

## Adolescents coexisting with drug users: experiences in the light of the bioecological model

Adolescentes no convívio com usuários de drogas: vivências à luz do modelo bioecológico

Adolescentes en la convivencia con usuarios de drogas: experiencias a la luz del modelo bioecológico

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### ABSTRACT

**Objective:** To know the experiences of a group of adolescents coexisting with drug users in the Light of the Bronfenbrenner's Bioecological Model. **Methods:** This is a qualitative, descriptive and exploratory research, which was developed from March 2014 to August 2015, with 30 adolescents attending a Program of Educational Workshops in a Non-Governmental Organization in Santa Catarina. We conducted semi-structured interviews, and the interpretation occurred according to content analysis. **Results:** We identified two categories: Adolescents coexisting with drug users in the family system and Adolescents coexisting with drug users in the social context. We have noted that microsystem, exosystem, mesosystem, macrosystem and chronosystem influence and are influenced by the world of drugs. **Conclusion:** There is a need to think about health intervention strategies, which consider the bioecological systems in which adolescents are entered. This study may contribute to the reflection and implementation of health care practices with adolescents about the drug use by Nursing.

**Descriptors:** Adolescent, Nursing, Mental health, Substance-related disorders, Street drugs.

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## RESUMO

**Objetivo:** Conhecer as vivências de um grupo de adolescentes no convívio com usuários de drogas à Luz do Modelo Bioecológico de Bronfenbrenner. **Método:** Pesquisa qualitativa, descritivo-exploratória, desenvolvida de março de 2014 a agosto de 2015, com 30 adolescentes que participam de um Programa de Oficinas Educativas de uma Organização Não Governamental, em Santa Catarina. Foram realizadas entrevistas semiestruturadas e a interpretação ocorreu conforme a análise de conteúdo. **Resultados:** Identificaram-se duas categorias: adolescentes convivendo com usuários de drogas no sistema familiar e adolescentes convivendo com usuários de drogas no contexto social. Observou-se que microsistema, exossistema, mesossistema, macrosistema e cronossistema influenciam e são influenciados pelo mundo das drogas. **Conclusão:** É necessário pensar em estratégias de intervenção em saúde que considerem os sistemas bioecológicos em que os adolescentes estão inseridos. Este estudo pode contribuir para a reflexão e implantação de práticas de cuidado à saúde com adolescentes sobre o uso de drogas pela Enfermagem.

**Descritores:** Adolescente, Enfermagem, Saúde mental, Transtornos relacionados ao uso de substâncias, Drogas ilícitas.

## RESUMEN

**Objetivo:** Conocer las experiencias de un grupo de adolescentes en la convivencia con usuarios de drogas a la Luz del Modelo Bioecológico de Bronfenbrenner. **Métodos:** Investigación cualitativa, descriptiva-exploratoria, desarrollada de marzo de 2014 a agosto de 2015, con 30 adolescentes que participan de un Programa de Talleres Didácticos de una Organización No Gubernamental en Santa Catarina. Se realizaron entrevistas semiestructuradas, y la interpretación ocurrió según el análisis de contenido. **Resultados:** Se identificaron dos categorías: Adolescentes conviviendo con usuarios de drogas en el sistema familiar y Adolescentes conviviendo con usuarios de drogas en el contexto social. Se constató que microsistema, exosistema, mesosistema, macrosistema y cronossistema influyen y son influenciados por el mundo de las drogas. **Conclusión:** Es necesario pensar en estrategias de intervención en salud, que consideren los sistemas bioecológicos en que los adolescentes están ingresados. Este estudio puede contribuir a la reflexión e implantación de prácticas de atención sanitaria con adolescentes sobre el uso de drogas por la Enfermería.

**Descriptorios:** Adolescente, Enfermería, Salud mental, Transtornos relacionados con sustancias, Drogas ilícitas.

## INTRODUCTION

Adolescence is considered a universal and apparent phenomenon that occurs in the life of the human being. It is a stage of transformations from the individual, biological and psychological viewpoints. This phase has no beginning and a definite end. Its delimitation extrapolates chronological and biological aspects and comes under specific social, cultural, historical and psychological conditions. Adolescence needs to be understood from the notion that the same result in the development process can be acquired by different means and in relatively different contexts.<sup>1</sup>

This is a period of great impact on human development, and it is shaped as a crucial moment in drug use.<sup>2</sup> Study results signal the beginning of this early use in adolescence.<sup>3-4</sup> At

this stage in the life cycle, adolescents experience the need to moving away from the family, searching for other social groups, and then adjust their behavior according to their peers. This experience may enable a family crisis in which roles and functions change, and new arrangements and agreements need to be defined to make the process of seeking autonomy more adequate.<sup>3</sup>

It is noticed that in groups where the majority of young people are users of alcohol, tobacco or illicit drugs, they increase the chances of experimenting with these substances, leading to frequent use. Group pressure may be the reason for drug use, since young people observe and meet standards described by actual behavior perceived by others.<sup>5</sup>

Knowing the experiences of adolescents with drug addiction will subsidize nursing professionals to develop actions to prevent drug use and, consequently, promote the health of adolescents.<sup>6</sup>

The use of Bronfenbrenner's Bioecological Model of Human Development is considered relevant for helping to understand how adolescents are situated in their specific contexts, how these contexts influence the course of their development and, at the same time, how adolescents influence those contexts either directly or indirectly. This knowledge has allowed advances to overcome the initial vision of adolescence as a period of turbulence and instability, to incorporate a more positive view of the adolescent's development.<sup>1</sup>

The Bronfenbrenner's Bioecological Model is structured in five systems, as follows: microsystem, mesosystem, exosystem, macrosystem and chronosystem. The microsystem is defined as a pattern of activities, interpersonal relationships, and roles experienced by people in development in an environment such as home, daycare or school, which interact face-to-face with this scenario. These are interactions that persist and continue over time and lead to changes in behavior and personal development. The mesosystem is related to the interactions between two or more environments in which a person is actively inserted, with the possibility of enlarging it if it is part of other environments. The exosystem has no direct relation to the person, it does not participate actively, but events can occur and affect its growth and development and vice versa. The macrosystem involves the other environments; it consists of a system that includes culture, beliefs, values, social standards, political institutions, social and lifestyles. Conclusively, the chronosystem also incorporates the other systems by means of a temporal dimension. Over time, changes occur in the various systems, and relationships and influences can be altered.<sup>7</sup>

In order to address the drug issues during adolescence, the following question was chosen for this study: what are the experiences of a group of adolescents that share life experiences with drug users? Hence, it was listed as an objective: to know the experiences of a group of adolescents that share life experiences with drug users upon the Light of the Bronfenbrenner's Bioecological Model.

## METHODS

This is a descriptive-exploratory research with a qualitative approach, which had as theoretical reference the Bioecological Model of Human Development developed by Urie Bronfenbrenner. It was carried out from March 2014 to August 2015, with 30 adolescents who participated in a Program of Educational Workshop from a Non-Governmental Organization (NGO), in a city located in the West region of the *Santa Catarina* State.

The NGO, the study scenario, develops social, educational and environmental work, serving around 100 adolescents under situations of social vulnerability. Socio-educational workshops are offered with the aim of providing life-skills training and referral for the first job.

Participants were picked up during a meeting held by the NGO professionals with the adolescents and their parents or guardians, which aimed to guide the activities that would be carried out during the semester. At that time, the researchers explained the study and invited adolescents to participate. Of those present, 30 accepted to participate in the survey and their parents or responsible person gave consent.

Individual interviews were performed in a reserved room at the NGO. These interviews were digitally recorded and followed a semi-structured interview script consisting of identification questions and three open questions: 1) Do you know someone who uses drugs? Talk about it. 2) Have you ever used or currently use any drug? and, 3) Please, tell us about your experiences with drug users.

The information analysis was carried out according to the three stages of the analysis of the thematic content: pre-analysis, material exploration, and results handling.<sup>8</sup> In the pre-analysis, readings and re-readings of the material and the initial organization of the reports were carried out, aiming to have an overview of what was said by teenagers and realize the particularities. The exploration of the material allowed us to understand the relevance of each adolescent's speech, to classify the central ideas and to organize them into two categories, as follows: Adolescents coexisting with drug users in the family system; and, Adolescents coexisting with drug users in the social context. The results handling consisted of the elaboration of an interpretative synthesis of these categories, allowing the dialogue with the objective of the study, the theoretical reference of the Bioecological Model of Human Development and the pertinent literature.

The ethical aspects were according to the Resolution No. 466/12 from the National Health Council,<sup>9</sup> and the research was approved by the Research Ethics Committee from the *Universidade do Estado de Santa Catarina* according to the Legal Opinion No. 560,117, dated from March 18<sup>th</sup>, 2014. The parents or guardians of adolescents signed the Free and Informed Consent Term and the minors signed the Free and Informed Agreement Term and the Authorization Term for Voice Recording. The adolescents were informed that their anonymity would be preserved and their lines would be identified by the letter A, followed by a number according to the order of their interview, and that they could withdraw at any time without prejudice.

## RESULTS AND DISCUSSION

Considering the 30 adolescents who participated in the study, 19 were male and 11 female. They were within an age group from 10 to 16 years old, and ranged from the 5<sup>th</sup> grade of elementary school to the 1<sup>st</sup> grade of high school. The majority (17) of adolescents lived with their parents and siblings, four lived in a big family comprised of uncles, cousins, and grandparents, and eight lived with only one of the parents. Regarding the family income, 14 adolescents did not know how to inform it, the others answered between one and five minimum wages.

Talking about their life experiences with drug users, adolescents reported experiences of alcohol and other drug use by relatives, friends, and people in their neighborhood. One of the adolescents mentioned that he had used drugs. He stated he had already consumed alcohol, sniffed glue (substance used in shoes fabric), and smoked marijuana.

The categories that emerged from the adolescents' statements are presented below.

### Adolescents coexisting with drug users in the family system

In the adolescent microsystem, the family stands out as the main and significant component in their interactions. It was observed that the family system could contribute to the engagement of adolescents in behaviors that are distant from the drug universe, or that it could favor the approximation with this universe, based on the indicative of a family history of the use of these substances and the practice of violence.

*My uncle uses drugs. He goes in his room, I go there to see what he is doing, he does not like that nobody enters the room, he has a small can and starts smoking, then starts to come other people, and it is only once a day, he always does at the end of the day. (A27)*

*My cousins who use marijuana are aggressive, cuss and scream at their younger siblings, with grandma [...]. I have an uncle who drinks, when he drinks he loses his notion, he is aggressive, he also advances. You have to be careful with him. (A8)*

*My relatives smoke drugs, they always come to our house to ask for food, they do not bathe, they are always poorly dressed, all they can get is to buy drugs, and it's no use helping them to fight with us, they only think about smoking. Three of my cousins have already died, one because he sold, the police laid him down, one died of the drug consumption, he became weak, and another was killed nearby. I have a cousin who is alive, he is lost, my father asked him to stay at home he did not want to, so he is very bad, he almost died three times, he got shot and stabbed and did not die. (A30)*

When viewing scenes involving alcohol and other drugs in the family environment, adolescents often see the negative effects of using these substances when they talk about conflicting marital relationships, interruption of studies, and

physical changes such as weight loss. In this environment, access to drugs seems easy if they wish to use it.

*My sister drank a lot and kept fighting with her husband and he was fighting with her. I told my sister that she cannot drink or start fighting; the two start to go crazy. That day I went to pose at her house did not even sleep for me, my sister just fought with him, so my sister would not let her sleep because she just stayed awake. Almost every day they fight. They fight because they do not pay the rent, things like that. They drink a lot of beer. She drinks almost every day, night, day. They both drink. (A4)*

*I have a cousin. He was very good, he was chubby, now he started using drugs, I think it's family, because his father is already in prison and his mother, too, every day, every night, she was on the corner selling drugs. He's really skinny now, his voice is hoarser, and he stopped studying, in seventh grade, then he started smoking drugs. (A10)*

When violence affects grandparents in some way, it is of concern to adolescents, because they understand that they are people who deserve respect and should be spared from being in the cross-border of disorders caused by drug users, especially trafficking, which can take people's lives.

*My cousin was arrested because of the drugs. My aunt, his mother, smokes crack. She comes drugged at my grandmother's house, she lives with my grandmother, and my father always fights with her. Fight because of drugs because if she owes to someone they will want to kill her and if they cannot kill her, they go to my grandmother's house to kill her, and my grandmother is already a old lady and my grandfather is still in the hospital. (A3)*

It was noticed that parents have influence on the behavior of children to stay away from drugs. The adolescents emphasized the importance of counseling them for the prevention of addiction, and also the individual and social harm caused by drug addiction.

*I have never used and will not use it, because my parents give me advice not to experience that it already addicts, there is no turning back. (A15)*

*Never used. My mother taught me not to do it, because her friend's son smoked crack. He started stealing his mother's house to sell and buy and his mother had to hospitalize him. I do not want this to happen to me. Just think it can happen to anyone. (A25)*

Hence, it was observed that the adolescents demonstrate that the family, considered a microsystem, is configured as a group that assists in the construction and reconstruction of knowledge from the lived examples arising from the interactions between parents, siblings, cousins, uncles, and grandparents.

## Adolescents coexisting with drug users in the social context

It was identified from the adolescents' life experiences with drug users the presence of other microsystems, besides the family system, that comprise the mesosystem. It has been said that it is common for friends of the school, neighbors and acquaintances of the neighborhood where they reside, to use some type of drug. In commenting on this use, the streets were reported as being a place where the offer seems to be naturalized by the community.

*It is common to see here in the streets. I was passing close to home, the guy took a glass and dropped on the T-shirt and sniffed, when I saw it began to stun, I think it was drugs. One came to me talking and then [...], I left him talking to himself and went across the street. And there are some on the corner always smoking marijuana, you can smell a lot. They grind marijuana, crumble in hand, pack in a paper, close and smoke. Their eyes get to become very small. (A22)*

*My friends use drugs at school. (A25)*

*There are neighbors near my house who use, sell, owing to the person who gave them to sell. If they owe to this person in high value and cannot pay, they kill a person in their family. They killed the sister of a guy that sold drugs. (A2)*

*There's a guy near the house who sniffs drugs. (A20)*

Another component of the mesosystem was highlighted in the interview of A12, citing the Church as an entity that helps in coping with drugs, having representation in the network of social support of their relatives.

*My brother also smoked drugs; hence, my aunt took his name in the church, until he stopped. (A12)*

The exosystem also appeared in the context of the adolescents' lives when they narrated about the police action. The police force, understood as an entity, can affect their living as it intervenes in conflicts with the Law, generated by drug users, due to situations of trafficking and robberies. This has decisive implications in the way of life of these users and may reflect on the behavior of adolescents.

*My cousin was arrested for selling and smoking marijuana. He has 15 or 16 years old. He was arrested four times, one for armed robbery, and another because of drugs. [...] My cousin was with his friends, so they decided to rob a market, he had a knife in his hand, then called the police and he was arrested, and dropped out because of drugs. (A24)*

*My cousin is 15 years old, now he's stuck because of theft. He has been arrested three times. He started smoking the drug and joined with some friends and hence the friends were stealing and he is always in the middle because of drugs and hence they sell and smoke. Now he must not*

*find anything cool, because now he must be crying there.  
He stole the store near the post. (A3)*

In these bioecological contexts the influence of the macrosystem and chronosystem was perceived, since they encompass the others. To illustrate the macrosystem, the implicit culture of drug use in the spaces where the adolescents are inserted stands out. Furthermore, the representativeness of the *Programa Educacional de Resistência às Drogas (PROERD)* [Drug Resistance Educational Program], which has activities of the military police, the school and the family, has emerged in order to provide information and develop skills to live in a healthy way without drugs and violence. Likewise, to illustrate the chronosystem we highlight the life histories reported that refer to the time elapsed in the growth and development of adolescents.

*I sniff glue, but it was only to play once and I felt very bad and never again, when you sniff for the first time it goes to the head. I knew I had it at home and I tried it and I ended up doing it. You get dizzy, hungry, it's bad, I did not know any of that, so I learned in the PROERD that we were used to have no marijuana or crack around. (A30)*

From the experiences of the adolescents, it is observed that the bioecological systems are present in their daily life and interconnected with each other. There is no limit between the systems: microsystem, mesosystem, exosystem, macrosystem and chronosystem. At all times they influence and are influenced by the circumstances that present themselves to adolescents with regard to the world of drugs.

Following, it is sought to discuss the categories organized from interviews with adolescents by comparing with studies found in the literature.

The family constitutes the main microsystem of human development, because in it happen the direct interactions and significant experiences for the person. With regards to the adolescent, the family is his main reference, since it leads him to the understanding of concepts, to the engagement in the accomplishment of tasks and to increasingly diverse and complex social roles, and to the development of social competences.<sup>1</sup>

It should be remarked that the family occupies a prominent place in the life contexts of adolescents in this study, being the axis that moves social relations and makes interconnections with the other systems: mesosystem, exosystem, macrosystem and chronosystem. It does help to build knowledge during the growth and development of adolescents, supervises activities in their daily lives and, in relation to the drug use, and advises to avoid using it.

However, there are some components of these families that, when consuming drugs, become archetypes for adolescents, causing them to impact their lifestyles, since they live close to situations of intrafamilial conflicts generated by drug addiction. In this way, these adolescents come to know the consequences of drug dependence, represented by acts of aggression and delinquency.

This is in line with the literature, which draws attention to the fact that, just as the family may have protective factors that minimize the vulnerability of its members to the processes of health, disease, and adaptation of its development, it may also present risk factors that hinder the biopsychosocial development of its members.<sup>10</sup>

In the speech of some of the adolescents in the study, risk factors related to drug use are identified, such as intrafamily violence, role overload, parental neglect, parents' history of drug use, lack of children's limits, and conflicting family relationships. These situations, according to a particular study,<sup>10</sup> interfere in the bonding of their members, in the family context, in the communication patterns and in the parental practices of the children's education. Consequently, it is observed that the family finds it difficult to exert successful social interactions with their children and to assist them in acquiring a representation of stable consciousness.

Still, in relation to the microsystem, it is observed that parents are important characters in helping children in the stage of childhood and adolescence, as children grow, in the development of a sense of autonomy, independence and responsibility that will favor their engagement in activities and roles resulting from these new relationships. It is expected that parents, or any of them, through established routines can support the child in the development of important skills for their conviviality in environments that differ from the familiar from practices of care and/or supervision of the activities of daily life.<sup>11</sup>

It should be emphasized that in addition to the parents, the grandmother has recurrently presented in the child-care routines, showing the importance of the relationship between the caregiver and the child and the adolescent, which increases the chance of being attended in their demands, and in a more stable way.<sup>11</sup>

Based on the findings of this research, different configurations of the adolescent microsystems were observed. There is around them a family support network with both healthy and risky bonds, made up of uncles, grandmothers, cousins, among others, that influence their development through activities, roles and interpersonal relationships, based on feedback with potential for relationships of affection, conflict and adaptations to the situations they experience in relation to the world of drugs.

Close to the microsystem there is a web of interrelations between two or more environments in which the adolescent participates and participates actively, deciphered as the mesosystem.<sup>7</sup> In this system are inserted friends, neighbors, acquaintances, school, church, among others. It is a context that influences and is influenced by the interactional dynamics established with adolescents in the proximal processes, which promotes a differential in healthy human development.<sup>12</sup>

In the experience presented here by adolescents, it is possible to see that drugs surround the school space where they are inserted, configuring a scenario in which there is an open offer of these substances, facilitating familiarity and access to drugs. This portrays the existence of external factors that influence and de-characterize the school environment as a reliable and protected space.

This panorama converges with some contextual risk factors associated with the beginning of drug use described in the literature, due to the influence of the social environment on the individual. Among the factors are low socio-economic status, drug availability, high crime rates, socio-cultural aspects including advertising campaigns and social policies, weakening of family ties, religious activities, lack of adherence to school activities such as delays and disapprovals, and pressure and influence of friends who are already users.<sup>6</sup>

Nonetheless, it is known that the school is a space that generates reflections and enables young people to become citizens able to think about their reality and to change it.<sup>2</sup> It has important functions for the development of young people in socio-emotional and cognitive level, which occur from the process of socialization, construction of professional identities, plans, and aspirations.<sup>13</sup>

The school can make a significant contribution to drug prevention because it is a place that has the function of reporting on these substances, however, it can become a risky environment when it does not take advantage of the opportunities to get oriented on the subject, and neglects the proximity of people who use and/or sell drugs.<sup>6</sup>

In this sense, it was verified that the consumption of drugs used by neighbors and friends is part of adolescents' daily life. In the face of this, they begin to naturalize it because they live with this situation, but at the same time that they naturalize it, besides, they can perceive negative consequences of its use.

Nevertheless, it has to be considered that coexistence with friends who use drugs can be a stimulus for the initial experimentation. Furthermore, the influence and pressure of the group lead the young person to have greater curiosity, directing it to the use of these substances.<sup>6</sup>

Still, in the mesosystem, the speech of A12 brought the Church to prominence, as a social segment that is part of the social support network of the adolescents' families, being an entity that is representative in their beliefs, through the support for the user to abandon the drugs.

The Church as an intervening factor has favorable aspects that contribute to the detachment of the individual from the world of drugs.<sup>6,14</sup> Moreover, it can be said that the Church usually composes the culture of a community or population. It is anchored in a diversity of interactions between its components, which in moments of anguish and suffering seek their support, help, and care. Once attended, individuals feel grateful for strengthening their faith and belief, which perpetuate themselves in the offspring, being ruled during their human development.

Exceeding the mesosystem, the exosystem was identified in the daily lives of adolescents, involving formal and informal contexts that surround them, such as the Law and police entities. To contextualize this statement, it is worth highlighting the process of dependence on drug use that leads to police actions.

The person dependent on the drug, in the urgency to consume it modifies the values that until then directed their conducts and it raises behaviors of risk that compromise their health and its social relations, being able to take on a series of moral losses. The use of drugs provides a state

of emptying of life, values, beliefs and personal, family and social perspectives. There is a distancing of the family and social context, breaking with affective bonds. Life goes on as a function of dependence, and in this sense, people lose mastery and autonomy over their own actions. The drug-dependent person increases the range of possibilities for acquiring the substance, overcoming all possible limits, and even doing illicit activities such as thefts and robberies.<sup>14</sup>

A3 and A24 described the actions of police officers in bringing family members into the prison system because of the consequences that involve the use of drugs. These police actions can serve as models and make them think about the balances resulting from the risk behaviors arising from drugs, influencing their living conditions.

The macrosystem was also identified in the adolescents' reports. In the speech of A30 are noted the efforts of some entities that are active in education and drug prevention as the *Programa Educacional de Resistência às Drogas (PROERD)* [Drug Resistance Educational Program].

This program consists of joint action by military police, schools, and families to prevent drug abuse and violence among students in an attempt to help them recognize the pressures and daily influences that contribute to drug use and the practice of violence, developing skills to resist them.<sup>15</sup>

Decisions that are taken in the macrosystemic spheres, such as laws that regulate the educational and public health systems, interfere in the adolescent's life and in the life of his family, by promoting contexts more or less favorable to their development.<sup>7</sup>

The narratives of the adolescents reported events that took place throughout their growth and development, through a chronological time, the chronosystem. This system includes events of the normal course of life and unexpected events. It involves from an individual experience or from transitions to changes that have occurred over generations.

They also stem from historical events that can bring about changes in the course of human development, in any direction, not only for individuals but also for segments of the population. These changes constitute the propellants of transformations.<sup>7,16</sup>

It is outstanding that the stories told by adolescents about drug use, their family members, friends, and acquaintances also does structure their own life history and, in a way, can influence their decisions. In turn, the decisions are based on the orientations of family members and the knowledge derived from interactions, and also experiences with people and the environment. Such experiences can help the adolescents to reflect about the limits, values, and respect for their own life, and also care for other people's lives around them.

## FINAL CONSIDERATIONS

By giving to adolescents a chance to address their life experiences with drug users, it was possible to identify the different systems of the Bronfenbrenner's Bioecological Model. The family microsystem works as a natural antidote to preventing the drug use, and becomes a benchmark for adolescents as they support counseling to the conduct of

their behaviors and attitudes. Nevertheless, when there are individuals inside the family, who uses any drug, this person establishes ruptures and transformations in the family, which leads adolescents to learn about the negative aspects caused by drug addiction to the point of not willing to use it. However, by being close to this person can lead to having access to drugs.

The other bioecological systems also influence the adolescents' lives. They permeate the interrelations established in the complex reality shared by adolescents with different social actors and have a both direct and indirect repercussion on the subjectivities of the processes of individual and community development.

Considering the findings of this study, it is necessary to think about health intervention strategies that consider the bioecological systems that the adolescents are engaged. In these intervention strategies are addressed the factors of protection, the connections with the family and the network of services and social support that can contribute to the prevention of drug use.

Bearing this in mind, it is suggested that health professionals, especially nurses, can use the Bioecological Model in their health care practice in order to understand the drug addiction phenomenon during adolescence. Consequently, they can propose actions of extended health care for the adolescents and their family in the diverse contexts that they participate.

It is considered as a study's limitation the fact that only adolescents were participants. It is suggested to carry out new investigations that address the same matter, expanding to other audiences, such as family members and drug users, in order to know their realities, thus better elucidating the issues that encompass the use of drugs.

## REFERENCES

1. Senna SRCM, Dessen MA. Contribuições das teorias do desenvolvimento humano para a concepção contemporânea da adolescência. *Psic Teor e Pesq.* [Internet]. 2012 Jan [citado em 22 mai. 2017];28(1):101-8. Available at: <http://www.scielo.br/pdf/ptp/v28n1/13.pdf>
2. Bittencourt ALP, Garcia LF, Goldim JR. Adolescência vulnerável: fatores biopsicossociais relacionados ao uso de drogas. *Rev Bioét.* [Internet]. 2015 Mai [citado em 22 mai. 2017];23(2):311-9. Available at: [http://revistabioetica.cfm.org.br/index.php/revista\\_bioetica/article/view/1041](http://revistabioetica.cfm.org.br/index.php/revista_bioetica/article/view/1041)
3. Horta ALM, Daspett C, Egito JHT, Macedo RMS. Vivência e estratégias de enfrentamento de familiares de dependentes. *Rev Bras Enferm.* [Internet]. 2016 Nov [citado em 22 mai. 2017];69(6):1024-30. Available at: <http://www.scielo.br/pdf/reben/v69n6/0034-7167-reben-69-06-1024.pdf>
4. Teixeira LL, Batalla LS, Oliveira SM, Santos AM, Maagh SB. O cotidiano familiar após a descoberta do filho dependente químico. *Rev Enferm UFPE On Line.* [Internet]. 2014 Out [citado em 22 mai. 2017];8(10):3639-46. Available at: [http://www.revista.ufpe.br/revistaenfermagem/index.php/revista/article/view/5255/pdf\\_6402](http://www.revista.ufpe.br/revistaenfermagem/index.php/revista/article/view/5255/pdf_6402)
5. Zeferino MT, Hamilton H, Brands B, Wright MGM, Cumsille F, Khenti A. Consumo de drogas entre estudantes universitários: família, espiritualidade e entretenimento moderando a influência dos pares. *Texto Contexto Enferm.* [Internet]. 2015 [citado em 22 mai. 2017]; 24(spe): 979-86. Available at: [http://www.scielo.br/scielo.php?script=sci\\_arttext&pid=S0104-0702015000600125](http://www.scielo.br/scielo.php?script=sci_arttext&pid=S0104-0702015000600125)
6. Zeitoune RCG, Ferreira VS, Silveira HS, Domingos AM, Maia AC. O conhecimento de adolescentes sobre drogas lícitas e ilícitas: uma contribuição para a enfermagem comunitária. *Esc Anna Nery.* [Internet]. 2012 Mar [citado em 22 mai. 2017];16(1):57-63. Available at: [http://www.scielo.br/scielo.php?script=sci\\_arttext&pid=S1414-81452012000100008](http://www.scielo.br/scielo.php?script=sci_arttext&pid=S1414-81452012000100008)
7. Bronfenbrenner U. *Bioecologia do desenvolvimento humano: tornando os seres humanos mais humanos.* Porto Alegre: Artmed; 2011. 310p.
8. Minayo MCS. *O desafio do conhecimento: pesquisa qualitativa em saúde.* 14. ed. São Paulo: Hucitec; 2014. 408p.
9. Brasil. Resolução n. 466, de 12 de dezembro de 2012. Diretrizes e normas regulamentadoras de pesquisas envolvendo seres humanos. *Diário Oficial da União [da] República Federativa do Brasil.* 2013 jun 13;150(112 Seção 1):59-62.
10. Antoni C, Batista FA. Violência familiar: análise de fatores de risco e proteção. *Diaphora.* [Internet]. 2014 Set [citado em 22 mai. 2017];14(2):26-35. Available at: <http://www.sprgs.org.br/diaphora/ojs/index.php/diaphora/article/view/62>
11. Alvão MC, Cavalcante LIC. Transições cotidianas entre a família e a escola: atividades e relações de crianças nesses contextos ecológicos. *Estud Pesq Psicol.* [Internet]. 2015 Jul [citado em 22 mai. 2017];15(2):631-51. Available at: <http://www.e-publicacoes.uerj.br/index.php/revispsi/article/view/17662/13059>
12. Bordignon SS, Meincke SMK, Soares MC, Schwartz E, Barlem ELD, Lunardi VL. Paternidade na adolescência no contexto dos serviços de saúde, escolar e comunidade. *Texto Contexto Enferm.* [Internet]. 2014 Out [citado em 22 mai. 2017];23(4): 979-86. Available at: [http://www.scielo.br/pdf/tce/v23n4/pt\\_0104-0707-tce-23-04-00979.pdf](http://www.scielo.br/pdf/tce/v23n4/pt_0104-0707-tce-23-04-00979.pdf)
13. Nunes TGR, Pontes FAR, Silva LIC, Dell'Aglio DD. Fatores de risco e proteção na escola: reprovação e expectativas de futuro de jovens paraenses. *Psicol Esc Educ.* [Internet]. 2014 Mai [citado em 22 mai. 2017];18(2):203-10. Available at: <http://www.redalyc.org/articulo.oa?id=282332471002>
14. Siqueira DF, Moreschi C, Backes DS. Vivendo em função da droga/crack: vivências de usuários. *Nursing.* 2012 Mar;14(166):136-40.
15. Polícia Militar Estado de Santa Catarina [Internet]. Florianópolis (SC): Governo do Estado de Santa Catarina (BR); 2017 - [citado em 22 mai. 2017]. Available at: [www.pm.sc.gov.br/cidadao/proerd.html](http://www.pm.sc.gov.br/cidadao/proerd.html)
16. Glaus MAB, Souza ZR, Castro MACD. Desenvolvimento humano e teoria bioecológica: ensaio sobre "O contador de histórias". *Psicol Esc Educ.* [Internet]. 2015 Mai [citado em 22 mai. 2017];19(2):341-8. Available at: <http://www.scielo.br/pdf/pee/v19n2/2175-3539-pee-19-02-00341.pdf>

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