”^(11:39). What is seen is an intense exposition of this adolescent to the image of alcoholic beverage linked to fun.

The reflexes of this exposition are seen in the testimonies that follow. It is clear, in these testimonies, the perfect reproduction of the ideas shown in the advertisement campaigns of alcoholic beverages seen throughout written and audiovisual media as a whole, in which the alcoholic beverage is attractive to these youngsters. This attraction is based on the fact that the campaigns establish a straight relationship between alcohol and situations of conquests, leisure and satisfaction, which is considered a strong argument of consumption⁽¹²⁾.

In the parties (short pause) Everything is cooler! (D2). It’s not fun to go out and not drink; it makes everything funnier (B2). Drinking makes

everything funnier; it changes everything (E2). Ah! When you drink, you get loosen and you have more fun (A2). When you don’t drink, you stay quiet, but when you drink, you... (B2).

It is urgent to call attention to the fact that the use of alcohol can, in the beginning, cause disinhibition and euphoric attitudes. However, despite the first moment makes adolescents imagine alcohol has a stimulating effect, in truth alcohol is a depressor of the central nervous system, which affects judgment, the level of consciousness, self-control and motor coordination.

In the category “Reflecting upon Family Context and its Relationship with the Consumption of Alcoholic Beverages by Adolescents”, the testimonies related to this topic has elements that on one side predispose adolescents to the consumption of alcoholic beverages, on the other side permit the reflection of the negative aspects related to this consumption. This occurs based on the influence that the behavior found within family context can express in these youngsters. As follows, some testimonies of the negative situations related to alcohol that are experienced by the adolescents within their family environments:

My grandfather had a good financial situation and lost everything because of drinking; my grandmother divorced him and since then I saw it wasn’t a good thing (E1). Even my grandmother, my mom tells me that when my grandmother didn’t have money, she used to drink perfumes and lotions. Even a doctor had to tell her to stop or she would die anytime soon, and then she stopped (G1).

Despite the fact the adolescents see the negative aspects of the consumption of alcoholic beverages, they relate it to the adult life, or in other words, in a distant reality, which makes this issue far from them, as they associate the abusive use of alcohol as seen only in later effects provoked by continuous use. In the testimonies of E2 and D2, they show situations that not only match the consequences of the effects generated by long-term abusive use of alcohol, but these same consequences can be seen in short-term use, in which not only adults, but also the adolescents are exposed to:

My stepfather drinks and starts to bother us all (E2). Oh! When my mom used to drink, she

would become promiscuous, disgusting (D2). See, I have an uncle that goes to Maricá, and he only travels after he drinks. He drinks so much and he only travels late at night. And he only goes there after he drinks something. Whoever is in the car, my God... (D2) [after orientation of the researcher about the effects of the alcoholic beverages and their relationship with the performance of daily tasks, such as driving, for example].

It is worth to mention that, then the subjects are closer to the damage provoked by the abusive use of alcohol in their lives, they transpose the responsibility for these situations to the adult life:

So, it is typical from young people that drink to have no interest in the issue. There are some that don't even go to school and the parents do not even care if they miss it (They think:) "Well, my son is doing it, am I suppose to fight against it..." Nem ligam (B1). - Ah! Mas se você souber que seu filho está bebendo, você vai fazer o quê? (F1) - Mas também se você é mãe, e não fizer nada! (G1) - Mas às vezes os pais nem estão vivendo aquilo (F1).

The subjects are worried with the consequences of the consumption of alcohol, but do not converge such preoccupations to their realities, as they are not part of their universe⁽⁶⁾. However, it is important to highlight that the effects of the chronically abusive use of alcohol, including dependency, can be part of the reality of the adolescents, as early the initiate in this consumption.

Hence, despite all these reflections are important to assist the decision making of the adolescents about their own conduct regarding alcohol, they are not enough to move them away from a risky behavior. Especially if the socio-familiar context influence to initiate the adolescents in the consumption of alcoholic beverages, such as follows:

In the past, my father didn't let me drink, then I started to go out with him and drink, and it's been one year that I drink. It became something normal in my life, because there are lots of people that don't drink because they can't. Many people don't drink because their mothers don't let them do it or their fathers don't like it. If you get home drunk, if you don't arrive home OK, your father is going to say it, your mother (too). Then my father says like this: it's better to do with me than without me

around, and ending up doing something stupid without me around (F1). For my parents, they only drink wine. It's almost every night, one cup of wine is nothing; it's always like this: they arrive from work, they talk and drink a cup of wine, which is nothing for them (C1). My friends and my sister drink a lot (D2).

It is inside home that the first contact of the adolescents with the alcohol occurs, with the consent of the family, once the use of this substance is tolerated and well-accepted, especially associated to social events or as a relaxing substance. However, many times this social and positive use is repeated daily and is not limited to one or two doses⁽⁹⁾. It is through the cultural environment, in the contact with other people, and specially in regards to the way parents and friends consume that the adolescents acquires his behavior related to the consumption of alcoholic beverages⁽¹³⁾. This is then considered a social behavior, which takes the discussion back to the first discussed category, which deals with the social function of alcohol.

In the category "Consumption of Alcoholic Beverages: Dialoguing about Self-control", considering the understandings and practices of the adolescents, the risk factors that emerged to a harmful consumption of alcoholic beverages are: the fact the beverage is seen as an instrument of socialization, the influence of the socio-family context, as well as the fact that adolescents exempt themselves of the susceptibility of damages due to the abusive use of alcohol.

Throughout the group discussions, it was mentioned the relationship between control and exaggeration, between exaggeration and dependency, and also it was discussed the matter of drinking responsibly. Thus, for the adolescents, there is a direct link between exaggeration and loss of control, as seen in the following testimonies:

(Exaggeration is) to drink every weekend, getting drunk (B1). (Exaggeration is) to lose control (G1). Drinking exaggeratedly is to drink too much and do things you wouldn't do if you weren't drunk (D1). Like: drinking every weekend, losing control every weekend, I think it is exaggeration (C1). I think it's exaggeration when you can't stop. If I'm in a party and I don't want to drink, I won't drink. Now, if you start to go out and you can't hold yourself to not drink, this is an exaggeration (F1).

Despite adolescents know the effects of alcohol in the organism, and are able to identify a controlled use, the abuse and the dependency, they cannot establish a clear connection between these elements, as for them, what is understood as exaggeration and abuse is not well define for them.

It is seen, from the testimonies of A2, the moment in which consumption becomes abusive/exaggerated, related to the emergence of psychological signals originated from the acute effects of this consumption, which is characterized, especially, by changes in behavior and an intense desire to consume the substance⁽¹⁴⁾. Yet, according to this understanding, it is only possible to identify exaggeration when they show some symptoms:

(Being drunk) is when you are over the limits, when it is unbearable to be around you (A2). If you lose control while drinking, you start to making a fool out of yourself, dancing with everybody (A2).

Besides the loss of control becoming a symptom of exaggeration, it is also considered one of the main signs of alcoholic dependency, as well as the intense desire to consume alcohol⁽¹²⁾. These aspects matches the content of the discussions demonstrated below, in which adolescents relate alcohol dependency to the loss of control.

What would be addiction to you? (Researcher) – It would be out of control, right? (G1) When your body is asking for it and you can't control it (G1). The addicted person can't stop drinking, he has to drink everyday. It's different from the people that drink socially, because they drink and can stop at any time if they want (C2).

Moreover, the subjects reflect that there could be some damages from the moment of loss of control of the consumption of alcoholic beverages. Through their own language, metaphorical, they associate their previous knowledge and the new understandings that are incorporated throughout the problematization, as seen in the testimonies:

If you have an imbalanced diet, you can get fat and other health problems, at the same thing is drinking (G1). For example: a car driving in an avenue, with a speed limit of 80km/h; now if you run at 120 km/h, you are driving irresponsibly, and the same thing is the alcohol. It you have control over it, keeping a limit, you live well with

it. It won't be harmful to you or to your health (G1). I think everything in life you can't be exaggerated, right, not only in drinking, but to everything you have in exaggeration is harmful to you (C1).

When the links above are established, the adolescents consider that to avoid the loss of control and abuse of alcohol, the ideal is that it should be consumed in a moderate way, and according to them, the use does not damage the individuals, as seen below:

Drink moderately is not bad because you get loose and happier. If the person drinks too much, he gets boring; starts to talk nonsense and no one can stand that person. It's a negative side of drinking (D1). – Drinking less (is positive), because there's going to come a time you will end up drinking too much and frequently, and you can end up becoming dependent of drinking (D1). – Not always, if you have self-control (G1) [Answering to D1]. I think that drinking is not a problem, but you have to know how to drink. There are people that drink Monday, Tuesday... Everyday! (C2)

The acceptable consumption of alcoholic beverages to avoid damages to the individual is 15 doses/week per men and 10 doses/week for women⁽¹⁵⁾. However, not only for adolescents as well for the society as a whole, it is hard to define moderate alcohol consumption, being this limit interpreted according to individual opinion:

To get rid of the addiction of alcoholic beverages, of the consequences, the only solution is to stop drinking and moving away from some people? (Researcher) – It is to drink consciously (C1). – I think to be conscious of your responsibility when drinking (B1). – How is to drink responsibly? (Researcher) – There's no way! (F1). – Of course, there's a way! Once I had Jell-o shots, one cup, I saw that I was going to feel terrible, like, the amount of alcohol there went down burning my throat, so then I decided to stop drinking that. I think I've done something responsible, because I saw that later I was going to feel bad about it (B1). – In my case, for example, I have drunk irresponsibly and also responsibly (...): So, the first time I drank, I was with a group of friends, we had a bottle of vodka mixing with soda, and there was a moment I realized I was getting dizzy, so then I said: "in the place that I am", and it was during carnival, "in the place that I am, it's better to stop otherwise I'll end up..." (short pause) I was almost by myself, because the guys were drunker than me. "It is better I stop before I do

something wrong.” Then I stopped. “I’m just going to be here having soda now.” Then I was drinking only soda. The other time I realized I was feeling like that, I even thought: “Oh-well, I’m going to stop! No way! I’m going to continue!” I continued more, more and more, until I passed out (C1).

Besides these considerations brought by the adolescents are favorable to a sensible consumption of alcohol, their practices sign to a disquieting fact they consider an occasional heavy drinking acceptable – limits are from five doses of alcoholic beverages for men or from four doses for women at least once in the last two weeks⁽¹⁴⁾ – to their moments of leisure. Besides that, it is seen the consumption of alcohol not as an ally to leisure, but in fact, as the main reason for the moments of pleasure, or in other words, it is seen the adoption of the practice of drinking simply to drink.

CONCLUSION

When knowing the socio-demographic particularities of the adolescents, it was possible to contextualize the factors that interfere in their characteristics about the consumption of alcohol, which collaborates to the interventions in health, in order to prevent the consumption of alcohol and even motivate youngsters to change their behavior.

The semi-structured guide used in the in-group discussions permitted that the problematization took a path directed by the experiences of these adolescents. Therefore, it was possible to immerse into the understandings and practices of adolescents regarding the consumption of alcoholic beverages, polemicizing the socializing function and moral dimension of drinking, reflection upon the relationship between family context and alcohol consumption by the adolescents, and moreover dialoguing about self-control.

The valorization of the understandings of the subjects permitted them to overcome an ingenuous conscience, adoption a critical posture towards their choices. This occurs because the

shared understanding between the nurse-researcher and the adolescents through dialogue/reflection gave conditions to the subjects to develop a certain autonomy and responsibility in decision-making processes and in their conducts, arousing critical thinking regarding the prevention of the harmful or risky use of alcohol. Therefore, the proposal of this research is an interesting way to make the adolescent a responsible and autonomous subject.

It is possible to state that the data here presented subsidize the preventive care that was performed with the adolescents, through a participative methodology, which brought effectiveness to this caring. Hence, as this article is part of a research that is not limited to pure investigation, the production of this data also helped the moment of interventions on the problem-situations exposed by the adolescents, which was done through an education in health with a dialogic and problematizing perspective.

Consequently, it is concluded that this research presented implications that goes beyond the direct care to the adolescent. It goes through family repercussions, once the habits of the members of the family and their affectionate relationships demonstrate a large influence in the behavior of the adolescent regarding the use of alcohol. We can also highlight the social consequences, because the adolescent is a vulnerable category, object of health and social public policies, and yet, the consequences of educational order, because school, besides being co-responsible in the education of the adolescents, is the social environment used by them on a daily basis.

We emphasize the importance to develop researches with adolescents that adopt a strategy that makes them reflect upon their behavior regarding the consumption of alcoholic beverages. This research, while articulating the production of data linked to nursing caring, which is done through an educative caring, dialogic and problematizing, permitting this reflection by the subjects, working as an important subsidy of caring of the adolescent.

DIÁLOGO PREVENTIVO COM ADOLESCENTES SOBRE SEUS SABERES E PRÁTICAS DE CONSUMO DO ÁLCOOL

RESUMO

Pesquisa qualitativa, convergente assistencial, cujo objeto centra-se nos saberes e nas práticas de adolescentes sobre o consumo de bebidas alcoólicas e pretende conhecer os saberes de adolescentes sobre o consumo de bebidas alcoólicas e discutir a influência desses saberes nas suas práticas com relação a esse consumo. Participaram 12 adolescentes da Escola Técnica Estadual Oscar Tenório, entre setembro e dezembro de 2010. Para a produção dos dados, aplicou-se questionário socioeconômico, discussão grupal e observação participante. Aprovação no Comitê de Ética da Escola de Enfermagem Anna Nery/Hospital Escola São Francisco de Assis, protocolo 082/2010. A partir da triangulação das técnicas de coleta, os dados passaram por análise temática e discutidos conforme as categorias de análise: "Problematizando a função socializadora do consumo de bebidas alcoólicas pelos adolescentes", "Dialogando sobre a (l) moralidade do consumo de bebidas alcoólicas", "Refletindo sobre o contexto familiar e sua relação com o consumo de bebidas alcoólicas pelos adolescentes", "Consumo de bebidas alcoólicas: dialogando sobre o autocontrole". Conclui-se que os resultados subsidiaram o cuidado preventivo a ser desenvolvido junto aos adolescentes, através de uma metodologia participativa, que traz efetividade para esse cuidado.

Palavras-chave: Adolescente. Consumo de bebidas alcoólicas. Educação em saúde.enfermagem.

DIÁLOGO PREVENTIVO CON LOS ADOLESCENTES SOBRE SUS CONOCIMIENTOS Y PRÁCTICAS DEL CONSUMO DE ALCOHOL**RESUMEN**

Investigación cualitativa, convergente asistencial, cuyo objeto se centra en los conocimientos y las prácticas de los adolescentes sobre el consumo de bebidas alcohólicas, pretendiendo comprender los conocimientos de los adolescentes sobre el consumo de bebidas alcohólicas y discutir la influencia de estos conocimientos en sus prácticas con relación a este consumo. Participaron 12 adolescentes de la Escuela Técnica Oscar Tenorio, entre septiembre y diciembre de 2010. Para la producción de los datos, se aplicó el cuestionario socioeconómico, discusión grupal y observación participante. Hubo la aprobación por el Comité de Ética de la Escuela de Enfermería Anna Nery/Hospital Escuela São Francisco de Assis, protocolo 082/2010. A partir de la triangulación de las técnicas de recolección, los datos pasaron por análisis temático y fueron discutidos conforme las categorías de análisis: "Problematizando la función socializadora del consumo de bebidas alcohólicas por los adolescentes", "Dialogando sobre la (In)moralidad del consumo de bebidas alcohólicas", "Reflexionando sobre el contexto familiar y su relación con el consumo de bebidas alcohólicas por los adolescentes", "Consumo de bebidas alcohólicas: dialogando sobre el autocontrol". Se concluye que los resultados auxiliaron el cuidado preventivo a ser desarrollado junto a los adolescentes, a través de una metodología participativa, que trae efectividad para este cuidado.

Palabras clave: Adolescente. Consumo de bebidas alcohólicas. Educación en salud. Enfermería.

REFERENCES

1. Ministério da Saúde (BR). Secretaria de Atenção em Saúde. Departamento de Ações Programáticas Estratégicas. Diretrizes nacionais para a atenção integral à saúde de adolescentes e jovens na promoção, proteção e recuperação da saúde. Brasília (DF): Ministério da Saúde, 2010. 132 p.
2. Ministério da Justiça (BR). Secretaria Nacional de Políticas sobre Drogas. Tratamento da dependência de crack, álcool e outras drogas: aperfeiçoamento para profissionais de saúde e assistência social. Brasília (DF): SENAD; 2012.
3. Paiva FS; Ronzani TM. Estilos parentais e consumo de drogas entre adolescentes: revisão sistemática. *Psicol estud.* 2009 mar. [citado 2013 out 28 14(1)]. Disponível em: <<http://www.scielo.br/pdf/pe/v14n1/a21v14n1.pdf> > acesso em 28/10/2013.
4. Lima IS, Paliarin MM., Zalesky EGF. História oral de vida de adolescentes dependentes químicos, internados no setor de psiquiatria do Hospital Regional de Mato Grosso do Sul para tratamento de desintoxicação. *SMAD. Rev Eletrônica Saúde Mental Álcool Drog.* [on-line] 2008 fev. [citado 2010 out 26]. 4(1). Disponível em: http://pepsic.bvspsi.org.br/scielo.php?script=sci_arttext&pid=S1806-9762008000100003&lng=pt&nrm=iso.
5. Vargas D, Luis MAV. Álcool, alcoolismo e alcoolista: concepções e atitudes de enfermeiros de unidades básicas distritais de saúde. *Rev latino-am enfermagem.* mai-jun 2008; 16(n.esp). Disponível em: <http://ead.eerp.usp.br/rlae/>.
6. Mendes LR.; Teixeira MLO; Ferreira MA. Bebida alcohólica en La adolescencia: el cuidado-educación como estrategia de acción de la enfermería. *Esc Anna Nery.* 2010 jan-mar; 14 (1):158- 64.
7. Favoreto CAO. A prática clínica e o desenvolvimento do cuidado integral à saúde no contexto da atenção primária. *Rev. APS. Juiz de Fora (MG).* 2008 jan-mar. [citado 2013 out 9]; 11(1):100-108. Disponível em: <http://www.ufjf.br/nates/files/2009/12/100-108.pdf>.
8. Fernandes, EC. Política de Atenção Integral à Saúde dos Adolescentes e Jovens – Prosad. Artigonal Diretório de artigos gratuitos. 2009. [citado 2010 abr 13]. Disponível em: www.artigonal.com/ensino-superior-artigos/politica-de-atencao-integral-a-saude-dosadolescentes-e-jovens-prosad-1054873.html.
9. Paim, L; Trentine, M; Madureiras, VSF; Stamm, M. Pesquisa Convergente-Assistencial e sua Aplicação em Cenários da Enfermagem. *Cogitare enferm.* 2008 jul-set; 13(3):380-6.

10. Trentini, M.; Paim, L. Pesquisa convergente-assistencial: um desenho que une o fazer e o pensar na prática assistencial em saúde-enfermagem. 2. ed. Florianópolis: Insular; 2004.
11. Lepre RM; Martins RA. Raciocínio moral e uso abusivo de bebidas alcoólicas por adolescentes. *Paidéia*. 2009 jan-abr. [citado 2011 jul 17]; 19(42):39-45. Disponível em: <http://www.scielo.br/pdf/paideia/v19n42/06.pdf>.
12. Bertolo MA; Romera LA. Cerveja e publicidade: uma estreita relação entre lazer e consumo. *Licere*. 2011 jun. [citado 2012 jul 20]; 14(2):1-27. Disponível em: http://www.anima.eefd.ufjf.br/licere/pdf/licereV14N02_a4.pdf.
13. Ahlstrom S. Consumo nocivo de álcool entre estudantes europeus: resultados do ESPAD. In: Andrade AG; Anthony JC; Silveira CM. Álcool e suas consequências: uma abordagem multiconceitual. Barueri: Minha Editora; 2009. p. 89-102.
14. Fernandes HN, Eslabão AD, Mauch LMI, Franchini B, Coimbra VCC. A Práxis do Cuidado em Saúde Mental na Atenção ao Uso e Abuso de Álcool. *Cienc cuid saúde*. 2012 out-dez; 11(4): 827-831.
15. Silveira CM; Silveira CC; Silva JG; Silveira LM; Andrade AG; Andrade LHSG. Epidemiologia do beber pesado e beber pesado episódico no Brasil: uma revisão sistemática da literatura. *Rev psiquiatric clín*. 2008. [citado 2012 jul 20]; 35(supl 1):31-38. Disponível em: http://www.scielo.br/scielo.php?pid=S0101-60832008000700008&script=sci_arttext.

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