
MASKS OF POVERTY: CRACK AS A SOCIAL EXCLUSION MECHANISM¹

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ABSTRACT. The aim of this study was to analyze social representations of drugs and users in the Brazilian legislation on drugs, from the “crack cocaine” and “poverty” markers. The profile of frequent users is characterized by black single men aged approximately 30 years old, with low level of education and unemployed. About 40% of those intensively using crack are homeless and experience extreme social deprivation, even though this condition does not occur as a result of consumption. In this sphere, the stance of the legislation on drugs regarding this matter was analyzed. For such a purpose, a thematic content analysis of the documents that compose the legislation was performed, aiming at investigating how they represent drugs and their users. Results show that, despite the situation of social exclusion of users, the legislation places greater focus on repression. It targets the war on drugs and interdicts their use. In this sense, institutional racism operates as an exclusionary mechanism veiled to poor socioeconomic strata, and crack seems to disguise poverty with a mask that can be rejected publicly.

Keywords: Crack (drug); biopower; social representations; social norms.

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RESUMO. O objetivo desse estudo foi analisar as representações sociais das drogas e seus usuários na legislação brasileira sobre drogas, a partir dos marcadores “crack” e “pobreza”. O perfil dos usuários de crack com consumo frequente no Brasil é de homens, solteiros, negros, com cerca de 30 anos, baixa escolaridade e desempregado. Aproximadamente, 40% vivem em situação de rua, em extrema privação social, embora essa condição não seja advinda do consumo. Diante dessa realidade, analisou-se o modo como a legislação sobre drogas se posiciona sobre o assunto. Para isso, realizou-se uma análise temática de conteúdo dos documentos que compõem a legislação, investigando como representam as drogas e seus usuários. Os resultados apontam que, apesar do quadro de exclusão social dos usuários, a legislação tem foco maior na repressão. Existe um direcionamento ao combate às drogas e uma interdição ao seu consumo. Nesse sentido, o racismo de estado opera como um mecanismo de exclusão velado às camadas socioeconômicas pobres e o crack parece dizer respeito ao maquiamento da pobreza em uma máscara possível de ser rejeitada publicamente.

Palavras-chave: Crack; biopoder; representações sociais; normas sociais.

LAS MÁSCARAS DE LA POBREZA: EL CRACK COMO MECANISMO DE EXCLUSIÓN SOCIAL

RESUMEN. El perfil de los usuarios frecuentes de crack en Brasil son hombres negros, sencillos, de aproximadamente 30 años de edad, con un bajo nivel de educación y desempleados. Cerca del 40% de estas personas viven en las calles, en privación social extrema, aunque esta condición no se da por el consumo. En este ámbito, se analizó cómo se posiciona la legislación sobre drogas en este tema. Para esto, se realizó un

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análisis de contenido temático de los documentos que componen la legislación, investigando cómo representan las drogas y sus usuarios. Los resultados muestran que, a pesar del marco de la exclusión social de los usuarios, la legislación tiene un mayor enfoque en la represión. En este sentido, el racismo de Estado opera como un mecanismo de exclusión velado a los estratos socioeconómicos pobres y el crack parece colocar la pobreza dentro de una máscara que puede ser rechazada públicamente.

Palabras-clave: Cocaína crocante; biopoder; representaciones sociales; normas sociales.

Introduction

Drugs persist as a threat to the public order and an object of social alarm. Despite legislative changes over recent decades, with highlight to the inclusion of Harm Reduction as a public health strategy, drug users remain deprived of a place of visibility and acceptance (Acioli Neto & Santos, 2015, 2014; Andrade, 2011).

Brazil has legislation on drugs since 1938, which was incorporated into the Criminal Code later in 1941. These first legal records were based on notions that criminalized drug consumption and possession. As of the 1960s, due to legislative changes, anti-drug policies would take on an explicitly repressive character inspired on policies in the USA, with the ultimate goal of reducing drug supply. For this reason, the solutions were to arrest both dealers and users. The idea underlying these policies was that restricting drug access could reduce or even extinguish consumption. Only from the 1990s previous systems were substituted with the creation of the Brazilian National Anti-Drug System [*Sistema Nacional Antidrogras*] (SISNAD) and the Brazilian National Secretariat of Policies on Drugs [*Secretaria Nacional de Políticas sobre Drogas*] (SENAD). One of the factors that have contributed to these changes was the increasing compliance with the Directive Principles for Reducing Drug Demand (Garcia, Leal & Abreu, 2008). Since then, the creation of these specific organs, as well as the formulation of new policies, allowed the incorporation of elements besides those focused on reducing supply through repressive strategies.

From this perspective, one cannot deny the progress made during this period as to the improvement of an assistance that is sensitive to the cultural particularities of drug users. However, the debate becomes more delicate when crack use is addressed. The clamor about a crack epidemic appears to have led to a regression in this field (Souto, 2013; Acioli Neto, 2014).

In the face of this issue there are the latest measures the Brazilian government implemented to deal with it; several health and social service devices have been put into action in order to meet the needs of these users (Resolução n. 109, 2009). These measures are part of the Integrated Plan to Combat Crack and Other Drugs developed by the Federal Government, which has implemented a series of actions of immediate application and others of structuring character to approach this matter in an intersectoral manner. They are actions with a goal to promote an integrated set of interventions aimed at prevention, treatment, social reintegration and drug dealing repression (Decreto n. 7.179, 2010), which seems to be anchored on a differentiated logic of care.

However, the strategies adopted include compulsory internment for homeless drug users. This strategy aims at taking crack users off the streets and putting them in institutions for treating drug use, even without their consent. It is an action that imposes compulsory treatment and is based on the idea that the subject is not able to choose. In this sense, such an imposition disregards the user's decision-making process and seems to be guided by representations with a tendency to nullify the subject who consumes the drug (Romanini & Roso, 2012; Souto, 2013).

This official stance of repressive nature points to a long history in the country, where social or care determinations and effective assistance to people who use drugs have been neglected. However, this attitude refers to a still very current way of dealing with the matter. Admission to "reformatory" institutions has been a practice adopted in Brazil for decades whose main purpose was the segregation of difference (Acioli Neto & Amarante, 2013).

In this scenario crack is worth highlight, considering the particularities of this drug in the Brazilian public space, making it emblematic compared to the social effect of other substances.

Crack as the objectification of the drug (and its reality of decay) in the Brazilian society

Crack use is a largely ostracized social practice in Brazil and object of various interventions surrounded by great controversy. The image of the user of this drug is objectified in the individual without control over his/her actions and who is markedly associated with crime. The media and scientific contexts paint a criminalizing and pathologizing picture, evoking tensions and conflicts caused by the manifestation of marginalized socioeconomic classes. However, despite this stereotypical delimitation, the crack user is not restricted to this figure. It should be noted that users with a controlled/functional pattern of consumption are commonly found in a variety of contexts and socioeconomic classes, indicating a counterpoint to the hegemonic view of the individual nullified by crack (Acioli Neto & Santos, 2014, 2015).

In this context, the matter of crack use in Brazil has been neglected, either when it comes to the adequate care of users or how this practice has been conceived. It is important to stress that not every use of this drug is harmful, which does not mean that there are no potential risks to its users. Destructive experiences are widely conveyed and prevail as the only way to experience this practice. However, it is not unique and other modes of use coexist as well, bringing out the question about what causes some users to come up with control strategies. If crack is not the protagonist of these devastating experiences for a large number of users, what could it be?

The profile of individuals who frequently use it is characterized by single black or brown men aged around 30 years old with little education and unemployed (Bastos & Bertoni, 2014; Capistrano, Ferreira, Silva, Kalinke, & Maftum, 2013; Nappo, Galduróz, & Noto, 1994). However, despite the prominence of male users, women in situation of frequent consumption also present specific vulnerabilities, such as the practice of exchanging sex for the drug, and exposure to the AIDS virus, HIV, hepatitis C and syphilis, besides sexual violence.

It is conceived that the peculiarity of the matter can be discussed based on the legislation on drugs in Brazil. It is observed that despite this situation of social exclusion of users, the legislation seems to place greater focus on repression, fitting into a prohibitionist logic.

In 2006, with Law No. 11.343/06, there was some media outcry when the decriminalization of possession for personal use was implemented, which constituted an advance from a health point of view, because the user could not be arrested anymore. The only problem with this change is its symbolic character, since the decriminalization of use is in force since 1977 through Law No. 6.416/77. As stated by Boiteux (2006a), although acting as a counterpoint to the prohibitionist logic, these changes in legislation have incongruities. At the same time that they promote a benefit that already existed to the user, Law No. 11.343/06 increases the minimum sentence for drug dealing from three to five years (and the maximum to 15 years).

This aspect specifically is of great importance when considering the issue of drug use in Brazilian society. Zaccone (2008) points alarming data on the prison population: 60% was in jail for drug dealing. The information dates back to the 1990s and comes from the state of Rio de Janeiro, but shows the nuances of how the Brazilian state handles the matter. Between 1990 and 2012, while the number of the general population in Brazil increased by 30%, the number of inmates rose by 511%. Moreover, the majority of this population (54%) is brown or black, aged between 18 and 29 years old (55%) and has low level of education (5.6% is illiterate; 13% is literate only and 46% has incomplete elementary education only), according to the Brazilian National Penitentiary Department (Ministério da Justiça, 2012). Furthermore, it should be noted that all the current repressive policy turns to the fight against a social "enemy", in this case the drug dealer. But is this "enemy" the problem fought by policies aimed at drug issues?

Individuals fined and arrested for drug dealing are characterized as extremely poor people, usually detained with drugs without carrying any weapons and/or association with criminal organizations (Zaccone, 2008). These ways of life are socially depreciated, segregated from that

which is common. The point, it therefore seems, becomes the extirpation of social problems, which due to the “politically correct” needs atonement objects for it to be legitimized. The construction of crack in society appears to be about the disguising of poverty with a mask that can be socially rejected (Acioli Neto & Santos, 2014).

Thus, one should emphasize the role that representations have in the construction of informal normative mechanisms of exclusion, which are able to take on a social control function in which the figure of the user as a criminal, ill or immoral stands out (Acioli Neto, 2014).

Norm, power and social representations

According to Jodelet (2001), social representations are created by the need to know how to adjust, behave in the world, rule over it physically or intellectually, as well as to identify and solve problems that arise: “we always need to be informed about the world around us” (Jodelet, 2001, p. 17). This world is shared with others, who serve us as support (in a convergent way or through conflict) so we understand it, manage it or face it.

From this perspective, representations constitute a reality, an environment, even if symbolic, forming systems of thinking and seeing the world through contingent rationalities, making the sense always polysemic. This reality is set by routine, by habit (Berger & Luckmann, 1996), and the reactions that follow ordinary events, responses to stimuli, relate to a certain definition common to individuals who belong to a network of interaction, a given context (Moscovici, 2003).

In this respect, reality, or the everyday life, presents itself as a set of objectifications, a network made up of an array of meanings that have been designated as so by means of interactions between the individuals of a given culture. These objectifications are meant by language in representational processes, which are constituted as a repository objective of vast accumulations of meanings and experiences that can then be preserved in time and passed on to the next generations. In this way, they constitute an *ethos*, a normative system that should be considered (Jovchelovitch, 2008; Marková, 2013), instituting this web of senses as regimes of truth (Foucault, 1995).

This *ethos* refers to a set of habits and practices that shape a way of acting before the culturally delimited reality (Geertz, 1973), a normative matrix with socially accepted and shared rules. These rules are therefore conventional and promote some regularity, having a legitimizing role in the validation of certain practices (Marcondes, 2006). It is through these conventions that the meaning becomes public and shared, allowing the negotiation of representational and interpretive differences (Bruner, 1997). And for this reason it is anchored on customs, culture, being constituted as a normative system, but at the same time it is about the ability to deal, negotiate with this normativity. Thereby, every culture constitutes an *ethos* with values concerning orientations for action.

These conventions are pervaded by norms (values and rules of conduct) and practices (rituals, ways of life) that constitute informal social controls, developing a repertoire of possible practices in a context, for instance the pattern of consumption of a drug. These normalizations indicate what substances can be used and under what circumstances, and can be informal and shared within an interactional network or formalized by law (Zinberg, 1984).

Social control is therefore determined by rules and conditions of use characteristics of specific contexts in which meaning is constituted (Marcondes, 2000). In this way, one cannot restrict the normative efficacy and control strategies to the judicial-legislative power only. Foucault (2005) draws attention to this phenomenon when addressing the notion of society of normalization, conceiving as unreasonable the legitimacy of power conforming fully to modalities determined by the State. The norm, in this sense, is built in a relational context, in micro-cultures with their rules and particular significations, through disciplinary technologies and bio-politics: power is capillary (Foucault, 2005).

Society of normalization and institutional racism

Discipline can be understood as a power exercise technique existing since ancient times but enhanced in the eighteenth century as a technology for managing individuals. They are control techniques used for the improvement of labor utility and performance of social functions. "These methods, made possible the meticulous control of the operations of the body, which assured the constant subjection of its forces and imposed upon them a relation of docility-utility" (Foucault, 2001, p. 126). For this reason, it can be regarded as a set of techniques that produce useful individuals, bringing a specific way of punishment, with corrective purposes, aiming to reduce deviations. However, these penalties do not take the shape of repressive or expiatory practices, but comparison, differentiation, hierarchization, homogenization and exclusion: it normalizes (Foucault, 2001). The disciplinary power therefore institutes the power of the norm, which works with a differentiated effectiveness of the role that the law plays. Behaviors are no longer coded, and conducts begin to be normalized. It is about a normalizing control, a surveillance that allows qualifying, classifying and punishing (Pogrebinschi, 2004).

Nevertheless, the society of normalization is constituted by another modality of power, which complements discipline: biopower. Complementation occurs because there is no substitution. Biopower is incorporated into discipline, transforming it, adapting it. Its action intervenes in collective phenomena that affect the population, and it is not limited to the body, to the subject. Through regulatory mechanisms, it controls phenomena that ensure life and prevent death. This regulation, it is worth pointing out, is not exclusive of the State. There are countless biopower spots located within the infra and parastatal sphere, such as some medical institutions, aid funds and insurances (Foucault 2005; Pogrebinschi, 2004).

In this sense, it is the norm that transits between these two powers, between discipline and regulation, enabling the balance between the disciplinary order of the body and the random order of the population. "The norm of discipline and the norm of regulation give rise to what Foucault calls society of normalization, a society governed by this ambivalent norm, in which individual and population, body and life, individualization and massification, discipline and regulation, coexist" (Pogrebinschi 2004, p.197).

In the society of normalization, the State prioritizes a set of pieces of knowledge and security devices intended to control the populations, converting the biological life into the government's object. What prevails is the power to make live and let die. Thus, the racial notion (and racism) becomes baseline condition for the legitimacy of the extinguishment of life in a society of normalization. The specificity of modern racism is linked to the techniques and technologies of power, and the State, from this racial question, begins to exercise its sovereign power (to let live and make die), in a veiled manner. This mode of action ensures the State its murderer role, comprehending that death, in this sense, goes beyond the idea of direct murder and includes indirect ways: exposure to death, multiplication of risks or political death, expulsion, exclusion (Foucault, 2005).

These characteristics give highlight to the operation of the State's exclusion mechanisms from the issue of drug use, particularly crack in Brazil, considering the impacts of the repressive proposal in force in the legislation of the country, as shown above.

From this scenario, it is imperative to question this institutionalized political discourse, considering that it is constituted as a symbolic matrix that is realized in institutionalized practices and creates devices that produce meanings and subjective labeling. A matrix which acts mediating relations reciprocally by disseminating representations that end up organizing modalities of subjectivities and conduct, even if implicitly (Berger & Luckmann, 1996). From this perspective, power has as role the institutionalization of truth. Truth is the norm, because it is the true discourses that judge, condemn, classify, force, coerce, always bringing with it specific effects of power (Pogrebinschi, 2004).

In contrast, despite the social hype about the harms of crack as the "enemy" to be fought and cause of countless social "evils", the drug itself does not have this power, being covered with a symbolic labeling that brings about this capacity, this effect of truth. Thus, the question is: what are the purposes of the discourse on crack as a social problem in the regulation of the Brazilian population? What are the effects of these representations to the emergence of the figure of the crack user? How do these effects influence strategies of control and social exclusion?

To answer these questions, this study aimed to analyze the social representations of drugs and their users in the Brazilian legislation on drugs, from the "crack cocaine" and "poverty" markers.

Method

Sources

A total of 13 documents that compose the legislation on drugs in force in Brazil were analyzed: National Policy on Drugs [*Política Nacional sobre Drogas*] (PNAD); Policy of the Ministry of Health for the Comprehensive Care of Users of Alcohol and Other Drugs [*Política do Ministério da Saúde para a Atenção Integral a Usuários de Álcool e outras Drogas*] (PMSAD); Law No 11.705/2008; Law No 11.754/2008; Law No 11.343/2006; Law No 10.216/2001; Law No 9.099/1995; Decree No 7.179/2010; Decree No 5.912/2006; Decree No 6.117/2007; Decree No 6.488/2008; Decree No 6.489/2008; and Ordinance No 131/2012.

Procedure

Data collection. Information was collected digitally from the platforms of the Brazilian Observatory of Information on Drugs [*Observatório Brasileiro de Informações sobre Drogas*] (OBID), the National Secretariat on Drugs [*Secretaria Nacional Sobre Drogas*] (SENAD) and the Virtual Health Library [*Biblioteca Virtual em Saúde*] (BVS).

Data analysis. From these documents, a Content Thematic Analysis of the discourses on drugs present in the legislation was initially performed, followed by an investigation about how such documents represent drugs and their users, by identifying how these concepts are approached in relation to the “poverty” and “race” markers.

Content analysis can be defined as a set of analysis techniques aimed at describing contents immersed in communications which allows inferring knowledge about the conditions of production and transmission of this knowledge, through the break of the text into categories, followed by a regrouping by analogies (Bardin, 1977).

The legislation was categorized, composing families of meanings that encompassed the discourse on drugs, situated in hermeneutic units. In this sense, these categories were organized through the discursive content present in the documents and through the frequency of enunciation. Subsequently, they were identified as composing a certain family of meanings and aggregated in terms of similarities and relationship with the theme discussed. These procedures were performed with the aid of the Atlas.ti software.

The choice of Atlas.ti resulted from the possibilities of systematization of the analytical categories provided by the software. In addition, Atlas.ti has advantages over the traditional techniques used in Content Analysis, such as the notes and comments features, preparation of reports, memos, data arrangement in tables and matrices, etc. It is important to highlight that the analyses carried out on the software were manual so that there were no automated procedures for categorization and interpretation. Atlas.ti worked as an analytical tool, facilitating this process.

Results and Discussion

The analysis conducted allowed the inference of two major thematic categories, as shown in the table below (Table 1). The first was called “Drug as an enemy to be fought” and included the discourse that explicit representations of drugs in the legislation. The second category, called “Exclusion of the user and nullification of the subject in generalizations”, highlighted the way that users are represented in such documents.

Table 1 - Categories and record units of the analyzed data.

Categories	Record Units	Frequency
Drug as an enemy to be fought	Social problem	27
	Threat	22
	Way towards addiction	15
	Object to be fought	10
	Misuse	9
Exclusion of Users	Inaccuracies when distinguishing users and addicts	15
	Ambiguities in the "dealer" category	12
	Deviant subject	9
	Ill	8
	Criminal	7

Drug as an enemy to be fought

From the discourse present in the legislation, it is possible to observe a focus on the fight against drugs and a ban on their use. It is important to note that at no time the use of drugs is recognized as a cultural practice, an activity that accompanies virtually all cultures throughout the history of mankind, with the exception of alcohol, mentioned in the PMSAD. The outline takes the opposite way, showing that drugs are a problem to be combated and that one should walk towards searching the ideal of a society free from their threats. Drugs are always negatively conceived whether for the need to face them due to the risks they generate to society or for the health problems they cause to users.

Seeking incessantly to achieve the ideal of construction of a society protected from the use of illicit drugs and the misuse of legal drugs... Recognizing the irrational use of legal drugs as an important factor that leads to addiction, which should, for this reason, be object of appropriate social control, especially in aspects related to advertising, marketing and accessibility of vulnerable populations such as children and adolescents... Raising the awareness of the Brazilian society about the social damages and negative implications posed by drug abuse and its consequences (PNAD, Secretaria Nacional Antidrogas, 2002).

According to Couto, Lemos and Couto (2013), it is the construction of the hazardous nature of this practice that ends up supporting criminalization within the sphere of the virtualities of "bodies" that use drugs. This evidences, therefore, the stigmatization of drugs and their users as an effective tool for order in society (Bucher, 1996; Velho, 1987), for social control.

Thus, based on epidemiological studies that point to a population diagnosis, the documents present risk factors and health problems resulting from consumption. The management of consumption risks sets up means for the control of the masses, making subjects and their significations nullified in a generalized quantification.

About 10% of people in urban centers around the world consume psychoactive substances abusively regardless of age, sex, level of education and purchasing power. Despite the use of psychoactive substances of illicit nature, and considering any age group, the misuse of alcohol and tobacco has the highest global prevalence, also bringing the most serious consequences to public health worldwide... Alcohol would be responsible for about 1.5% of all deaths in the world, and about 2.5% of total years lived adjusted for disability. In the poorest layers of the population, the use of solvents and marihuana is frequently seen. It is also possible to observe an increase in the use of anxiolytics, amphetamines and cocaine. Comparing the increase in the consumption of these substances in the four surveys, in the "six times or more in a month" category of use, there was an increase in consumption of 100% for anxiolytics; 150% for amphetamines; 325% for marihuana and 700% for cocaine (PMSAD, Ministério da Saúde, 2003).

Thus, at the same time that risk control strategies are consolidated through prevention mechanisms, the drug is legitimized as a threat. However, this drug as a symbolic object ends up being covered with a moralizing signification that does not consider the singularities and contextual contingencies of its use. In this way, poor groups and a repulsive practice amalgamate: morality prevails not in a war on drugs but on poverty due to its criminalization.

In this regard, recent data released by Fiocruz (Bastos & Bertoni, 2014) highlights a serious picture of absence of assistance to users: about 40% of those who make heavy use live on the streets, in extreme social deprivation, with no access to health services or other public spheres. It should be noted that this condition does not derive from consumption. There is no causal relationship between crack use and street experience. What is observed is that the consumption of this drug among people living on the streets is more frequent.

As Boiteux (2006b) states, prohibitionism is better at causing risks to society and the public health than ensuring its security. On the grounds of an alleged public health protection, a severe punitive and legal framework develops, covering up prevention at a purely symbolic level. Moreover, even with the adoption of this model, the illicit drug market achieves every day more profitable results and, from the point of view of public health, the rates of drug consumption have been rising in all countries of the world, despite punitive efforts to achieve the ideal of a world free of drugs.

In contrast, the punitive nature of the law and its repercussions for users acquire a predominant characteristic in the analyzed discourses. The operationalization of the law is made concrete in the penalties applied. And the subject who consumes a drug is given the burden of the offense.

Whoever purchases, keeps, stores, transports or carries with himself or herself for personal consumption drugs without authorization or in violation of legal or regulatory determinations shall be subject to the following penalties: I - warning on the effects of drugs; II - provision of services to the community; III - educational measure that requires attendance to educational programs or courses... The judge will command the Public Power to provide the offender a health institution – preferably with outpatient care – for specialized treatment, free of charges (Law 11.343, 2006).

Drug use is restricted to a legal system that delimitates its possibilities, making it a crime, a violation. It is a model that opposes to even the very assumptions indicated by the PNAD by crippling the construction of difference. According to said Law, the user has two options: be arrested or treated. He/she is a criminal or ill.

In this respect, it is worth highlighting the nuances used by legislative mechanisms to classify user and dealer. Although there is this distinction in the Brazilian legislation, this process leaves gaps by not explaining the differentiation process. By legal criteria, this distinction considers the quantity, nature (or quality) of the drug, location, among other objective circumstances. However, it may also be based on the agent's background, as well as social and personal context. Because of this lack of clearly defined criteria difficult to implement, this differentiation is performed by the first authority with whom the accused comes into contact, whose assessment prevails. This mode of action violates the constitutional principles of legality and proportionality (Boiteux, 2014).

To determine whether the drug was intended for personal consumption, the judge will regard the nature and quantity of the substance seized, the place and conditions in which the action developed, social and personal circumstances, as well as the conduct and background of the agent... An individual offering drugs, occasionally and without profit purposes, to somebody he/she has a relationship with, so they consume them together: Penalty - detention of six (6) months to one (1) year, and payment of 700 (seven hundred) to 1,500 (one thousand five hundred) days - fine, without prejudice to the penalties provided for in art. 28 (Law 11.343, 2006).

This problem becomes even more serious when considering the number of black people living in poverty in Brazil. According to data from the Institute of Applied Economic Research [*Instituto de Pesquisa Econômica Aplicada*] (IPEA, 2013), this group accounts for 51% of the total population, of which only 20% have family income higher than 10 minimum wages. The racial issue also takes on a political and economic character, including, in addition to race, people living in socioeconomic conditions of poverty (IPEA, 2013). This data is extremely relevant when it comes to the crack user's profile in

Brazil and the prison population in the country, as shown above. Who, then, is arrested as a “drug dealer” in Brazil?

The extermination of this mode of existence resorts to differentiated mechanisms of exclusion, with the legal apparatus being a legitimated form of crippling these subjects. It is the symbolic murder and the socially legitimated imprisonment (Foucault, 2005).

However, those who do not suffer legal condemnation are left with the pathologizing proposition. Addiction is seen as an escape route of this mechanism, but acts as another face of the subject's nullification process. The addict is characterized as a subject incapable of understanding the regulatory interdictions that govern society. The effect of the drug is to make the subject incapable of understanding or deciding for his/her own life.

The agent will be exempt from punishment if, due to addiction, or under the influence, from unforeseeable circumstances or force majeure, of drug, was, at the time of the action or omission, whatever the criminal offense committed has been, entirely incapable of understanding the illicit nature of the fact or making decisions according to this understanding (Law 11.341, 2006).

Faced with this inability, such subjects can only appeal to treatment through health services, which, when we consider the entire healthcare network together with complementary services, typically have a focus on internment. It is the psychiatrization of difference, still present as a socially legitimized activity, removing from the streets the unwanted, the ill, the crazy, the abnormal ones (Acioli Neto & Amarante, 2013) and reinforcing the social control of poverty (Boiteux, 2013).

Under the legitimacy of the law and the discourses on fight against violence, actions for reducing supply enable equally violent practices. In this sense, institutional racism operates as a veiled mechanism for excluding poor socioeconomic strata.

The exclusion of the user and the nullification of the subject in generalizations

The user, more explicitly in the legislation, is characterized as a subject excluded from society who needs interventions so he/she can be reintegrated. He/she is associated with the “misuse” or a condition of dependency of the drug. The differentiation of categories is superficial, and in the documents the user ends up being confused with the dependent, being always associated with prevention, reintegration, treatment actions, etc. As noted:

Recognizing the differences between the user, the one who misuses, the addict and the drug dealer, treating them differentl... The access to different types of treatment and recovery, social and occupational reintegration should be identified, qualified and guaranteed as a continuous process of efforts made, permanently, in favor of users, addicts and their families, with technical and financial investment in a decentralized manner (PNAD, Secretaria Nacional Antidrogas, 2002).

It is therefore important to point out that in this government the Ministry of Health accepts, in a comprehensive and articulated way, the challenge to prevent, treat, **rehabilitate users of alcohol** [emphasis added] and other drugs as a public health problem (PMSAD, Ministério da Saúde, 2003).

Although the focus of the PNAD is notably different from that of the PMSAD, both characterize a universal subject who ends up being nullified in generalizations: particularities are highlighted indistinctively, indicating the existence of differences as to race, ethnicity, gender, etc., without pointing different proposals due to such markers. What is observed is the normalizing control consolidating a surveillance device that classifies and punishes divergent individuals (Pogrebinschi, 2004).

In this sense, these normalizations summon users to become addicts, criminals unable to build life plans, which end up in the hands of the State as it allows their social “reintegration”. As it can be seen in the excerpts: “*the need to define specific confrontation strategies aimed at strengthening the assistance network for users of alcohol and other drugs, with an emphasis on their rehabilitation and social reintegration*” (PMSAD, Ministério da saúde, 2003). Likewise, the National Policy on Drugs

states: “*Ensuring the implementation, realization and improvement of programs, actions and activities aimed at reducing demand (prevention, treatment, rehabilitation and social reintegration) and harms, taking into consideration quality of life indicators, respecting capabilities and ethical principles*” (PNAD, Secretaria Nacional Antidrogas, 2002).

The excerpts illustrate the propositions highlighted in the legislation for an assistance that is adequate to the realities that are built around this practice. Prevention and treatment are needs defined by policies. The use of drugs always requires health care, which is focused on a network that is not limited to health equipment, but on their articulation with other sectors, such as social service.

Although these actions target harm reduction, implementing them in the face of supply reduction and criminalization of drug possession, dealing, etc., becomes a challenge. Thus, under the legitimacy of the law and the discourses on fight against violence, actions for reducing supply oftentimes enable equally violent practices that disregard human rights, respect for life, cultural specificities, vulnerabilities, among other aspects brought as fundamental in those very documents.

It is important to emphasize that the criticism made of the provision of care to the user should not be confused with a proposition that this guideline does not have importance. What should be stressed is that drug use not always means a need for healthcare; although this is the way it is understood in the legislation.

Final considerations

The way that drugs are represented in the legislation has implications for the emergence of a figure with a markedly repulsive otherness. Users are defined by their responsibility for feeding crime and/or by their inability to decide for their own lives, becoming a threat that needs to be controlled. They are criminals and/or addicts, a precise mold of what society rejects and requires to be corrected (or killed). These characteristics are part of the typical lifestyles of crack users, thus increasing the repulsiveness of this figure. If drug use is “improper” and “unwanted” in Brazil, when it comes to crack the roaring is for its extinction.

It should be noted that the existence of governmental actions and programs in the sphere of the State (Attitude Program, in Pernambuco) or Municipality (Open Arms, in São Paulo) that produce responses different from those presented is acknowledged. However, the emphasis is on the discourses in the legislation and the predominant mode to intervene in the matter.

In this sense, it can be considered that the representations of drugs and users in these documents worsen the social exclusion of some groups. Selective imprisonment mechanisms are developed by legal means, which, when considering the characteristics of the prison population in Brazil sentenced for drug dealing, have to do with the matter of poverty and racism. A way to expose such individuals to “death”, through the segregation of society and political nullification, without considering all the problems that the meager Brazilian penitentiary system causes to those who experience this response from the State.

From a health perspective, mechanisms imposing treatment are consolidated, hindering even more the access for people who need attention, hurting even basic rights. Furthermore, when actions like forced internment are prioritized over actions specifically aimed at the vulnerability of these groups, such users end up being exposed to greater risks, as they do not comply with the treatments imposed, and the real problem they have is disregarded: poor living conditions.

In this way, the Brazilian legislation on drugs, with its repressive content and the delegitimization of drug use as a cultural practice, ends up building mechanisms that exclude the most underprivileged socioeconomic classes. Poverty, therefore, is covered by a symbolic coating that makes it liable to be expunged from society. The scrutiny of the law forms symbolic and material barriers that favor the maintenance of inequality through some atonement objects: the drug, the user, crack, and crackheads.

A process that is not limited to the legal field, but it is also and mainly established in everyday practices, in the prejudice and discrimination that make up social reality.

Thus, it can be said that crack has the role of regulating the Brazilian population by building the image of a threatening figure and object: the drug and the user. These discourses relate to the construction of stereotypes, which ultimately act as tools of informal social control necessary to legitimize the formal social control, whose maximum expression in the drug field is the legal system. These stereotypes serve to organize and give meaning to the discourse in terms of the dominant interests. However, so they consolidate as modalities of social control, there is a need for legitimization processes, "explanations" and justifications from the institutional order. This process has the role of validating social norms, making them subjectively accessible to individuals, as well as justifying institutions, making them plausible and acceptable. Thus, a network of legitimizations is created and supported by normative interpretations, establishing social control programs, visible or not.

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