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Experience Report



HEALTH PROMOTION OF CHEMICAL DEPENDENTS: THE CONSTRUCTION OF THE ACTIVE SUBJECT

PROMOÇÃO DA SAÚDE DE DEPENDENTES QUÍMICOS: A CONSTRUÇÃO DO SUJEITO ATIVO

PROMOCIÓN DE LA SALUD DE DEPENDIENTES QUÍMICOS: LA CONSTRUCCIÓN DEL SUJETO ACTIVO

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RESUMO

Objetivo: descrever as atividades de educação em saúde realizadas com indivíduos em processo de reabilitação química, enfatizando a relevância da promoção da saúde na construção do sujeito ativo. **Método:** trata-se de um relato das experiências vivenciadas pelo Projeto de Extensão "Promoção da Saúde de Dependentes Químicos", durante o período de 2016 a 2017, articulado à pesquisa bibliográfica, recorrendo a autores que partem da concepção ampliada de saúde, além da pesquisa documental, com a análise da Política Nacional de Promoção da Saúde e de dados de pesquisas realizadas por algumas instituições. Resultados: foram desenvolvidas ações por meio de oficinas, dinâmicas, atividades físicas e roda de conversas, conforme os aspectos colocados pelos usuários e/ou a realidade como mais relevantes e que interferem, direta ou indiretamente, no processo de tratamento: suicídio, depressão, infecções sexualmente transmissíveis, etc. Assim, fortaleciam-se a subjetividade, as relações pessoais e sociais, aumentando a autonomia dos sujeitos e permitindo-os debater, refletir e construir conhecimentos relevantes para a manutenção do próprio bem-estar ao longo do curso da vida, de modo a promover a saúde. Conclusão: compreendeu-se, então, que as ações empreendidas permitiram, por um lado, a construção de agentes conscientes no desenvolvimento de competências a fim de melhorar a sua qualidade de vida e, por outro, a sua autopercepção enquanto sujeito de direito.

Palavras-chave: Promoção da Saúde; Transtornos Relacionados ao Uso de Substâncias; Qualidade de vida.

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ABSTRACT

Objetive: to describe the health education activities carried out with individuals in the process of chemical rehabilitation, emphasizing the relevance of health promotion in the construction of the active subject. Method: it is an account of the experiences experienced by the Extension Project "Promotion of the Health of Chemical Dependents" during the period from 2016 to 2017; articulating the bibliographical research, resorting to authors starting from the expanded conception of health; and documentary research, with the analysis of the National Policy for Health Promotion and research data by some **Results:** Through workshops, dynamics, physical activities conversations, according to the aspects put by the users and / or reality as more relevant and that interfere, directly or indirectly, in the treatment process: suicide, depression, sexually transmitted infections etc. In this way, subjectivity, personal and social relations were strengthened, increasing the autonomy of the subjects, allowing them to debate, reflect and build relevant knowledge for the maintenance of their own well-being throughout the course of life, in order to promote health. Conclusion: It was understood, then, that the actions undertaken allowed, on the one hand, the construction of conscious agents in the development of competences in order to improve their quality of life, and on the other, their self-perception as a subject of law.

Keywords: Health Promotion; Substance-Related Disorders; Quality of life.

RESUMEN

Objetivo: describir las actividades de educación en salud realizadas con individuos en proceso de rehabilitación química, enfatizando la relevancia de la promoción de la salud en la construcción del sujeto activo. Método: se trata de un relato de las experiencias vivenciadas por el Proyecto de Extensión "Promoción de la Salud de Dependientes Químicos" durante el período de 2016 a 2017; articulado a la investigación bibliográfica, recurriendo a autores que parten de la concepción ampliada de salud; y la investigación documental, con el análisis de la Política Nacional de Promoción de la Salud y de datos de investigaciones realizadas por algunas instituciones. **Resultados:** se desarrollaron acciones, a través de talleres, dinámicas, actividades físicas y rueda de conversaciones, según los aspectos colocados por los usuarios y / o la realidad como más relevantes y que interfieren directa o indirectamente en el proceso de tratamiento: suicidio, depresión, infecciones de transmisión sexual, etc. Siendo así, se fortalecía la subjetividad, las relaciones personales y sociales, aumentando la autonomía de los sujetos, permitiéndoles debatir, reflexionar y construir conocimientos relevantes para el mantenimiento del propio bienestar a lo largo del curso de la vida, de modo que promover la salud. **Conclusión:** Se comprendió entonces que las acciones emprendidas permitieron, por un lado, la construcción de agentes conscientes en el desarrollo de competencias a fin de mejorar su calidad de vida, y por otro su autopercepción como sujeto de derecho.

Palabras-clave: Promoción de la Salud; Trastornos Relacionados con Sustancias; Calidad de vida.

INTRODUCTION

With the advent of the 1980s, health promotion has gained prominence in the field of public health, and its concept has been officially drafted by the World

Health Organization (WHO), which has stated that the term involves the population as a whole in the context of their daily lives, relating to general aspects of the community, rather than focusing groups at risk for specific diseases. Thus, health promotion encompasses policies, programs, and activities guided by the following principles: expanded health design; intersectoriality; empowerment; social participation; equity; multi-strategy actions sustainability.1

Under such a focus, the National Health Promotion Policy (2014) would define health promotion as "a set of strategies and ways of producing health ... aiming at equity and quality of life, reducing vulnerabilities and risks to health from social, economic, political, cultural and environmental determinants".²

Together, the aforementioned document highlights the importance of integrality in the promotion of health, respecting the singularities of the subjects, based on the assumption that the health-disease process goes beyond individual will, being also conditioned and determined by the context in which the subjects are inserted. In addition, it addresses, as one of the priority themes, the use of alcohol and other drugs (including educational, legislative, economic, environmental, cultural and social) and values complementary practices.²

The framework of chemical dependency as a priority theme does not occur in vain, as the use of psychoactive substances goes beyond all social, emotional, political and national borders, causing concern to the whole society. Worldwide, an estimated 250 million people between the ages of 15 and 64 have used at least some type of drug in 2014 - of which 29 million have some substancerelated disorder.³ In the particularity of Alagoas, according to data released by the Alagoas portal Agency, in the first quarter of 2016, Rede Acolhe recorded a 38.7% increase in the number of chemical dependents hosted in the State.4

Already in a survey to capture the expenditures of the Unified Health System (UHS) in the treatment performed with chemical dependents, carried out by the Ministry of Health and published by the website Hoje em Dia (2017), it was recorded that, in 2014, 62,229 thousand users and disbursed R\$ 950.9 million: R\$ 798.3 million for hospital admissions and outpatient services and R\$ 152.58 million for programs for the prevention and treatment of diseases that may be contracted due to the use of illicit substances, such as: sexually transmitted infections (STIs); malnutrition; brain compromise; cirrhosis and liver cancer; behavioral disorders, etc.⁵

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Due to the expansion of the use of psychoactive substances, associated problems and conceptual advances, chemical dependency has become a serious public health problem classified as psychiatric disorders, being considered: a chronic progressive disease aggravates with passing of time), primary (capable of generating other diseases) and fatal, so that it must be treated and controlled, simultaneously, as a disease and as a social problem.⁶⁻⁷ For this, it is imperative to overcome the reductionist conception of the disease to its biological aspect, which annihilates the subjectivity of the subject in the treatment process, as well as the need to reduce the hospitalization and the aggravations resulting from the use of psychoactive substances.

Within this perspective, the promotion of health as a strategy to produce health through health education becomes essential, transmitting to the individual information that allows him to reflect, evaluate and transform aspects that are related, directly or indirectly, to drug consumption , that is, with a view to the construction of the active subject in search of quality of life.

The Chemical Dependent Health Promotion Extension Project (PSDQ), which, far from replacing the responsibilities of the State, emerges, as a response to the expansion of the number of chemical dependents, on the one hand as an extension modality capable of enriching the pedagogical process through an academic formation articulated to the demands of society and, on the other hand, develops health education actions.

Therefore, some activities developed between 2016-2017 will be reported here, which demonstrate the importance of the Extension Project in question in the context of chemical dependence, in the construction of the active subject, by instrumentalizing it with information and assisting in its self-perception as a direct subject - a concept that relates to the dignity of the human person, which is opposed to the objectification of the subject, protagonist of his life, as well as the health-disease process.

METHOD

This is an experience report based, theoretically, by documentary research and bibliographical research. Thus, the experience to be reported refers to the actions carried out by the Extension Project for the Promotion of Health of Chemical Dependents, which acts as a target audience for men and women in

the process of chemical rehabilitation, attended respectively by the House Servant Sufferer and House Bethany. Both are constituted as therapeutic communities that attend, respectively, about 60 and 20 (??) subjects in the process of chemical rehabilitation (young, adult and elderly), who are in a context of vulnerability, with a committed or unrelated family bond due to the use of psychoactive substances.8

Therefore, aiming at a comprehensive approach to the individual and understanding the chemical dependency as a multifactorial disease, the Extension Project Team is organized in an interdisciplinary way with students, teachers, professionals and technicians from several areas, among them: Social Work, Psychology, Medicine, Dentistry, Occupational Therapy, etc., and the recruitment of new members occurs every six months.

The actions undertaken are systematically organized and executed once a week, on Saturdays, in the morning, and are focused on health education, defined by the Ministry of Health, as: educational process of building knowledge in health that aims to contribute to increase the autonomy of people in their care in order to achieve health care according to their needs.9

The process of building knowledge does not occur unilaterally, but in a shared way, where the academics bring a systematized knowledge, which will be confronted with what already exists in the subjects, demystifying myths and valuing existing knowledge, that is, "there is no pre-established program of contents to be taught; however, people teach each other, they measure themselves in group acts of knowledge". 10 At the same time, to the academic, a knowledge of the practical reality is provided, which in itself the academic environment would not be possible, thus becoming evident the importance of extensionist practices.

RESULTS AND DISCUSSION

Based on the assumption that it is necessary to know the reality to intervene in a qualified manner, a further cycle of construction of the Extension Project for the Promotion of Health of Chemical Dependents was started, applying a socioeconomic questionnaire, which included questions that also related to the process of treatment. The application of such instrument allowed

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the understanding of the singularities immersed in the totality of the subjects attended and guided the subsequent actions.

In view of this, the activities to be developed were structured according to the aspects posed by the users and / or reality as more conspicuous in the treatment process and that are able to interfere in the health-disease process, in order to contribute to the strengthening of the subjectivity, as well as the quality of life understood here according to the World Health Organization as a concept that reflects the individuals' perception that their needs are being met or that they are being denied opportunities to achieve happiness and self- regardless of their state of physical health or social and economic conditions.¹¹

The first action developed consisted of a workshop entitled Let's talk about alcoholism?, considering that, being a legalized substance and the most consumed in the world, has a great potential for physical and psychological dependence, ¹² that is , dependence due to alcohol, allied or not to other substances, is more common. Thus, a video was used to explain the consequences of the use of alcohol in the body and a report with reports of cases of drug addicts in rehabilitation, as well as to retrieve the data obtained through the previously applied questionnaires, focusing on the reasons reported on motivation for the start of drug use. This action aimed to awaken them in relation to the devastating effects of chemical dependence on the organism as well as socially.

The regular practice of physical exercise was also inserted, gradually, in the daily of the welcome, in a planned and structured way, according to the physical needs and conditions presented. Therefore, the evaluation of physical conditioning was initially performed with data collection, such as: Body Mass Index (BMI); Blood Pressure (BP); Heart Rate (HR); Waist Hip Ratio (WHR), etc. Based on these data, functional circuits were structured to aid in the release of neurotrophic substances, giving a sensation of pleasure and well-being, bringing contributions to the control of stress and anxiety, besides enabling sociability and improving quality and quantity of sleep.¹³

In one of the following actions, we used an artistic-based workshop, with the construction of cords, as a form of communication capable of promoting the rescue of life stories and expression of feelings, self-knowledge and autonomy of the subjects. Thus, the workshop "rhyming life stories in cordel" aimed to link the subject to the broader context in which the representations that sustain and

organize social life are produced, that is, enabling the identification of aspects of users' lives as: low condition socioeconomic; childhood traumas; motivating factor of the search for rehabilitation and drug use; unstructured family relationships, etc.

It was based on the understanding that suicide is a complex and universal phenomenon, representing a serious public health problem in the world, ¹⁶ and that the use of psychoactive substances, especially alcohol, can increase and increase the probability of suicide attempts and even suicide itself, ¹⁷ making it necessary to develop strategies to promote the quality of life and prevent harm to health for its prevention. ¹⁶ Therefore, in September, a month of suicide prevention, an intervention was carried out with the purpose of promoting self-knowledge and awakening the subjects to perceive and enjoy the small things of life through the senses. Thus, through the exploration of the five senses, the users were led to contemplate a diversity of smells, tastes and textures, making them reflect on the perception of practices that contribute to a better quality of life, from the previous counterpoint experienced in the period of substance abuse, in which the use of psycho-actives represented the emotional balance.

Still on this day, based on a risk assessment for suicide, ¹⁸ was carried out the survey of possible users with depressive symptoms, at which time it was possible to verify the presence of few users with symptoms of depression. The activity was concluded with a talk round about everything that was done and with positive and constructive feedback from users in relation to everything that was approached and experienced.

In the month of fighting against violence against women (November) and starting from the provisions of article 8, item V of the Law Maria da Penha (law 11.340 / 2006), there was an educational activity and prevention of domestic and family violence against women, men and women.¹⁹ Thus, those present listed what they considered to be violence, in order to construct a panorama of the already existing concept, and then the members of the project erased some erroneous views through the exposition carried out by guest of the field of Law, which brought more comprehensive aspects and legal devices, removing existing doubts.

Regarding the approach, it is worth mentioning that, with the male audience, this was differentiated, focusing more on respect for the other as a

way not to blame them prematurely; already with women, focused on the sense of empowerment, enabling the knowledge of guaranteed rights.

In one of the actions, a conversation was held on Sexually Transmitted Infections (STIs): contagion, treatment and prevention, where the types of STIs were addressed and highlighted data capable of evidencing the high rate of contagion, considering that studies show a greater risk and vulnerability to STIs in subjects dependent on psychoactive substances, ²⁰⁻¹ becoming relevant the development of interventions that contribute to their prevention.

As a way to give back to society and raise fundamental debates for society in general, the first and second "Cycle of treatment of chemical dependency challenges and perspectives" were held respectively in 2016 and 2017, which included the academic community and others interested in the subject: professionals, students and other interested parties.

At that moment, the space was offered so that the subjects in the process of rehabilitation and target of the extension project actions shared their stories and that professionals, with studies in the area, stimulated the debate on relevant themes, such as: the double stigmatization of chemical dependent woman; the panorama of chemical dependence in Alagoas; public policies, etc.

It is noted that the intervention, through health education, developed by the extension project, extrapolates the conception of health related only to the biological aspect, being in line with what is put in the National Health Policy (2014), which brings as one of the strategies to carry out actions of health promotion, the "incentive to the permanent attitude of learning sustained in pedagogical processes problematizing, dialogic, liberating, emancipatory and critical".2 The development of actions that are related to the need to improve the quality of life and the prevention of health problems of the subjects involved.

CONCLUSION

It is understood, then, that the activities developed by the Extension Project to Promote the Health of Chemical Dependents, through health education actions, promote improvements in the treatment itself, in terms of promotion and prevention of drug use, considering the individual in its entirety. This fact is evident with the expressive participation and interaction of the subjects who received access to relevant information about the direct and indirect determinants of their health, opening up ways to improve the quality of life,

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optimizing health opportunities, this is, enabling them to grasp their potential for physical, social and mental well-being and participation in life in society.

In view of this, in the middle of the first half of 2018, the project changed its nomenclature, becoming Multidisciplinary Activity of Action and Reflection: Invisible Citizens (AMAR: CI), encompassing other locus of action, as well as broadening the target audience with children, in order to make prevention feasible and placing, as imperative, the need for the construction of training paths for the team to intervene in a more qualified way, considering the imperative of the development of positive actions in the face of chemical dependence in the State.

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