

CONSUMPTION OF ALCOHOL, OTHER DRUGS AND SEXUAL CONDUCTS IN MEN LIVING IN A STREET SITUATION IN GOIÁS

CAROLINA SANTOS GONÇALVES¹, LILA SPADON¹, PATRÍCIA GONÇALVES EVANGELISTA²

ABSTRACT

The homeless population is a heterogeneous population group consisting of people who have in common the guarantee of survival through productive activities on the streets, interrupted or weakened family ties and irregular living. The present study aimed to investigate the social practices of this population regarding sexual behaviors and consumption of alcohol and other drugs. For this sample groups enclosed questionnaires were used. The sampling involved the internal life of the Mission, a philanthropic institution that works in the recovery of people on the streets. Research has shown the existence of two distinct groups, with differences in the type of drug used and the social and sexual behavior. The purpose of this work was to study the relationship between sexual conduct and the consumption of alcohol and other drugs in the population living on the street in Anápolis. For this, we analyzed risk behaviors related to sexually transmitted diseases, specifically sexual activities, the use of alcohol and other drugs in individuals living on the streets in Goiás. The average onset of addiction found in this study was 15.12 years of age, where 32.6% reported having started the addiction due to family factors, such as family members who use or are dependent on alcohol or drugs, use of alcohol in family festivities and family conflicts. The pattern of dependence found was of two distinct groups, the group of alcoholics and the group of crack users, with a history of thefts to buy drugs, involvement with the police and homosexual relations.

KEYWORDS: RISK BEHAVIOR, DRUG ADDICTION, HOMELESS

INTRODUCTION

Homeless population is a heterogeneous population group made up of people who have in common the guarantee of survival through productive activities developed on the streets, broken or weakened family ties and the lack of regular housing reference¹.

The homeless population is one of the most vulnerable regarding the transmission of HIV and other sexually transmitted diseases because it includes high-risk groups formed by prisoners, crack and cocaine users, sex workers, minority groups and people with mental disorders^{2,3}.

Since 2004, the Ministry of Social Development and Fight Against Hunger (MDS) has proposed the debate and includes in its agenda the formulation of public policies aimed specifically at the homeless population. In December 2009, the National Policy for the "homeless population" was instituted and the Intersectorial Committee for Follow-up and Monitoring of this population group was created. One of its policy objectives is to provide broad, simplified and secure access to services and programs that integrate public health, education, social security, so-

cial assistance, housing, security, culture, sports, leisure, work and income policies.

For many years, care for the homeless has been strongly related to non-governmental organizations (NGOs) and to specific government organizations in some municipalities. Missão Vida is a philanthropic institution founded in 1983 that works with homeless people. Today, it has six Screening Centers (CT) spread across Brazil, where inmates receive first care in all areas necessary for their physical, psychological and social recovery. After a period of occupational therapies, they are sent to the next stage: In the "Beggars" Recovery Center, developed in Cocalzinho (GO), the "ex-beggar" continues to participate in occupational therapies, after undergoing medical and dental treatment. At this moment, he is taken to live with other interns, and goes through a learning process that includes the reestablishment of a daily routine, with organization of time and activities focused on work. At the end of this stage, the intern is directed to the Reintegration Center, which is in Anápolis (GO). At this moment, Missão Vida assists them in the search for jobs and for them to resume

1 - Faculdade UniEVANGÉLICA
2 - Doctoral candidate at UFG



ADDRESS

PATRÍCIA GONÇALVES EVANGELISTA
Alameda Emílio Póvoa, 165 - Vila Redenção,
Goiânia - GO, 74845-250
E-mail centrodeestudoshdmi@gmail.com

the link with their families. For this, computing, English and professional courses are given.

In recent years, greater attention has been given to the homeless population, there has been further investigation, with census research, involving and allowing the development of new concepts and applied methodologies, which effectively measure and deepen the knowledge of the social group⁴. However, much research is still needed to better understand these people, their determinants, their needs and what public policies should be involved to alleviate the suffering of these people⁵.

Therefore, the objective of this work is to evaluate risk behaviors related to sexually transmitted diseases, specifically sexual activities, the use of alcohol and other drugs in individuals living on the street in Goiás. To do this, we will try to identify how long the individual has been homeless, know the types of dependency experienced by these residents, register the age of insertion in addiction, know the pattern of alcohol consumption in this specific population, identify the maximum time of abstinence since the beginning of the addiction and identify sexual behavior.

METHODS

The work is a cross-sectional study through a questionnaire. Initially, we focused in bibliographic research, within the subjects of sexually transmitted diseases, alcohol consumption and illegal substances among street people, male sexual practices in this same group of people. Subsequently, a field survey was carried out at Missão Vida, Anápolis and Cocalzinho, Goiás. This field survey was carried out by collecting data from inmates through a questionnaire containing closed questions.

The instrument used was elaborated according to the methodologies of researchers from the Federal University of Goiás for the elaboration of the project "Study of the consumption of alcohol and other drugs in individuals living on the streets in Goiás". The inmates were asked to answer the instrument individually, through interviews, in offices provided by Missão Vida. In other words, the students and teachers involved in this project went to the units of Missão Vida, in the municipality of Anápolis and Cocalzinho, in order to collect the data.

The statistical treatment of the data was carried out using the Statistical Package for Social Sciences SPSS, version 13.0 of 2004. The statistical analysis was carried out through parametric and non-parametric tests. The questionnaires will be kept for five years under the responsibility of the researcher in charge. After this period they will be incinerated.

200 male interns of Missão Vida, who lived on the streets and who were being treated there, participated in the research.

Respondents were asked to answer a questionnaire containing closed questions, which was answered in the units of Missão Vida in the municipalities of Anápolis and Cocalzinho, Goiás.

The benefits of this study for the research participants were the elucidation regarding sexually transmitted diseases, through educational action. In addition, during the interview the participant was able to receive clarifications and guidance on prevention and health promotion. It was noted that homeless people, being an extremely devalued and vulnerable population, would feel benefited by the moment of specialized listening and many took the opportunity to unburden. When any sexually transmitted disease was identified in any of the participants, the news was given to the participants by qualified nursing or psychology professionals. Then he was instructed to seek the specialized health service, and this was done through referral by Dr. Benjamim Spadoni, responsible for the institution. The municipal health secretariat was contacted in order to be aware of the testing of inmates and consequently receive patient demand arising from this fact, thus providing full support.

The risk of individuals' participation in this research involved questions of privacy and confidentiality, the possibility of them feeling embarrassed when answering the questionnaire. This risk was mitigated by the interviewer's information that the participant could avoid answering the unwanted questions. In addition, absolute confidentiality of the information was guaranteed, since the respective questionnaires did not have the identification of the participant and were handled only by the researchers that took part in this project. In addition, the data was statistically treated in a collectively form.

This study was evaluated and approved by the Research Ethics Committee (CEP) of Centro Universitário de Anápolis, registered under number 530,475.

RESULTS

All tables are presented with percentages referring to valid information, excluding individuals who did not respond. There were a total of 153 questionnaires. In front of each variable, the total number of individuals with valid answers will be indicated, being the reference to calculate the respective percentages. The percentage of those who did not answer will be indicated at the bottom of the table.

Origin of the Participant of the Research	
Brasília (DF)	15% (n=23)
Anápolis (GO)	8,4% (n=13)
Goiânia (GO)	7,9% (n=12)
Outras cidades (22)	68,7% (n=105)

Table 1- Distribution of the origin of the participants of the research carried out in the Vida, Goiás, 2019 mission.

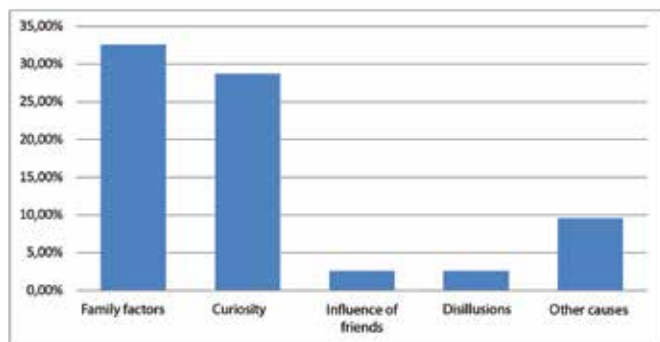
The dwelling time on the street was on average 500 days (1.36 years), with a minimum of 1 day and a maximum of 18250 days (50.69 years), with a standard deviation of 3464 days (9.62 years). The size of the standard deviation shows that the time spent on the street varies on average

from 1 to 10 years.

The age at which alcohol and other drugs were started was, on average, 15.12 years, with the lowest age found being 4 years, the highest age at onset at 45, with a standard deviation of 6.47 years. This shows that they started using these substances in adolescence and youth probably between 9 and 21 years of age.

As for the level of education, 46.5% declared having up to 9 years of schooling, 28.6% up to 12 years, 24.9% 17 years of schooling. This last group corresponds to participants who have higher education. It should be noted that this percentage is higher than the total percentage of Brazilians who have higher education. However, it is clear that despite the significant number of inmates with higher education, most have not completed primary education.

A significant part (32.6%) reported having started their addiction due to family factors, such as family members who use or are dependent on alcohol or drugs, alcohol use in family festivities and family conflicts. Many (28.7%) reported having started using it out of curiosity. Influence of friends 2.6%; amorous delusions 2.6%; other causes 9.6%, as can be seen in Graph 1.



Graph 1 - Distribution of the factors that led to the start of the addiction of the participants of the research carried out in Missão Vida, Goiás, 2019.

3.1 HOSPITALIZATIONS AND REINCIDENCES

Most of the participants 54.5% have already been admitted to other institutions, while 106 participants (45.5%) have never been to another institution, or were only admitted at Missão Vida. Of those who were hospitalized in other institutions, 21.5% had only one hospitalization, 11.2% had 2 hospitalizations and the other 40.2% had 3 or more, showing a tendency to multiple hospitalizations and consequently to relapses.

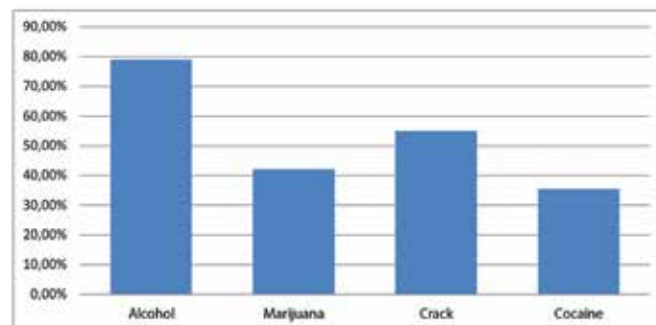
Regarding hospitalizations in Missão Vida, 67.2% were hospitalized for the first time, 23.2% for the second time, and the other 9.4% had 3 or more hospitalizations. Although the majority of participants were hospitalized at Missão Vida for the first time, 32.6% of inmates have returned for a second or third hospitalization.

The maximum abstinence time since the beginning

of addiction after hospitalizations was on average 9.71 months, with the maximum reported time being 11.15 years and the minimum time being of 0 (days), with a standard deviation of 1.62 years. This data confirms the others regarding the frequency of readmissions, indicating that the average abstinence time is 1 ½ years, after which recurrences occur.

3.2. DEPENDENCE PATTERN

We asked the participants which drug they consider themselves addicted to, and for each option, they could affirm or deny their addiction to the mentioned drug. As for alcohol, the majority (79%) declared to be addicted to alcohol and 21% declared not to be addicted to alcohol. 55% said they were addicted to crack, in relation to marijuana, 42.2% declared they were addicted to marijuana, and 35.4% said they were addicted to cocaine. Such values can be better visualized in Graph 2. It can be seen that most are dependent on alcohol and crack, which are cheap and easily accessible drugs in Brazil despite crack not being legalized while alcohol is of free use for people over 18.



Graph 2 - Distribution of drugs considered as addiction by the participants of the research carried out in Missão Vida, Goiás, 2019

A series of chi-square tests was carried out to verify the associations of addictions between drugs. We initially analyzed the drugs that are associated with the use of crack. 73% report associating crack with marijuana ($p < 0.05$), 65.9% of crack users report making concomitant use of alcohol ($p < 0.05$), 59.5% report associating crack with cocaine ($p < 0.05$).

The use of crack associated with the use of alcohol, marijuana and cocaine is mainly due to the effect of alcohol and marijuana in generating central nervous system depression, and cocaine to its stimulating effect. The other drugs, mentioned in the questionnaire, associated with crack, were not significant. The user of alcohol uses less crack than the user of crack uses alcohol, that is, there is a pattern of poly drug abuse in crack users that is generally not present in alcohol users.

Abuse Drugs	Associated Drugs
Crack	Marijuana (73%), Alcohol (65,9%), Cocaine (59,5%)
Marijuana	Crack (85,2%), cocaine (67,6%)
Cocaine	Crack (92,6%), Marijuana (90,1%)
Alcohol	Crack (45,9%)

Table 2- Distribution of the association of substances reported by the participants of the research carried out in Missão Vida, Goiás, 2019.

Regarding marijuana-related drug use associations, 85.2% of marijuana users use crack ($p < 0.05$). 67.6% of marijuana users use cocaine ($p < 0.05$).

According to associations between the use of other drugs and cocaine, it was observed that 92.6% of cocaine users use crack ($p < 0.05$), 90.1% of cocaine users use marijuana ($p < 0.05$).

The only significant association found in alcohol users with other drugs was that 45.9% of alcohol users use crack ($p < 0.05$).

Therefore, it is observed that there are probably two different groups regarding the use of drugs of abuse, the alcoholic group, which generally uses only alcohol and the crack user group, which is usually poly drug, that is, it uses several drugs along with its main addiction which is crack.

3.3. BEHAVIOR AND CONSEQUENCES

When asked about their behavior and the consequences of drug use, a pattern of thefts was observed in order to be able to exchange or buy drugs. Of those who committed thefts to buy drugs, 74.8% were addicted to crack; 65.8% to marijuana and 53.2% to cocaine. There was no statistical significance regarding alcohol.

Of the individuals questioned and who have already been involved with the police, 70.3% were crack users, 64.9% marijuana and 50.8% cocaine users. Alcohol did not show statistical significance.

In the question regarding the association between an accident and a type of drug, there was no statistical significance.

3.4. SEXUAL BEHAVIOR OF STREET RESIDENTS

The study has a sample size of 153 homeless people, of which 45 (29.41%) said they were users of alcohol only and 108 (70.58%) were users of other drugs, including alcohol. Of these 153 individuals, 47 said they had already had homosexual sexual intercourse (30.71%), while 106 (69.28%) said they had never had it ($p < 0.05$).

When dealing with the alcoholic population, 17.7% have already had a homosexual relationship, while 82.3% have not had it. In the poly drug population, 36.11% have already had a homosexual relationship and 63.89% have not ($p < 0.05$). Thus, it is possible to affirm that more men have had homosexual relation in the population of poly addicts than in the population of alcohol addicts.

When analyzing the population of poly drug abusers separating those who use crack, 38.02% have already had a homosexual relationship, while 61.98% have not ($p < 0.05$). Separating those who use marijuana and who have had a homosexual relationship and those who use cocaine and have already had sex, it was not possible to obtain a relationship with statistical significance. In other words, only the use of crack is related to homosexual practice.

When tracing the profile of this man who has already had a homosexual relationship, it was identified that 68.08% of these men who had had a homosexual relationship were or had been previously married, or lived maritally with someone ($p < 0.05$). Among the total number of men in the survey who had previously had a homosexual relationship, 90.69% were now single, 8.51% were married and 2.12% were separated, the latter relationship having no statistical significance. Another aspect that deals with this man is that 80% of these have children and another 20% do not ($p < 0.05$).

When this man who had homosexual relations was asked if he used or had used a condom during intercourse (both in homosexual and heterosexual relationships), 63.82% answered yes, while 36.18% answered that they did not or had not ($p < 0.05$). And when asked how, 76.59% of those said they sometimes used it, 8.51% they always used it and 14.89% they had never used a condom ($p < 0.05$).

When asked if they had ever had an STD, after the researchers explained what STDs are and exemplified by their popular nomenclatures, 48.93% said they had already had an STD and 51.06% they had never had or were unaware ($p < 0.05$).

When this population that had already had a homosexual relationship was asked whether before or after their sexual relations (regardless if they were homosexual or heterosexual), they had ingested alcoholic beverages, 10.86% stated that never, 32.60% stated that such a situation happened from time to time and 56.52% stated that they always consumed alcohol before, during or after intercourse. As for illicit drugs, when asked whether the individual used illicit drugs before or after sexual intercourse (regardless if they were homosexual or heterosexual), 29.78% stated that never, 27.65% that sometimes and 42.55% that always. However, these two relationships were not statistically significant.

When this population that had already had a homosexual relationship was asked if they had already had a relationship with someone with a STD, 36.17% said yes, 59.57% said they did not and 4.25% did not want to answer this question ($p < 0.05$).

When this population that had already had a homosexual relationship was asked if they had already had a relationship with a sex worker (regardless of sex), 85.10% stated that they had already had one, 12.76% that they had never had one and 4.25% did not want to answer ($p < 0.05$).

When this population that had already had a homosex-

ual relationship was asked if they had already had sexual intercourse with drug users, 85.10% said yes and 14.89% said that they did not ($P < 0.05$).

When this population that had already had a homosexual relationship was asked if they had stolen to buy drugs, 59.57% said yes and 40.42% said they had never ($p < 0.05$). Questions were asked if they had already been involved with the police and in accidents, however, such relationships were not statistically significant.

DISCUSSION

Most users started their addiction at the average age of 15.12 years of age, therefore, in their adolescence and youth. These data corroborate with the study carried out in Terezina - PI, which shows that 57.1% of the adolescents that were studied had started using drugs between the ages of 14 and 16 years of age⁶.

A significant part of the interviewees, (32.6%), reported having started their addiction due to family factors, such as family members who use or are dependent on alcohol or drugs, use of alcohol in family festivities and family conflicts. This relationship is described by Santos (1997) when he mentions that the use of drugs is usually associated with the escape from some reality, seeking in the drugs some type of compensation for the fragility of their family bonds and is also described by Nasser (2001)⁷ that considers drinking a family habit that is encouraged and observed since early childhood.

Regarding the pattern of dependency observed in individuals living on the streets, there are two distinct groups, the alcoholic group and the crack users group, who are generally poly drug users.

In the sample used, 79% were dependent on alcohol and 55% were dependent on crack. According to these groups, it is observed that alcoholics were generally not involved in thefts and robberies, as addiction is usually cheap, a situation also described by Varanda and Adorno (2004)⁸. In the group of poly drug abusers, in which the majority of users have crack as their main drug, it was observed that of those who had stolen, to buy drugs, 74.8% were addicted to crack; 65.8% to marijuana and 53.2% to cocaine and also of the individuals questioned, who had already been involved with the police, 70.3% were crack users, 64.9% marijuana and 50.8% cocaine users thus reinforcing what Bordin, Figlie & Laranjeira (2004)⁹ showed in their work that crack users are more likely to break family ties and to have inappropriate and illicit social activities, such as theft and robbery.

In crack users, there is a greater prevalence in homosexual relations, 36.11%, than in the group of users of alcohol with only 17.7%. These data reinforce what Bordin, Figlie & Laranjeira (2004)⁹ approach, saying that crack users have a risky sexual behavior, which is also reinforced by the data found, since 76.59% of these men sometimes use condom in their sexual relations and 14.89% never use it and still make sex the currency of exchange for obtaining

the drug.

Homosexual practices do not indicate, in most cases, the individual's sexual choice, and this is reinforced by the number of people, 68,8%, who have already lived maritally with someone and reinforced by the cases in which the interviewees have children, 80%, showing that possibly these homeless individuals are very fragile and end up using their bodies, prostituting themselves, for drugs, or for immediate satisfaction, an idea shared by Varanda e Adorno (2004)⁸.

This study shows signs that there are two groups among individuals living on the streets. A group consists predominantly of older men, alcoholics and who have little involvement with the police or involvement in illegal activities such as theft or robbery. In addition, this group is probably not in the habit of changing sex to maintain their addiction since he is not in the habit of having homosexual sex.

In the other group, younger, poly drug individuals predominate, whose main drug of use is crack. Such individuals are more involved with the police and seem to look for activities like thefts and robberies as a way to maintain their addiction. It may be that this group has the conduct of using sex as a means of exchange for drugs, as they report practicing homosexual sex.

Further studies are suggested for the characterization of these two groups of homeless people by type of addiction: poly drug addicts and alcoholics. In this sense, a scientific initiation project was sent to the PIBIC / CNPq program, which provides continuity to this work with the title: Social representations of drugs and neuroticism in homeless people: a comparative study between crack and alcohol users.

A limitation of the present study was that we did not ask the crack user if homosexual sex or theft was aimed at obtaining the drug. In focus groups carried out in the same population by Spadoni et al (2014)¹⁰, it was found that such behaviors aim at the acquisition of drugs.

This study is relevant to the formulation of public policies that will include a holistic approach to this population, since these policies must take into account the differences and similarities of the homeless individuals that make up each of these groups thus identifying the conducts, norms and behaviors prescribed by each group, looking for the appropriate language and constructing harm reduction strategies and interventions according to their particularities.

CONCLUSION

The purpose of this work was to study the relationship between sexual conduct and the consumption of alcohol and other drugs in the population living on the streets in Anápolis. For this, we analyzed risk behaviors related to sexually transmitted diseases, specifically sexual activities, the use of alcohol and other drugs in individuals living on the streets in Goiás.

The average onset of addiction found in this study was 15.12 years of age, where 32.6% reported having started

the addiction due to family factors, such as family members who use or are dependent on alcohol or drugs, use of alcohol in family festivities and family conflicts. The pattern of dependence found was of two distinct groups, the group of alcoholics and the group of crack users, with a history of thefts to buy drugs, involvement with the police and homosexual relations.

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