

University care centers for the chemically dependant in the City of São Paulo, Brazil

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This study aims to explore and describe the treatment centers, located in the city of Sao Paulo, Brazil, considered references by the Brazilian National Anti-Drug Secretary. Interviews were conducted with the coordinator of the Service Program for Dependants (PROAD), the clinical director of the Research Unit of Alcohol and Drugs (UNIAD), both of which have been developed by the Federal University of Sao Paulo (UNIFESP). Also interviewed was one of the coordinators of the Interdisciplinary Group of Drug and Alcohol Studies (GREA) of the School of Medicine of the University of Sao Paulo (FMUSP). The object of this study is to get to know the theoretical foundations and techniques used in various treatment programs All the programs use preliminary and follow-up protocol for treatment, theoretical orientation and techniques are diverse and flexible. The psychodynamic approach, has been adopted by PROAD The behavioral-cognitive approach has been adopted by GREA and UNIAD. The use of advances in neuroscience and psycho-pharmacology and psychotherapies as well as the search for alternative ways to get the patient to participate in his own treatment is evident in each of these Centers.

Key words: University care centers, drug addicts, mental health, psychopathology

Proposals and models of treatment for chemically dependant people are, in general, eclectically collected procedures from doctors and psychologists, social-workers and religious institutions. It is rare to find a pure model. In recent decades, many approaches have been tried using any means to achieve abstinence from drugs. This has been the objective of most of the so-called "treatments". The goal of abstinence was justified by the adoption of various means of treatment such as: detoxification with or without pharmaceutical maintenance; psychotherapy; religious catechization; law enforcement; physical aggression; work therapy; psychiatric hospitalization; specialized clinics; programs of Narcotics Anonymous (NA); residential programs run by former dependants and outpatient centers with teams of professionals who use an interdisciplinary approach (Rezende, 2003). In terms of the difficulties encountered in the diverse modes of intervention, Dias (1995) asserts that care givers, be they specialized or not, from professional to volunteer, have all adopted the same way of talking about dependency and treatment. Because of this, there is very little distinction between how the medical community and how law enforcement deal with this reality. Laranjeira (1996) asserts that traditional forms of treatment, based in clinics and psychiatric hospitals, prevail in relation to early intervention and community action approaches which are still quite undeveloped. In the past thirty years or so, treatment involving psychiatric hospitalization offered by the State has been criticized in scientific literature relative to chemical dependency.

Silveira Filho says that the phenomenon of dependency occurs as a result of the combination of the drug, the individual and the context in which they meet. For Filho, contemporary psychiatry uses a positivist scientific model that frequently results in simple conclusions, currently unacceptable. The object of this study is to get to know the theoretical foundations and techniques used in various treatment programs and by doing so, to contribute to the instruction of professionals who work in psychology and mental health.

Method

This study aims to explore and describe the current treatment practices in Sao Paulo City, Brazil. It is limited to university centers which are considered references in the treatment of chemically dependant persons in Sao Paulo, Brazil. Interviews were conducted with the coordinator of the Service Program for Dependants (PROAD), the clinical director of the Research Unit of Alcohol and Drugs (UNIAD), both of which have been developed by the Federal University of Sao Paulo (UNIFESP). Also interviewed was one of the coordinators of the Interdisciplinary Group of Drug and Alcohol Studies (GREA) of the School of Medicine of the University of Sao Paulo (FMUSP). These treatment centers, located in the city of Sao Paulo, Brazil, are considered references by the Brazilian National Anti-Drug Secretary. The first part of the interview asked the interviewee (subject) to describe, in the broadest and most comprehensive way, the fundamental theories and techniques of the institution. The second part of the interview asked four questions with the objective of complementing and clarifying pieces of information that were not obtained in the first part. What are the goals the institution has for the treatment of their patients? What methods and techniques are employed? What is the criteria by which they evaluate the results of their intervention? What are the main difficulties the institution faces?

The results are reported in the following tables and by the following quotes made during our interviews. They use Bardin's (1977) content analysis fundaments.

Our analysis and discussion of the results of our study was founded upon the studies done in the treatment of drug dependants in the last ten years that serve as bibliographic references and may be found in the following databases: MEDLINE (international literature produced by the National Library of Medicine), LILACS (Latin American and Carribean literature in Health Sciences), and CEBRID (Brazilian Center of Drug Information). All of the participants signed a "Free and Clear Consent Form" and were told about the guidelines of this research.

Results

The following (tables 1, 2 and 3) show the main results of this study.

Table 1 – The beginning of activities, founder and current coordinator (2002) of the centers involved in our research.	
PROAD	1987. Founded by Dr. Dartiu Xavier da Silveira Filho, Ph.D.
UNIAD	1994. Founded by Dr. Ronald Ramos Laranjeira, Ph.D.
GREA	1981. Founded by Dr. Artur Andrade Guerra, Ph.D.

Table 2 – The activities established by each program	
PROAD	Assistance, Prevention, Teaching and Research
UNIAD	Assistance, Prevention, Teaching and Research
GREA	Assistance, Prevention, Teaching and Research

Table 3 – Established goals of treatment	
Program	Established Goals
PROAD	To treat the drug as a symptom of something that is not well in the patient. To treat dependency. To say “No!” to dependency.
UNIAD	To achieve stable abstinence. To respond efficiently and with efficacy to each stage of improvement by the patient.
GREA	The most obvious goal is abstinence. To improve the lives of patients in a variety of environments: family, work and society.

Coordinator of PROAD:

We understand that the objective is not to take away the drug or to take away the substance. The point is not to say “No!” to drugs. It is to say “No!” to dependency.

Coordinator of UNIAD:

Our proposal is for abstinence. It’s great if the patient maintains abstinence. We know the limitations involved and how difficult it is to maintain stable abstinence.

Coordinator of GREA:

The goal is to improve those aspects in life of the person that we see as being related to their use of drugs or alcohol. That is to say that the most obvious goal is abstinence but not just abstinence. The measure of the efficacy of our treatment is the one that includes work, family relationships and physical problems.

Methods and Techniques Used in Treatment and Prevention

Program	Established Goals
PROAD	Medical evaluation, medicine, individual psychotherapy, group therapy, family orientation, therapy workshops.
UNIAD	Informational meetings, motivational interviews, medicine, group and individual therapy.
GREA	Psychotherapy and pharmaceutical therapy.

The clinical director of UNIAD clarified that, “in the beginning the treatment is very directive because, if it were not, it would be too difficult. Especially with cocaine-dependant patients who are anxious, restless and cannot sit still and discuss a subject.”

The coordinator of GREA considers that everyone dependant on alcohol and/or nicotine should use some kind of pharmaceutical therapy as well.

The Evaluation criteria of the results

All the programs use preliminary and follow-up protocol for treatment. The instruments used include clinical, neuro-psychological, psycho-social investigation with an emphasis on substance use, physical health, family relationships, leisure, work and legal questions.

Principal Difficulties Cited

The participants assert that financial support and the rotation of staff (which are composed in part by residents and post-graduate students) are the biggest obstacles to increasing the work of the institution.

Discussion

It is known that in the last twenty years, there has been considerable advance in international literature about drug/chemical dependency. The studies have shown that there is a large diversity of problems and of populations involved in different levels of drug and alcohol use (Laranjeira, 1996). Therefore, a policy

should be sought which would be both diverse and flexible enough to be able to, at least, contemplate meeting some of these problems. In this way, quantitative evaluations try to estimate or guess at the standard of consumption through the frequency of consumption, the rate of abstinence, alternating substances, the reduction of substances consumed and damages caused. Another tendency of the approaches used is to focus on the changes made by the user in his subjective relationship with the drug. The changes in the standard of consumption are taken into account since they seem to be results of psychological changes. The simplistic solution of “fight against drugs” and similar ideologies is handily rejected as facile.

Although there are many discussions today, policies of reducing the risks and damages are not explicitly cited by the subject of this study. On the other hand, it is obvious that there is agreement among the participants about the difficulties of patients to follow treatment and to obtain the desired abstinence from substances. The user of illicit drugs often resists intervention by a psychologist. Even when abstinence is artificially obtained by hospitalization, recidivism seems unavoidable (Azrin et al., 1996).

According to our interviews with Dartiu Xavier da Silveira (PROAD), Marcelo Ribeiro de Araujo (UNIAD) and André Malbergier (GREA) theoretical orientation and techniques are diverse and flexible. In this respect, everyone agrees with the cited authors. The psychodynamic approach, founded in a treatment proposal by French psychiatrist Claude Olievenstein is characteristic of that used by PROAD. The behavioral-cognitive approach inspired mainly by the psychologist G. Alan Marlatti has been adopted by GREA and UNIAD. The use of advances in neuroscience and psycho-pharmacology and psychotherapies as well as the search for alternative ways to get the patient to participate in his own treatment is evident in each of these Centers

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Resumo

Apresentam-se os centros universitários que são considerados referência no tratamento de dependentes de drogas da Cidade de São Paulo, Brasil. Programa de Atendimento a Dependentes (PROAD), Unidade de Pesquisa em Álcool e Drogas (UNIAD), ambos desenvolvidos pela Universidade Federal de São Paulo (UNIFESP) e o Grupo Interdisciplinar de Estudos de Álcool e Drogas (GREA) da Faculdade de Medicina da Universidade de São Paulo (FMUSP). Objetivou-se conhecer os fundamentos teóricos e práticos destas instituições. Os três programas estão vinculados a universidades públicas. Há um protocolo comum de triagem e seguimento adotado pelos programas. Segundo os participantes as orientações teórica e técnica são diversificadas e flexíveis. A abordagem psicodinâmica, é característica do PROAD, O enfoque cognitivo comportamental, é adotado pelo GREA e UNIAD. A incorporação dos avanços das neurociências e da psicofarmacologia, bem como a busca de alternativas para promover aderência ao tratamento estão presentes nos centros estudados.

Palavras-chave: Centros de tratamento, dependentes de drogas, saúde mental, psicopatologia