

The Impact of Treatment on the Social Reintegration of Adolescent Drug Users: Systematic Review

Santos JAT^{1*}, Camargo EB Jr² and Domingos-Souza G³

¹Professor, Enfermagem Psiquiátrica, Escola de Enfermagem de Ribeirão Preto-Universidade de São Paulo (EERP-USP), São Paulo, Brazil

²Professor, Universidade de Rio Verde (UniRV), Brazil

³Postdoctoral Fellow, Department of Biomedical Sciences, Department of Medical Pharmacology and Physiology, Dalton Cardiovascular Research Center, University of Missouri, Missouri, USA

Abstract

Objective: investigate on the scientific literature the impact of treatment on social rehabilitation of adolescents. Methods: Literature review, in electronic databases such as the Virtual Health Library and PubMed, using the combination of descriptors 'Adolescents' and 'Treatment Outcome' and 'Illegal Drugs', combined alternately with 'Family', 'Education', 'Violence' and 'Adolescent Health'.

Results: Results was found 10 articles published in national and international journals, mostly conducted in the United States and in English language. Study results showed that after treatment admission, unless differences in therapeutic interventions, young people have significant improvements in aspects of family, employment contract, return to school, reduced environmental risks, social inclusion and reduction of involvement in illegal acts. Conclusion: The results of this study emphasize the importance of the chronic nature of the disorder, and the need for enhancement of continuous care services, in order to maintain abstinence.

Keywords: Review; Adolescent; Treatment outcome; Street drugs

Introduction

The current scenario of the circulation of drugs of abuse remains to reaffirm the global magnitude of the phenomenon. World statistics show that in the year 2011, between 167 and 315 million people aged 15-64 consumed some type of illicit substance [1].

Due the magnitude of the damages caused by drug use, the user can not be seen as a generator of social problems, but rather as part of a context that creates conditions for substance use or favors its maintenance, making it vulnerable the consequences of this interaction [2].

The subgroup of young people is more susceptible to the harmful effects of the substance and risk behaviors arising from use. Among the risk factors for abuse at this stage we can mention the intrinsic curiosity of the youngster, positive attitudes of the family towards drug abuse, group involvement, lack of proactive role of school, drug availability in the community of coexistence and glorification of licit drugs by the media [3].

In this way, treatment programs must incorporate all the multiplicity of factors that may be directly and/or indirectly related to the maintenance of the abuse, in order to recover it in an integral way [4]. The purpose of the present study was to investigate in literature the impact of different treatment modalities, as well as their therapeutic strategies, on the social reintegration of adolescents.

Methods

This is a systematic review of the scientific literature, in the electronic databases VHL (Virtual Health Library) and PubMed, using the association of descriptors 'Adolescent' and 'Result of Treatment' and 'Illicit Drugs', combined with 'Family', 'Education', 'Violence' and 'Adolescent Health'.

For the selection of articles, the following inclusion criteria were considered: original articles, published in full in the last 10 years, in Portuguese, Spanish and English. After evaluation of the titles and abstracts, articles were excluded: not available online, in other samples that did not include adolescents, clinical laboratory studies, descriptive and/or epidemiological studies that did not

OPEN ACCESS

*Correspondence:

Jessica Adrielle Teixeira Santos,
Professor, Enfermagem Psiquiátrica,
Escola de Enfermagem de Ribeirão
Preto-Universidade de São Paulo
(EERP-USP), São Paulo, Brazil.

E-mail: jessicadrielle@yahoo.com.br

Received Date: 05 Apr 2018

Accepted Date: 22 May 2018

Published Date: 28 May 2018

Citation: Santos JAT, Camargo EB Jr, Domingos-Souza G. The Impact of Treatment on the Social Reintegration of Adolescent Drug Users: Systematic Review. *J Dent Forecast.* 2018; 1(2): 1011.

ISSN 2643-7104

Copyright © 2018 Santos JAT. This is an open access article distributed under the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited.

address the treatment for chemical dependence, studies of reflections that did not explore original results for the treatment of chemical dependence and studies that proposed general protocols.

Thus, 10 articles were included in the study. Each article was analyzed individually, following a synoptic script, containing the variables for characterization of the publications (objective and place of study, methodological design, sample characteristics, use drugs, treatment unit, intervention modality, treatment period and evolution of the treatment).

Results and Discussion

Most articles selected have been published in English. Only one of the articles was carried out in Brazil, although it had a version of access in the English language, which allowed the dissemination of knowledge worldwide [5].

As to the design of the studies, all the articles used the longitudinal design. Longitudinal studies are very important, especially in the comprehensive approach to drug abuse treatment, since it allows an expanded view of this process [6].

The samples used in the studies were composed mostly of male and low income individuals, corroborating the world literature on the subject. Most individuals in the studies analyzed maintained a pattern of multiple drug use, including marijuana [7-10], alcohol [7,9-11], cocaine and its derivatives [7,9-11], hallucinogens, stimulants [9,11], opium [12] and heroin [9].

The treatment units described by the articles were hospitals [7,13], therapeutic communities [9,12,14], outpatient clinics [9-11,15,16] and a judicial retention system [8].

As expected, the evolution of the treatment was heterogeneous in the samples of individuals analyzed, through different periods of attention (30 days to three years) combined with proposals for different approaches. Among the modalities of interventions, we identified the motivational interview [8], brief interventions [13,15], psychotherapy [7,9,10], family therapy [9-11,15,16], preventive activities [9,11], evidence-based therapy [10], and pharmacotherapy [7,8,10,12] used alone or in combination, through individual and/or group assistance.

Most studies found a decrease in substance use after initiation of treatment. In general, it can be inferred that the therapeutic modalities in out-of-hospital environments obtained the best results, however it is important to emphasize that such services provided more comprehensive and continuous interventions. The progress of many patients is marked by cycles of recovery, relapse, and repeated treatments, in that sense, hospital admission has limitations, since it treats the acute state, being ineffective in the dynamics of disease chronicity [17].

Some studies have sought to involve the socio-cultural environment of adolescents in intervention strategies, as well as to establish a partnership with the parents and/or main caregiver in the therapeutic project. These studies concluded that an extended approach to therapy favors the reinsertion of the young person and consequently improvements in their quality of life, since it contributes to reduce the stigma before family and friends and decreases the incidence of relapses, since in many cases the use/abuse of substances is inside the home itself [10,14,16].

In addition to the psychosocial treatment modalities, some articles

analyzed used pharmacotherapy to control withdrawal symptoms and/or assist in the recovery process. It should be emphasized that there is no truly effective drug for addiction today because of the heterogeneous condition of the abuse and the different patterns of response to the available treatment substances [18].

In order to occur the psychosocial development of the young, there is a need to stimulate active participation in reciprocal interactions of increasing complexity with people and the convivial environment [19]. In this sense, the insertion in the labor market increases interpersonal relations, helping in the recovery of its social role and strengthening autonomy.

Finally, it is important to highlight the influence of effective public policies on the development of human beings as a guarantee of well-being and quality of life. As discussed in previous studies, the interface between inadequate and disabled Education, Public Safety, Social Assistance, Economy and Health policies finds fertile ground for the occurrence of drug abuse among young people [20].

Conclusion

The results of the studies showed that after admission to treatment, except for differences in therapeutic interventions and treatment periods, the youngsters present significant improvements in family aspects, employment status, return to studies, reduction of environmental risks, social insertion and decreased involvement with infractions.

Far from establishing a single and ideal treatment for the treatment of substance abuse, the results of this study emphasize the importance of the chronic nature of the complaint and the need for the valuation of continuous care services.

References

1. United Nations Office on Drugs and Crime. World drug report 2016. Vienna: United Nations Publication. 2016.
2. Bronfenbrenner U. Environments in developmental perspective: theoretical and operational models. In: Friedman SL, Wacks TD. (Org.) Conceptualization and Assessment of Environment across the life span. Washington DC: American Psychological Association. 1999; 3-30.
3. Schenker M, Minayo MCS. Fatores de risco e de proteção para o uso de drogas na adolescência. *CiencSaúde Colet*. 2005; 10: 707-717.
4. Marinho AM, Braga VAB, Macedo JQ, Alves e Souza AM, Costas AGM, Pinheiro PNC. Prática multiprofissional nos centros de atenção psicossocial de álcool e Outras drogas. *Rev enferm UFPE*. 2012; 6: 1615-1622.
5. Mugnaini R, Jannuzzi PM, Quoniam L. Indicadores bibliométricos da produção científica brasileira: uma análise a partir da base Pascal. *Ci Inf*. 2004; 33: 123-131.
6. Ribeiro M, Laranjeira R. (org.). O tratamento do usuário de crack. Avaliação clínica, psicossocial e neuropsicológica e de risco, terapias psicológicas, farmacoterapia, reabilitação e ambiente de tratamento. São Paulo: Editora Casa Leitura Médica. 2010.
7. Charles A, Jaber-filho JA, Carvalho M, Jullien C, Hoffman A. Predictors of Recovery Following Involuntary Hospitalization of Violent Substance Abuse Patients. *Am J Addict*. 2003; 12: 84-89.
8. Slavet JD, Stein LAR, Colby SM, Barnett NP, Monti PM, Golembeske Jr C, et al. The Marijuana Ladder: Measuring motivation to change marijuana use in incarcerated adolescents. *Drug Alcohol Depend*. 2006; 83: 42-48.
9. Dennis ML, Ives ML, White MK, Muck RD. The Strengthening Communities for Youth (SCY) initiative: a cluster analysis of the services

- received, their correlates and how they are associated with outcomes. *J Psychoactive Drugs*. 2008; 40: 3-16.
10. Halliday-Boykins CA, Schaeffer CM, Henggeler SW, Chapman JE, Cunningham PB, Randall J, et al. Predicting nonresponse to juvenile drug court interventions. *J Subst Abuse Treat*. 2010; 39: 318-328.
11. Sterling S, Weisner C. Chemical Dependency and Psychiatric Services for Adolescents in Private Managed Care: Implications for Outcomes. *Alcohol ClinExp Res*. 2005=2013; 29: 801-809.
12. Polsky D, Glick HA, Yang J, Subramaniam GA, Poole SA, Woody GE. Cost-effectiveness of Extended Buprenorphine-Naloxone Treatment for Opioid-Dependent Youth: Data from a Randomized Trial. *Addiction*. 2010; 105: 1616–1624.
13. Dias AC, Araújo MR, Laranjeira R. Evolução do consumo de crack em coorte com histórico de tratamento. *Rev de Saúde Pública*. 2011; 45: 938-948.
14. Johnson K, Pan Z, Young L, Vanderhoff J, Shamblen S, Browne T, et al. Therapeutic community drug treatment success in Peru: a follow-up outcome study. *Subst Abuse Treat Prev Policy*. 2008; 3: 26.
15. Agius M, Shah S, Ramkisson R, Persaud A, Murphy S, Zaman R. Three year outcomes in an early intervention service for psychosis in a multicultural and multiethnic population. *Psychiatr Danub*. 2008; 20: 494-499.
16. Feaster DJ, Robbins MS, Henderson C, Horigian V, Puccinelli MJA, Burlaw K, et al. Equivalence of Family Functioning and Externalizing in Adolescent Substance Users of Different Race/Ethnicity. *J Subst Abuse Treat*. 2010; 38: 113-124.
17. Dennis M, Scott CK. Managing Addiction as a Chronic Condition. *Addict Sci Clin Pract*. 2007; 4: 45-55.
18. O'Brien CP. Anticraving Medications for Relapse Prevention: A Possible New Class of Psychoactive Medications. *Am J Psychiatry*. 2005; 162: 1423–1431.
19. Bronfenbrenner U. Ecology of the family as a context for human development: research perspectives. *Developmental Psychology*. 1986; 6: 723-742.
20. Silvino MCS, Rosa NM, Santos JAT, Selegim MR, Ballani TSL, Oliveira MLF. Operacionalização de Evento Sentinela para Vigilância do Uso de Drogas de Abuso. *Sau&Transf Soc* 2012; 3: 59-66.