

ATTITUDES OF SCHOOL ADOLESCENTS ABOUT ALCOHOL AND OTHER DRUG USE: CROSS-SECTIONAL STUDY

ATTITUDES DE ADOLESCENTES ESCOLARES SOBRE O CONSUMO DE ÁLCOOL E OUTRAS DROGAS: ESTUDO TRANSVERSAL

ACTITUDES DE LOS ADOLESCENTES EN EDAD ESCOLAR SOBRE EL CONSUMO DE ALCOHOL Y OTRAS DROGAS: ESTUDIO TRANSVERSAL

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Objective: to identify the attitudes of school adolescents about the consumption of alcohol and other drugs. **Method:** cross-sectional study, conducted with 324 adolescents from public high school, from September to December 2018, using the Scale of Social Representations of Alcohol and Drug Consumption in Adolescents. **Results:** most adolescents reported not consuming alcohol (52.2%), tobacco (92.6%) or illicit drugs (91.4%); those who did not use drugs showed a low trend to use them (82.9%), while among those who consumed them, the trend to maintain this conduct (77.3%) was high. Attitudes towards consumption showed influence of the environment, friends and family, in addition to the type of drug to be consumed; religion was identified as a protective factor. **Conclusion:** the attitudes of school adolescents about the consumption of alcohol and other drugs indicated that there was a trend of behavioral reproduction of this consumption.

Descriptors: Attitude. Adolescent. Substance-Related Disorders. Health Promotion.

Objetivo: identificar as atitudes de adolescentes escolares sobre o consumo de álcool e outras drogas. *Método:* estudo transversal, realizado com 324 adolescentes do ensino médio de escola pública, no período de setembro a dezembro de 2018, utilizando a Escala de Representações Sociais do Consumo de Álcool e Drogas em Adolescentes. *Resultados:*

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a maioria dos adolescentes afirmou não consumir álcool (52,2%), tabaco (92,6%) ou drogas ilícitas (91,4%); os que não consumiam drogas apresentaram baixa tendência para usá-las (82,9%), enquanto que, entre os que consumiam, era elevada a tendência para manter essa conduta (77,3%). As atitudes para o consumo mostraram influência do ambiente, de amigos e de familiares, além do tipo de droga a ser consumida; a religião foi identificada como fator protetor. Conclusão: as atitudes de adolescentes escolares sobre o consumo de álcool e outras drogas indicaram que havia uma tendência de reprodução comportamental desse consumo.

Descritores: Atitude. Adolescente. Transtornos Relacionados ao Uso de Substâncias. Promoção da Saúde.

Objetivo: identificar las actitudes de los adolescentes en edad escolar sobre el consumo de alcohol y otras drogas. Método: estudio transversal, realizado con 324 adolescentes de bachillerato público, de septiembre a diciembre de 2018, utilizando la Escala de Representaciones Sociales del Consumo de Alcohol y Drogas en Adolescentes. Resultados: la mayoría de los adolescentes reportaron no consumir alcohol (52,2%), tabaco (92,6%) o drogas ilícitas (91,4%); los que no consumieron drogas mostraron una baja tendencia a consumirlas (82,9%), mientras que entre los que las consumieron, la tendencia a mantener esta conducta (77,3%) fue alta. Las actitudes hacia el consumo mostraron influencia del entorno, amigos y familiares, además del tipo de droga a consumir; la religión fue identificada como un factor protector. Conclusión: las actitudes de los adolescentes escolares sobre el consumo de alcohol y otras drogas indicaron que existía una tendencia de reproducción conductual de este consumo.

Descriptorios: Actitud. Adolescente. Trastornos Relacionados con Sustancias. Promoción de la Salud.

Introduction

Adolescence is considered the phase of life between childhood and adulthood. It encompasses elements of biological growth, in addition to important transitions of social roles. It is understood as a moment of construction of identity and values, reference points, professional career and life projects, being, therefore, an important step in the formation of the individual, because it is permeated with possibilities and challenges for personal development⁽¹⁻²⁾.

It is a delicate period, which encompasses a set of neurobehavioral changes, which seem to have a significant effect on motivation and emotion, in addition to the social determinants that involve the search for new sensations, the desire to be recognized as an adult and accepted by their peers⁽³⁾. At this moment, the first experience of alcohol and other drug use is a milestone⁽⁴⁾.

The attitude of adolescents towards drug use is worrisome, due to their vulnerability and psychic and emotional immaturity, being related to an increased risk of transposition of the attitude of experimentation to abuse and subsequent dependence. In addition, it can contribute to the acquisition of risk behaviors for health and life, such as violence, impulsivity, unprotected sexual

relations and sexually transmitted infections (STIs), in addition to unwanted and/or early pregnancy⁽⁵⁾.

The *Pesquisa Nacional de Saúde do Escolar* (PeNSE), conducted throughout Brazil with schoolchildren aged 13 to 17 in 2019, showed that the percentage of alcohol experimentation was 63.3%; cigarette experimentation at any time in life was 22.6%; and 13.0% of the participants had used some illicit drug at some point in their lives. Specifically in the state of Paraíba, 23.1% of the students consumed alcoholic beverages in at least one of the 30 days prior to the study. 20,200 (8.9% of the participants) have tried illicit drugs at some time in their lives, including public (9%) and private (8.6%) students; reported having used narcotics for the first time at the age of 13 years or less, 3.3% of the students⁽⁶⁾. These data show that there was an increase in the percentages of substance consumption among the studied public, when compared to the previous PeNSE, carried out in 2015⁽⁶⁾.

The factors that contribute positively to the use of alcohol and other drugs by adolescents include the influence of the family and social groups, the search for acceptance and socialization, the fear of social stigmatization and the feeling of

imminent risk. It is perceived, therefore, that the predisposition to consumption has its origin fundamentally in social coexistence, because adolescents in formation tend to be inserted in a rough and rude social context for their little maturity⁽⁷⁾.

It is necessary, therefore, to investigate the use of alcohol and other drugs in adolescence, in order to obtain information that can guide prevention strategies, for those who have not yet had contact, and treatment, to minimize the damage caused to those who use such substances. To make adolescents aware of the harmful nature of this practice is necessary and important, so that they obtain a higher quality of life and well-being.

This study aims to identify the attitudes of school adolescents about the consumption of alcohol and other drugs.

Method

This is a cross-sectional, descriptive/correlational study with a quantitative approach, conducted between September and December 2018 in a state high and technical school of the public network in João Pessoa, Paraíba, Brazil, which has about 480 students matriculated.

The sample, selected by convenience, consisted of 324 adolescents aged between 14 and 19 years, 165 (50.9%) students of the 1st year; 92 (28.4%), 2nd year; and 67 (20.7%) in the 3rd year of high school. The inclusion criteria were: students regularly matriculated in one of the three years of high school and who were present in the classroom at the time of data collection, according to information provided by the school board. Students over 19 years of age and those who did not answer any item of the instrument used were excluded.

Data collection occurred through the self-completion of the semi-structured instrument with sociodemographic questions and on drug consumption and the Scale of Social Representations of Alcohol and Drug Consumption in Adolescents⁽⁸⁾, which assesses how this public relates to the theme “Alcohol

and Drug Consumption”, making it possible to identify their attitudes, knowledge and beliefs in the face of possible situations, even in adolescents without consumption. It is a Likert scale, from five points to a single answer alternative, ranging from: totally disagree; disagree; I do not disagree or agree; I agree; I totally agree. This scale was developed in Portugal, cross-culturally adapted and validated for use in Brazil. It is subdivided into three domains: “knowledge” (16 items), “attitude” (8 items) and “beliefs” (8 items)⁽⁸⁻¹⁰⁾.

The domain “knowledge” analyzes the previous knowledge that adolescents have about drugs, such as: names of various types of drugs and whether their consumption can lead to the state of dependence, whether psychic or physical. The domain “attitude” aims to evaluate the action of adolescents in accepting or refusing the use of alcohol and other drugs, especially in situations in which consumption is practiced by social groups in which he is inserted (family and friends), possible to analyze favorable or unfavorable attitudes regarding the use of substances. The domain “beliefs” aims to understand the association of beliefs with the Social Representations of adolescents, with regard, above all, to the effects and consumption of alcohol and other drugs⁽⁸⁾.

In the present study, the data used were obtained in the domain “attitude”, considering that the higher the score obtained in the answers to the items, the greater the probability of favorable attitudes of the adolescent towards the consumption of alcohol and other drugs. Attitude is one of the elements that make up the Social Representations created in the process of communication between people and interaction with other elements, such as beliefs and perceptions⁽⁸⁾.

Social Representations have several elements that are usually analyzed in isolation, such as beliefs, values, attitudes and opinions⁽¹¹⁾. Thus, the domains that make up the Scale of Social Representations of Alcohol and Drug Consumption in Adolescents are also likely to be studied in isolation, allowing deepening the analysis and interpretation of the results of a single

domain, enabling sociodemographic associations and pattern of substance consumption among the studied public.

Considering that the theme addressed by the study is still considered taboo, it can be considered as potential confounders and modifiers of results the fact that adolescents do not report that they use substances, in addition to the influence or consultation of a colleague when filling out the instrument, since the collection occurred in the classroom. In order to minimize these factors, the participants were informed that they were not being judged and that there would be no right or wrong answers. Anonymity of the information provided was ensured.

The collected data were entered and validated in the EpiInfo® program, in double entry, independent and transported through the statistical program Statistical Package for the Social Sciences (SPSS) version 22.0. Bivariate statistical analysis was performed and the scores attributed to the investigated domain were categorized into quartiles and transformed into dichotomous variables, at low, medium and high levels. The $p < 0.05$ values were considered statistically significant.

Regarding ethical aspects, the present study complied with the requirements of Resolution n. 466/2012 of the National Health Council. The project was approved by the Ethics Committee in Research at the Health Sciences Center at the *Universidade Federal de Pernambuco* (CEP/CCS/UFPE) with *Certificado de Apresentação para Apreciação Ética* (CAAE) 59851316.6.0000.5188.

Results

The results will be presented in the sections entitled: Characterization of adolescents according to sociodemographic variables and Attitudes of school adolescents about the consumption of alcohol and other drugs.

Characterization of adolescents according to sociodemographic variables

The sample of 324 adolescents showed a predominance of females (n=195, 60.2%), brown (n=145, 44.8%), aged between 16 and 17 years (n=183, 56.5%), with a mean of 16.23 years (± 1.124). The majority attended the 1st year of high school education (n=165, 50.9%), lived with only one or two parents (n=298.92%), had a family income greater than 1 minimum wage (n=196, 60.5%) and declared themselves evangelical (n=135, 41.70%).

Attitudes of school adolescents about the consumption of alcohol and other drugs

Concerning the attitude of alcohol and drug consumption by the study participants, the majority stated that they did not consume tobacco (n=300, 92.6%), or illicit drugs (n=296, 91.4%) or alcohol (n=169, 52.2%). Similarly, most reported having never tried any type of drug (n=302, 93.2%). Some adolescents claimed to have already tried illicit drugs, such as marijuana, ecstasy and Lysergic Acid Diethylamide (LSD) (n=16, 4.9%), classified by the literature as disturbing (Table 1).

Table 1 – Frequency of drug use by participants. João Pessoa, Paraíba, Brazil – 2018. (N=324)

Drug	n(%)
Tobacco	
Whenever I can	2(0.6)
Sometimes	5(1.5)
Rarely	17(5.2)
Never	300(92.6)

Table 1 – Frequency of drug use by participants. João Pessoa, Paraíba, Brazil – 2018. (N=324)

Drug	n(%)
Alcohol	16(4.9)
Whenever I can	9(2.8)
Often	41(12.6)
Sometimes	88(27.2)
Rarely	169(52.2)
Never	1(0.3)
Unanswered	
Other illicit drugs	5(1.5)
Whenever I can	1(0.3)
Often	5(1.5)
Sometimes	12(3.7)
Rarely	296(91.4)
Never	5(1.5)
Unanswered	
Type of illicit drug already tried	302(93.2)
Reported not to consume	16(4.9)
Marijuana or Ecstasy or Lysergic Acid Diethylamide (LSD)	2(0.6)
Alcohol	1(0.3)
Marijuana or ecstasy or LSD and tobacco	3(0.9)
Marijuana or ecstasy or LSD and alcohol	

Source: Created by the authors.

Adolescents who did not use drugs showed a low trend to use them (n=97, 82.9%), while among the group of adolescents who used some type of drug, a high trend to maintain this attitude was identified (n=68, 77.3%), which could be evidenced in the bivariate analysis

among these groups. Religion was identified as a protective factor for the attitude of drug use, through the statistically significant association (p-value 20.330) of the analysis performed, in which adolescents with religion showed low trend to drug use, as can be observed in Table 2.

Table 2 – Tendency towards attitude of drug consumption by the participants and association between consumption and religion. João Pessoa, Paraíba, Brazil – 2018. (N=324)

Trend	Yes	No	p-value of the chi-square test(1)	P Value	V de Cramer
Consumption of any drug					
Downtrend	20(17.1)	97(82.9)	78.949	-	-
Average trend	68(57.1)	51(42.9)	-	-	-
High trend	68(77.3)	20(22.7)	-	-	0.494
Religion					
Downtrend	103(89.6)	12(10.4)	20.330	-	-
Average trend	97(81.5)	22(18.5)	-	-	-
High trend	55(64.0)	31(36.0)	-	-	0.252

Source: Created by the authors.

Note: Conventional signal used:

- Numerical data equal to zero not resulting from rounding.

(1) For proportion comparison.

The attitudes of adolescents who used some drug showed influence of the environment, friends and family, since most agreed that it would increase alcohol consumption by encouragement

of friends and at a party (n=42, 87.5%) and because they felt tempted by the environment (n=38, 74.5%); would accept a marijuana cigarette if offered by friends (n=28, 82.4%); and would

be tempted to consume alcoholic beverages if, in the family, almost all consumed this substance (n=25, 73.5%). However, this same group would

disagree with using crack if offered by a friend during a party (n=154, 48.4%). (Table 3).

Table 3 – Attitudes of adolescents who consumed some drug. João Pessoa, Paraíba, Brazil – 2018. (N=324)

Attitude Consumption of any drug	Yes n(%)	No n(%)	p-value of the chi- square test(1)	P Value	V of Cramer
If I was with my friends at a party and they encouraged me to drink alcohol, I might drink more than usual					
I disagree	77(33.8%)	151(66.2%)	64.745	-	-
I neither disagree nor agree	37(77.1%)	11(22.9%)	-	0.001	-
I agree	42(87.5%)	6(12.5%)	-	-	0.447
If, in my group of friends, almost everyone consumes alcoholic beverages, I am “tempted” to drink more, because the environment is suitable.					
I disagree	84 (37.8%)	138(62.2%)	30.654	-	-
I neither disagree nor agree	34(66.7%)	17(33.3%)	-	0.000	-
I agree	38(74.5%)	13(25.5%)	-	-	0.308
If I were with my friends at a party, and they offered me a marijuana cigarette, I would take it.					
I disagree	115(42.0%)	159(58.1%)	27.144	-	-
I neither disagree nor agree	13(81.3%)	3(18.8%)	-	0.001	-
I agree	28(82.4%)	6(17.6%)	-	-	0.289
If almost everyone in my family consumed alcohol, I would be “tempted” to consume alcohol.					
I disagree	102(41.0%)	147(59.0%)	22.297	-	-
I neither disagree nor agree	29(70.7%)	12(29.3%)	-	0.011	-
I agree	25(73.5%)	9(26.5%)	-	-	0.262
If I were with my friends at a party, and they encouraged me to use crack, I would accept					
I disagree	154(48.4%)	164(51.6%)	0.537	-	-
I neither disagree nor agree	1(33.3%)	2(66.7%)	-	0.764	-
I agree	1(33.3%)	2(66.7%)	-	-	0.041

Source: Created by the authors.

Note: Conventional signal used:

- Numerical data equal to zero not resulting from rounding.

(1) For proportion comparison.

Similarly, the group of adolescents who did not use any drug would agree to consume alcoholic beverages if they were encouraged by friends at a party (n=74, 86.0%) or not to feel different from their friends (n=3, 60.0%); would agree to consume cigarettes (tobacco) if this

attitude was common in the family, because the environment would be adequate (n=9, 56.3%); as well as how tempted to use other drugs, if this consumption were common in the family (n=9, 52.9%). (Table 4).

Table 4 – Attitudes of adolescents who did not consume drugs. João Pessoa, Paraíba, Brazil – 2018 (N=324)

Attitude	Yes n(%)	No n(%)	p-value of the chi- square test(1)	P Value	V of Cramer
Consumption of any drug					
If I were with my friends at a party, and they encouraged me to drink alcohol, I would accept					
I disagree	141(72.7%)	53(27.3%)	88.747	-	-
I neither disagree nor agree	15(34.1%)	29(65.9%)	-	0.523	-
I agree	12(14.0%)	74(86.0%)	-	-	0.001
If, in my group of friends, some of them use drugs, I would probably end up using them, so as not to feel different.					
I disagree	150(47.9%)	163(52.1%)	0.963	-	-
I neither disagree nor agree	4(66.7%)	2(33.3%)	-	0.118	-
I agree	2(40.0%)	3(60.0%)	-	-	0.055
If, in my family, almost everyone smokes cigarettes (tobacco), I will end up smoking, because the environment is suitable					
I disagree	136(46.7%)	155(53.3%)	2.520	-	-
I neither disagree nor agree	11(64.7%)	6(35.3%)	-	0.284	-
I agree	7(43.8%)	9(56.3%)	-	-	0.088
If in my family some people use drugs, I am “tempted” to use drugs.					
I disagree	137(47.9%)	149(52.1%)	0.166	-	-
I neither disagree nor agree	11(52.1%)	10(47.6%)	-	0.920	-
I agree	8(47.1%)	9(52.9%)	-	-	0.023

Source: Created by the authors.

Note: Conventional signal used:

- Numerical data equal to zero not resulting from rounding.

(1) For proportion comparison.

Discussion

In the present study, most adolescents reported not using any drugs. This reality is evidenced in another Brazilian study, in which adolescents stated that they did not consume tobacco (50.4%), alcohol (82.5%) or illicit drugs (94.7%)⁽¹²⁾. Questioning data, when compared to national population-based survey statistics. These indicate, in addition to inconsistencies in the adolescents' responses, because they state not to use substances, but inform the age at which they first had contact with it, that the adolescent's attitude towards drug use has shown the beginning of experimentation and consumption at an increasingly early age⁽⁶⁾.

From the above, we question about fear, taboo and prejudice that integrate the theme of drug use, which may inhibit the self-declaration of the attitude reality adopted by these adolescents

and was perceived in this study, given the ambivalence of responses among those who declared not to use drugs, when they reported that they would accept to consume alcohol, at the encouragement of friends, but would refuse this consumption, even feeling different from your group.

Some adolescents claimed to have already tried illicit drugs (4.9%), a percentage lower than that found in another study (15.8%), conducted with 1,154 school adolescents from the public school system of Olinda, Pernambuco. In this study, it was identified that the variable that was most strongly associated with the use of illicit drugs (marijuana, cocaine or inhalers) among adolescents was binge drinking (harmful consumption of the substance). In addition, age in the use of illicit drugs usually occurred in intermediate adolescence. The religion factor

showed that the highest consumption among adolescents occurred among those who reported not having religion⁽¹³⁾.

Regarding the high trend found in this study, in the group of adolescents who used some type of drug, authors state that, to maintain this consumption, most cases of alcohol and other drug abuse start between 13 and 18 years and are related to the use that goes up to the adult period. Measures to prevent the use of substances and effective treatment strategies, in situations where the use already happens, would benefit these adolescents⁽¹⁴⁾.

Another fact observed is that the context, environment and type of substance offered seem to influence the attitude of these adolescents, since, in this study, situations related to friendship, family and licit drugs were associated with the trend to use drugs. In this sense, authors affirm that the influence of the family and social networks on the use of drugs is evident, when, in the composition of this network, there are members who make use of them⁽¹⁵⁾. In relation to the acceptance to use licit drugs, it is observed that adolescents often do not consider them as drugs and also consider licit as "good" and illicit substances as "bad"⁽¹⁶⁾.

A study that sought to identify social representations and attributions of causality to drug use by adolescents obtained as results that, for participants, the social representation of drugs is organized around aspects related to the consequences of use, such as addiction, trafficking, dependence, destruction and violence. For adolescents, the notion of drugs was structured mainly around the elements addiction, marijuana and death; what led someone to use drugs was the influence of other people, family difficulties, curiosity, need for acceptance among peers and misinformation⁽¹⁷⁾.

The association of religion with the low trend to use any drug was verified in this study and in a study that sought to identify the relationship between religion, religiosity and alcohol consumption in a sample of 2,890 adolescents in Madrid, Spain. It found that religion and religiosity in Spanish adolescents seemed to

be related to the low use of the substance⁽¹⁸⁾. Personal belief promoted a better understanding of oneself, relieving internal and external conflicts inherent to adolescence⁽¹⁹⁾. In addition, religious principles guide adolescents in their attitudes and can distance them from risky behavior for drug use and other behaviors considered inappropriate to religious standards⁽²⁰⁾.

The adequacy of social behavior, by regulation or mimicry, is a natural characteristic of adolescents, when it comes to insertion and adaptation to their peers, aiming at social valorization, popularity and belonging to the group. In this sense, the leader of the group of adolescents will be recognized as an example to be followed and will play an important role in the attitudes of the members, who will present a trend to reproduce their behaviors, including the consumption of alcohol and other drugs⁽²¹⁾.

The family context can be seen as a protective factor and as a risk factor for drug use. The use of substances by parents and the absence of affective bonds make their children more prone to the use of alcohol and other drugs. This is because substance use disorders by parents are often characterized by an environment of rearing children with deficient parental skills, disadvantaged contexts and adverse childhood experiences⁽²²⁻²⁴⁾.

In the present study, adolescents who did not use drugs stated that they could be tempted to consume them, if there was this habit in the family, that is, there would be a trend to reproduce this behavior. This evidence shows that the family influences the construction of the adolescent's identity, through the transmission of patterns of values and behaviors⁽²⁵⁾.

Behavioral reproduction integrates social learning, which occurs through the observation and reproduction of the behavior of the other and the consequences arising from this context. Thus, faced with a positive consequence, there will be a trend to repeat the learned attitude⁽²⁶⁾. Moreover, drug use modifies sense perception, which can lead adolescents to distortions of reality and the search for positive consequences to justify this use.

Adolescents had a trend of behavioral reproduction of alcohol and other drugs. Therefore, health education strategies would be necessary to aim at prevention for the use of these substances, involving adolescents, friends and family members, in order to build a collective knowledge that encourages them to adopt preventive and health-promoting attitudes.

In Brazil, since 2013, the Ministry of Health, in partnership with agencies that act in the prevention of drug use in the country, has been investing in the adaptation, implementation, evaluation and dissemination of three prevention programs originated in other countries (*Programa Famílias Fortes, Jogo Elos* and *#Tamojunto*), on the use of drugs among students and Brazilian communities. The latest evaluations of these programs, however, showed that they were ineffective, since the positive effects were not observed in the long term and negative effects, such as increased aggressiveness and disruptivity, were observed among the students evaluated as cooperative at the beginning⁽²⁷⁾. Thus, it is perceived the need to implement prevention programs that consider local data and the characteristics and attitudes towards the consumption of alcohol and other drugs of its target audience.

In this scenario, nurses, the main active in care through health education, have an essential role in the development of preventive and educational skills among adolescents, being able to create groups with health promotion purposes and aiming to make them aware of the importance of preventing the use of alcohol and other drugs, so that they become able to deal with their own decisions and present positive attitudes of self-care⁽²⁸⁾.

As limitations of the study, its development only in the public teaching scenario and the acquisition of data through a self-completion instrument stand out, which generated some losses and possible influence of the classroom environment.

The results of the study can guide the creation and implementation of health education actions and programs to prevent the use of alcohol and

other drugs among adolescents, by enabling the knowledge of the factors that favor the use of substances among this public.

Conclusion

The study allowed identifying that the attitudes of adolescents about the consumption of alcohol and other drugs were influenced by the environment, friends and family, in addition to the type of substance offered. Adolescents who did not use drugs showed a low trend to use them, but, in return, would agree to consume alcoholic beverages if they were encouraged by their friends at a party. The group of adolescents who used some type of drug showed a high trend to maintain this attitude. Religion was identified as a protective factor for this use.

There was a trend of behavioral reproduction of alcohol and other drugs consumption by adolescents, and health education strategies were necessary to prevent the use of these substances, which considered not only the adolescent, but also friends, family members and representative people for them.

Other studies should be developed in this area, in other locations, as well as in private education institutions, in order to understand better the attitude of adolescents towards the consumption of alcohol and other drugs, considering the different scenarios in which the adolescent is.

Collaborations:

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2 – writing of the article and relevant critical review of the intellectual content: Bruna Vitória de Oliveira Ferreira, Iracema da Silva Frazão, Laura Cristhiane Mendonça Rezende Chaves, Jordana da Silva Souza, Vanessa Carla do

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4 – final approval of the version to be published: Iracema da Silva Frazão and Selene Cordeiro Vasconcelos.

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