

**COMMUNITY-BASED PARTICIPATORY RESEARCH: IDENTIFYING RISK FACTORS FOR DRUG USE****PESQUISA PARTICIPATIVA BASEADA NA COMUNIDADE: IDENTIFICAÇÃO DE FATORES DE RISCO PELO USO DE DROGAS**

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**ABSTRACT:** The objective was to identify risk factors related to drug use in the community from the perspective of the Community Advisory Committee. This was a community-based participatory research conducted with 23 community representatives from a municipality in the metropolitan region of Goiânia. Data collection employed talking maps, participant observation, field diaries, brainstorming sessions, and the GUT matrix, and the data were analyzed using thematic content analysis. The identified risk factors included the lack of identification of leisure and cultural opportunities, lack of awareness of existing services, insufficient integration among public, philanthropic, and private services, difficulties in dialogue with public security services, shortage of school places for students in local schools, fear associated with the only local high school, and insufficient professional training regarding alcohol and other drugs. It is concluded that the study broadened the understanding of community-level risk factors associated with drug use.

**KEYWORDS:** Risk Factors. Qualitative Research. Community-Based Participatory Research. Community Participation. Drug Users.

**RESUMO:** O objetivo foi identificar fatores de risco relacionados ao uso de drogas na comunidade na perspectiva do Comitê de Assessoria Comunitária. Pesquisa participativa baseada na comunidade com 23 representantes da comunidade de um município da região metropolitana de Goiânia. Para a coleta de dados foram utilizados: mapas falantes; observação participante; diário de campo; tempestade de ideias; matriz GUT. Os dados foram submetidos à análise de conteúdo temática. Os fatores de risco foram: falta de identificação das oportunidades de lazer e cultura; falta de reconhecimento dos serviços existentes; falta de integração entre os serviços públicos, filantrópicos e privados; dificuldade de diálogo com os serviços de segurança pública; falta de vagas para os alunos nas escolas locais; a única escola de ensino médio do bairro é temida; falta de formação dos profissionais sobre álcool e outras drogas. Conclui-se que o estudo ampliou a compreensão dos fatores de risco relacionados ao uso de drogas.

**PALAVRAS-CHAVE:** Fatores de Risco. Pesquisa Qualitativa. Pesquisa Participativa Baseada na Comunidade. Participação da Comunidade. Usuários de Drogas.

## INTRODUCTION

The consumption of alcohol and other drugs is considered a social problem that has been the subject of concern among political leaders and the public health sector, requiring health promotion actions to enhance protective factors and reduce risk factors.<sup>1</sup> In addition, although it is not a recent topic of discussion, the phenomenon of drugs is still considered taboo in society, as it involves various areas and alters family relationships, which has repercussions on how people who use these substances are welcomed, as well as on how assistance is provided.<sup>2</sup>

Among the consequences of drug abuse, short- and long-term damage to the nervous system stands out.<sup>3</sup> In addition, a literature review investigating the association between alcohol and other substance abuse and suicidal behavior revealed that people who use these substances constitute a subgroup at risk for suicide, which requires mental health promotion actions.<sup>4</sup>

The use, abuse, or dependence on alcohol and other drugs can affect the people of a community at any stage of the life cycle. During adolescence, scientific evidence indicates that drug use can cause neurobiological and behavioral effects, leading to lasting changes in behavior, emotions, and cognition.<sup>5</sup>

Concerning adults, a cross-sectional, descriptive, quantitative study that assessed the use of alcohol and other psychoactive substances in 396 residents over the age of 18 in an urban area of a municipality in the Northeast Region of Brazil revealed that younger adult men consume the most alcohol and that this consumption declines with age. In addition, the study found that 129 participants (35.8%) drank alcohol and that 55 (15.3%) used alcohol and other psychoactive substances.<sup>6</sup>

As for the elderly, a descriptive, analytical, observational, retrospective study based on secondary data investigated the use of licit and illicit drugs, duration of use, associations between these drugs and mental disorders, and the sociodemographic profile of elderly people attending Alcohol and Drug Psychosocial Care Centers (CAPSad) in a municipality in Rio de Janeiro, Brazil, and showed a higher percentage among men (76.62%) aged between 60 and 73 years (87.4%), and that the most commonly used drugs were alcohol, marijuana, crack, and cocaine, signaling the importance of early identification of this risk group.<sup>7</sup>

Furthermore, scientific evidence indicates that many people who abuse drugs seek pleasure or escape from their reality. Thus, imbalances in the family system, social ties, or professional life are other factors that can intensify the frequency of use, ultimately damaging family relationships, friendships, and societal life.<sup>1</sup> Therefore, knowing the risk factors for early use, abuse, and dependence on drugs in society is essential for the formulation of interventions and public policies that address and minimize this problem.

Considering the above, this study seeks to address the following guiding question: "What problems have been identified, and what are the risk factors related to drug use in the perceptions of community members themselves?" Therefore, the objective was to identify risk factors related to drug use in the community from the perspective of the Community Advisory Committee.

## METHODOLOGY

This is a participatory community-based participatory research (CBPR) study. In this type of study, the partnership between researchers and community representatives is essential to achieve both the research objectives and the community's interests.<sup>8</sup> The research report was written under the recommendations of the *Consolidated Criteria for Reporting Qualitative Research* (COREQ) guide.<sup>9</sup>

CBPR comprises seven cyclical stages, which are: 1. Formation of partnerships in CBPR; 2. Determination of the community's strengths and dynamics; 3. Identification of priority public health problems; 4. Creation and conduct of ecological and/or political research intervention; 5. Feedback and interpretation of research results; 6. Dissemination and transformation of research results; 7. Maintenance, sustainability, and evaluation of CBPR partnerships<sup>10</sup>

The findings of this study are the result of the third stage, "Identification of priority public health issues," which occurred cyclically as issues emerged during the meetings.

The research setting was a neighborhood in a municipality in the metropolitan region of Goiânia, Brazil, where 23 representatives from the following services and institutions were involved in forming the Community Advisory Committee (CAC): three representatives working in mental health, two working in social assistance, two representatives from the municipal guard, two representatives from the field of education, six representatives from community leaders, four representatives from the Family Health Strategy (FHS), and four academics, selected using the Snowball technique,<sup>11</sup> in which people mobilize to find other participants for the study according to the stipulated eligibility criteria.

The study included individuals who were over 18 years of age, had some form of community involvement in the area where the research was conducted, and demonstrated an interest and availability to participate in the research proposal. Those who missed more than 50% of the meetings and activities planned for the research were excluded.

Data collection took place between June 2017 and July 2018, on a cyclical basis, from meetings to establish the CAC to meetings to prioritize problems and outline collective actions.

The following resources and strategies were used to construct the data: talking maps (from the Regional Reference Center (RRC) on Alcohol and Other Drugs, which was a partnership between the university and the municipality where this study was conducted, and the principal investigator, who served as one of the RRC coordinators, had access to this material; in addition, among the CAC members were two community health agents who were part of this construction because they had enrolled in the RRC course. At that time, the CAC members were invited to revisit, validate, and/or reevaluate the talking maps); brainstorming;<sup>12</sup> participant observation;<sup>13</sup> field notes from the research team, and the use of the Gravity/Urgency/Trend (GUT) matrix, which is a tool that selects and prioritizes problems hierarchically by analyzing their severity, urgency, and trend.<sup>14</sup>

The RRC is a key local and regional training strategy for drug policies.<sup>15</sup> The talking map technique is a health research methodology that uses graphic representation to understand the territory in which the community lives. Based on drawings, themes from everyday life can be explored.<sup>16</sup>

The brainstorming technique encourages people's creativity concerning a topic, addressing it through questions that allow everyone to express their opinions and prior knowledge. The words recorded are then considered the starting point for discussions and reflections.<sup>12</sup>

The main strategy for identifying problems was the RRC's use of talking maps. Some CAC members were able to locate their previous work, and new members were able to contribute new ideas based on this material. The brainstorming technique was then used to identify the issues that the group would work on, and the ideas expressed were prioritized using the GUT matrix, recorded on cards, and displayed on the whiteboard.

It is worth noting that the problem identification process was cyclical, as recommended by the CBPR. During the meetings, participants identified the main problems related to risk factors for drug use in the community. All sessions were recorded in audio format, photographed, and noted in the researchers' field diary.

The data were subjected to thematic content analysis, following the stages of pre-analysis, material exploration, and result treatment, including inference and interpretation.<sup>17</sup> Initially, the material to be analyzed was organized—the talking maps, brainstorming cards, transcripts of the meetings, and field diary notes—and its content was read thoroughly to construct the initial hypotheses. Next, coding was performed by identifying the units of record and context, which were aggregated by similarity, enabling the construction of meaning clusters. The final stage involved constructing the analytical categories.

Regarding ethical procedures, the study design was submitted to and approved by the Research Ethics Committee of the Pontifical Catholic University of Goiás, with Opinion No. 2,134,247. All participants signed the Free and Informed Consent Form (FICF).

Furthermore, the instructions of Resolution No. 466/2012<sup>18</sup> and Resolution No. 510/2016<sup>19</sup> were followed to ensure the confidentiality of the participants, who were identified as follows: CAC representatives were identified with the letter “C” and numbered according to the sequence of speech; the letter “O” was assigned to field observation data, with numbering corresponding to the observation.

## RESULTS

### SOCIODEMOGRAPHIC CHARACTERIZATION OF THE COMMUNITY ADVISORY COMMITTEE

The CAC was composed of 23 community representatives: three people working in mental health, two working in social assistance, two representatives from the municipal guard, two representatives from the education sector, six community leaders, four representatives from the Family Health Strategy (FHS), and four academics.

### CONTENT ANALYSIS

From the content analysis process, the following categories were constructed: *“Identifying and prioritizing community problems: potentialities and challenges”* and *“Risk factors related to drug use in the community”*, which demonstrate the advantages and difficulties faced in mobilizing CAC representatives to reflect on the obstacles they encounter in their daily lives related to drug use, and highlight the risk factors associated with drug use in the community.

#### CATEGORY 1: IDENTIFYING AND PRIORITIZING COMMUNITY PROBLEMS: POTENTIAL AND CHALLENGES

The CAC members' appreciation of the formulation and recording of the problems faced—through the involvement and collective participation of community representatives—was highlighted by participants as an essential part of the research, mainly because of the strategies used:

*“Wow, it's funny that when we put it down on paper like this, drawing, it seems like we remember things, right...” (C10)*

The revival of the group's production, carried out during the RRC, was also highlighted by one of the participants as something relevant that added value to the new people who had not participated in that training moment, demonstrating that the activity developed was not forgotten:

*"How cool, those were the ones we made at the CRR! This is a sign that things are not just thrown away. Look... they kept it, and now, years later, we can bring our ideas together again, and now with new people. However, what we did has not been forgotten. That is fantastic..." (C8)*

Despite the power of collective construction of all stages of the study with CAC members, as recommended by the CBPR, several challenges may emerge, requiring the research team to revisit and reframe feelings and emotions, as well as the theoretical basis for the group process and understanding of the researcher's role, as illustrated in the field observation note:

*"It was a day of mixed feelings for me. Even though I have been in contact with the group for some time and was aware of the reality of many of these problems, being chosen as the first brings personal and institutional challenges, makes me rethink the objectives of the research, and invites me to replan mentally." (O12)*

## CATEGORY 2: RISK FACTORS RELATED TO DRUG USE IN THE LIGHT OF THE COMMUNITY

This category presents the problems identified by CAC members, who explain the risk factors for drug use in their communities. These factors involve aspects related to network care, access to education, episodes of violence in the school environment, and lack of training for professionals about drugs (Chart 1).

**Chart 1.** Problems identified that reflect the risk factors for drug use in the community. Aparecida de Goiânia, Goiás, Brazil, 2017-2018.

| Risk Factor/Problem                                                                                                 | Context unit                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
|---------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Lack of identification of leisure and cultural opportunities in the neighborhood.                                   | <i>"Here we realize that people don't have much to do, it's easy to see a father sitting with his son on the doorstep with a little card in his hand." (C4)</i>                                                                                                                                                                                                                                                                                                                                                                                           |
| Lack of recognition by the community of the services available in the neighborhood.                                 | <i>"There's a lot here, you know, there are people who make art in the street, there are people who even organize soirees. But the people are disunited, they even think that what's free is no good, and sometimes they don't even know about it." (C10)</i>                                                                                                                                                                                                                                                                                             |
| Lack of integration between public, philanthropic, and private services in the community.                           | <i>"The services don't talk to each other, they do things separately, and as a result, we see things happening twice and without precision." (C2)</i>                                                                                                                                                                                                                                                                                                                                                                                                     |
| Difficulty in opening and closing the dialog with the public security services in the municipality.                 | <i>"One day the homeless man told us that the police told him he shouldn't be there, and he'd gone to buy a toothbrush at the supermarket and was told to get a move on, he said it was before the RRC that the municipal guards took part in, and that after that they now respect it more and understand that it's their place too. But that's not all of them, you know, most of them already think that everyone is a bum and wants to steal and often don't even listen to us who are also service workers and who attend to these users". (C15)</i> |
| Lack of places for community pupils in local schools.                                                               | <i>"Sometimes there's a vacancy, but then we see people who aren't even from the neighborhood getting it, because it's an outstanding comprehensive school, and the teachers here are very well prepared, so everyone wants it, but not always those who need it get it." (C7)</i>                                                                                                                                                                                                                                                                        |
| The only high school in the neighborhood is feared because it is considered violent and a risk factor for drug use. | <i>"Everyone's afraid when the children leave the municipal school, which is great, and go to the state school, the news is that the gangs are breeding there." (C18)</i><br><br><i>"It was so nice to have the opportunity to get to know this school that we had feared for years and to see that it's nothing like that, in fact it's something that used to be..."</i>                                                                                                                                                                                |

| Risk Factor/Problem                                                               | Context unit                                                                                                                                                                                                                                                                                                             |
|-----------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|                                                                                   | <i>Today, it's a school that welcomes many special children and has great success. And this was only possible because of this project, what a beautiful thing! Now we won't talk about it anymore, and we realize that the problem isn't the school, but the stage this child is at and the changes it brings". (C6)</i> |
| Lack of training for professionals in the concepts of alcohol and other drug use. | <i>"We know very little, and it's difficult because everyone says something different. We grew up hearing that anyone who smokes marijuana is a thug. And that all the cracked teeth fall out, but here many have been using them for years and have all their teeth". (C13)</i>                                         |

During the process, the group realized that it would not be possible to meet all the demands that had been raised. Thus, the GUT matrix was used to help identify the priority problem (Chart 2).

**Chart 2.** Prioritization of problems based on the Severity/Urgency/Trend (GUT) matrix listed by the Community Advisory Committee, Aparecida de Goiânia, GO, Brazil, 2017-2018.

| PROBLEMS                                                                                                               | G | U | T | GxUxT | Priority |
|------------------------------------------------------------------------------------------------------------------------|---|---|---|-------|----------|
| 1. Lack of identification of leisure and cultural opportunities in the neighborhood.                                   | 3 | 3 | 3 | 27    | 5°       |
| 2. Lack of recognition by the community of the services available in the neighborhood.                                 | 5 | 4 | 4 | 80    | 3°       |
| 3. Lack of integration between public, philanthropic, and private services in the community.                           | 5 | 5 | 4 | 100   | 2°       |
| 4. Difficulty in opening and closing the dialog between the public security services in the municipality.              | 4 | 5 | 5 | 100   | 2°       |
| 5. Lack of places for community pupils in local schools.                                                               | 5 | 4 | 5 | 100   | 2°       |
| 6. The only high school in the neighborhood is feared because it is considered violent and a risk factor for drug use. | 5 | 5 | 5 | 125   | 1°       |
| 7. Lack of training for professionals in the concepts of alcohol and other drug use.                                   | 4 | 3 | 3 | 36    | 4°       |

## DISCUSSION

The category *"Identifying and prioritizing community problems: potentialities and challenges"* highlighted that CAC members appreciate the strategies employed by the research team to identify risk factors related to drug abuse and dependence in the community, such as the use of drawings and paper records. Thus, the use of tools and strategies other than conventional ones to stimulate reflective processes and questioning regarding the topic of drugs is significant to enable meaningful learning.

A survey conducted with CAPSad professionals in central Brazil, which used workshops based on the Experiential Learning Cycle (ELC) framework to equip teams with group technology skills, showed that the strategies adopted, such as theatrical improvisation, memory games, and conceptual maps, were essential for Permanent Health Education (PHE), raising participants' awareness of the need to improve their practice in caring for drug users.<sup>20</sup>

Another positive point raised by participants was the recovery of the product of the group that participated in the RRC course, which contributed to identifying community problems. According to researchers,<sup>21</sup> for any group to achieve its goals, it is subject to several factors that may or may not contribute to this process. However, although group work is a part of people's daily lives, the determinants that influence the success or failure of groups are not considered.

Despite the richness of the CBPR proposal, the researcher's constant involvement with the community and the problems it presents can touch and mobilize the internal resources of those facilitating the research. Researchers face countless challenges during the operationalization of their studies. A study that identified the main challenges of scientific and technological research in Brazil, analyzing latent factors according to the perception of researchers working in Brazilian public universities, pointed out that the lack of interaction among researchers and with the demands of society are some of the barriers, as well as the excessive value placed on the production of scientific articles, which are some of the challenges faced.<sup>22</sup>

The category "Risk factors for drug use in the community" clarified that the CAC indicated that the lack of identified leisure and cultural opportunities in the neighborhood is a risk factor related to drug use. An emancipatory action research project, developed in ten workshops with 11 participants from mental health services, which understood the daily representations of mental health workers on leisure, drugs, and education, pointed out that the conception of users and education in this specific context was found to be laden with conservative and prohibitionist ideas. Furthermore, therapeutic leisure activities carried out in the services were associated with the control of users, which requires changes in the practice of educational leisure workshops that truly promote emancipation.<sup>23</sup>

Another investigation that examined the appropriation of public spaces for community leisure found that people primarily use these spaces for physical activities, gathering with family and friends, and eating at kiosks and food stalls. The study also pointed out that, even with the population occupying the public spaces in the territory where they live, there is a lack of activities that encourage regular visits to these environments,<sup>24</sup> which demonstrates the importance of raising community awareness about the effects of leisure on physical and mental health, as well as on quality of life.

The lack of community awareness of existing services in the neighborhood was also raised as a risk factor by participants, which hinders the consolidation of networked care. A study that evaluated the organization and access to the Health Care Network (HCN) in a health region from the perspective of female users found that women sought Primary Health Care (PHC) services to regulate care; however, they reported difficulties in accessing medical consultations and specialized care, especially in rural areas,<sup>25</sup> which corroborates the findings of this study.

The CAC pointed out that the lack of integration between public, philanthropic, and private services in the community may be a risk factor for drug use by people living in that territory. Research that followed an automotive industry worker whose job ended up causing illness due to inhalation of chemical substances—from the perspective of network care by primary care services, the Psychosocial Care Network (PCN), and the Occupational Health Service—pointed out that organic issues, which may be associated with the development of mental disorders, were neglected by various services, which requires a clinic contextualized with work activity for effective coordination between services.<sup>26</sup>

The difficulty of opening and closing dialogue with public security services in the municipality was also pointed out as a risk factor by CAC members. A bibliographic and documentary study analyzing the reforms proposed in the field of public security over the last 30 years has indicated a lack of continuity necessary for the implementation of public security policies, which leads to deadlocks in crime prevention and reduction. Additionally, there is limited participation and involvement of society in the development of the analyzed plans.<sup>27</sup>

The group identified the lack of places for community students in local schools as a risk factor that can influence drug use. It should be noted that the challenge of accessibility is not solved solely by the issue of available places or the role of teachers. Students must be welcomed into school and remain in the school environment for the period necessary to complete their education.<sup>28</sup>

The group pointed out that the only high school in the neighborhood is feared because it is considered violent and a risk factor for drug use. However, during the meetings promoted by research, this belief rooted in the community was deconstructed, as the school currently experiences a different reality, one that is more peaceful and welcoming. A quantitative, exploratory, and descriptive study conducted with 933 students from four high schools in a municipality in northern Brazil found that drug use is a reality in the lives of this group, with the most used substances being alcohol, marijuana, cigarettes, inhalants, and cocaine/crack.<sup>29</sup>

A systematic review of the literature on violence in Brazilian public schools showed that most studies were concentrated in the Northeast, South, and Southeast regions of Brazil, since this is a study conducted in Brazil, showing that physical and verbal violence is a phenomenon that is present in the school environment and harms interpersonal relationships.<sup>30</sup>

CAC members stated that the lack of training for professionals on the concepts of alcohol and other drug use is a worrying aspect for the prevention and care of psychoactive substance users in the community. This reality is shared by professionals working in Psychosocial Care Centers (CAPS), as revealed by a study conducted in a municipality in central Brazil, in which members of the multidisciplinary team highlighted the importance and need for EPS concerning the effects of drugs on the body.<sup>31</sup>

As practical implications, the study demonstrates to the scientific community that the use of CBPR is a powerful method, capable of mobilizing the population both in identifying the problems they face in their territory and the collective and participatory construction, together with the research team, of possible solutions to the issues raised as priorities at that moment, such as the topic of alcohol and other drugs, which was the objective of this study.

## CONCLUSION

The study broadened the understanding of risk factors related to drug use from the perspective of community representatives, such as: lack of awareness of leisure and cultural opportunities in the neighborhood; lack of recognition by the community of existing services in the neighborhood; lack of integration between public, philanthropic, and private services in the community; difficulty in establishing open and close dialogue with public security services in the municipality; lack of places for students from the community in local schools; the only high school in the neighborhood is feared because it is considered violent and a risk factor for drug use; lack of training for professionals on the concepts of alcohol and other drug use.

Using the GUT matrix, the group identified violence in schools as the priority issue for interventions.

During the research, several limitations emerged, including the limited involvement of managers, which hindered the participation of their employees during the study phases, and the difficulty some participants experienced in using virtual media or a lack of access to this technology.

Therefore, further studies in different contexts are recommended to address the other challenges faced by various communities, as each group experiences a distinct reality.

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