ESTUDOS DE PSICOLOGIA
Psychological Studies

RESEARCH REPORT

Health Psychology

Editor
Raquel Souza Lobo Guzzo

Conflict of interest
The authors declare that there are no conflicts of interest.

Data availability
The research data are available in the body of the document.

Received
January 1, 2024

Final version
November 8, 2024

Approved
June 26, 2025

Sociodemographic profile of individuals undergoing treatment for substance use disorders

Perfil sociodemográfico de indivíduos em tratamento para transtornos relacionados a substâncias psicoativas

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Article based on the dissertation by L. M. S. MATTOS, entitled "*Esquemas iniciais desadaptativos associados ao risco de suicídio em pacientes com transtornos relacionados a substâncias psicoativas*". Fundação Universidade Federal de Rondônia, 2024.

How to cite this article: Mattos, L. M. S., & Calheiros, P. R. V. (2026). Sociodemographic profile of individuals undergoing treatment for substance use disorders. *Estudos de Psicologia* (Campinas), *43*, e10693. https://doi.org/10.1590/1982-0275202643e10693

Abstract

This study aims to describe the sociodemographic profile of patients undergoing treatment for substance use disorders, as well as to analyze their usage patterns: most commonly consumed substances, previous attempts to discontinue use, and level of intervention required. A sociodemographic questionnaire and the Alcohol, Smoking and Substance Involvement Screening Test were administered. The sample consisted of 150 male participants (94.7%), aged between 26 and 59 years (71.1%), with an income below the minimum wage (58.7%), single (83.3%), and with incomplete or complete elementary education (59.3%). The most commonly used substances were alcohol (94.7%) and tobacco (89.3%). Among participants, 47.3% required a high level of intervention for cocaine/crack cocaine use. The findings highlight the need to develop public policies tailored to this population's specific needs in order to provide more effective treatment options.

Keywords: Behavior, addictive; Mental health; Psychotropic drugs; Substance-related disorders.

Resumo

O objetivo deste trabalho é descrever o perfil sociodemográfico de pacientes em tratamento para abuso de substâncias, bem como analisar o perfil de uso: substância mais consumida, tentativas anteriores de interromper o uso e grau de intervenção necessária. Foi aplicado o questionário de dados sociodemográficos e posteriormente o Teste de triagem e envolvimento com álcool e outras drogas. Foram 150 participantes do gênero masculino (94,7%), com idades entre 26 e 59 anos (71,1%), renda menor que um salário mínimo (58,7%), solteiros (83,3%), ensino fundamental completo/incompleto (59,3%). A substância mais consumida pelos participantes foi Álcool (94,7%) e Tabaco (89,3%). Na amostra estudada (47,3%) dos participantes demandam alto grau

de intervenção para uso de cocaína/crack. Os resultados chamam a atenção para a necessidade de desenvolver políticas públicas voltadas para estas especificidades com o intuito de fornecer tratamentos mais eficazes para essa população.

***Palavras-chave**: Comportamento aditivo; Saúde mental; Substâncias psicoativas; Transtornos relacionados ao uso de substâncias.*

The use of psychoactive substances is a common practice among individuals; however, this practice can become harmful. According to the Diagnostic and Statistical Manual of Mental Disorders (DSM-5-TR) (American Psychiatric Association, 2022), substance use disorders are characterized by impaired control over substance use, unsuccessful attempts to reduce consumption, an increased need for larger amounts in shorter periods, and multifactorial causes – biological, social, cognitive, and behavioral, among others. These disorders cause significant harm to the individual and those around them and often require treatment, which generates substantial costs to society.

Substance abuse is a global concern. The Second Brazilian Drug Report revealed that in 2021, Brazilian health services recorded 400,300 visits for mental disorders related to alcohol and drug use (Opaleye et al., 2021). According to data from the Primary Health Care Secretariat, this represents a 12.4% increase compared to 2020, which saw 356,000 recorded cases. Among these, alcohol abuse was the most frequently reported issue, and the most commonly affected age group was between 25 and 29 years (Ministério da Saúde, 2022).

Between 2008 and 2015, Brazil's Northern region was the only one that did not experience a decline in substance-related hospitalizations. Additionally, in 2015, this region reported the highest rate of emergency visits involving alcohol compared to 2011. The state has also seen a rise in hospitalizations and specialized care demands, often exceeding the available number of treatment slots (Opaleye et al., 2021).

A survey conducted by the *Vigilância de Fatores de Risco e Proteção para Doenças* (Vigitel, Surveillance of Risk and Protective Factors for Chronic Diseases) indicated that in the city of Porto Velho, the capital of the state of Rondônia (Brazil), approximately 13.3% of residents are smokers and 21.7% consume alcoholic beverages. However, there is still a lack of research in the state addressing this issue and the sociodemographic profile of alcohol and drug users living in Rondônia (Ministério da Saúde, Secretaria de Vigilância em Saúde et al., 2022).

A study by Souza et al. (2021) conducted at a philanthropic hospital in the state of Paraná found that most substance users were male (83.5%) and reported harmful alcohol use (73.7%), with 44.8% requiring intensive treatment for alcohol consumption.

Regarding the profile of individuals seeking care at specialized health services in the *Triângulo Mineiro* region (Minas Gerais), Trevisan and Castro (2019) found that most users receiving treatment at the Centro de Atenção Psicossocial Álcool e Drogas (CAPS AD, Psychosocial Care Center for Alcohol and Other Drugs) were male (80.5%), aged between 41 and 60 years (45.8%), single (55.2%), and had not completed elementary education (38.4%). Alcohol was the most commonly used substance in the past month (77.8%), followed by tobacco, which was the second most frequently used substance over the participants' lifetime (58.3%).

A cross-sectional, retrospective study conducted by Santana et al. (2021) in the city of Sergipe (in the state of Alagoas) found that individuals registered at the local CAPS AD were predominantly male (91.1%), aged 35 or older (56.4%), single (76.9%), and either illiterate or had only elementary education (70.8%). The most frequently used substances were alcohol (40.4%) and, to a lesser extent, crack cocaine (6.9%).

Regarding the sociodemographic profile of individuals admitted to therapeutic communities, Madalena and Sartes (2018), in a study conducted in the city of Rio de Janeiro, found – based on structured instruments and semi-structured interviews – that crack cocaine users were predominantly male (67.6%), had never been married (60.6%), were approximately 30 years old (61.8%), and had experienced more than two years of educational delay (67.6%).

Another study by Mendes et al. (2022) examined the profile of individuals undergoing treatment for substance dependence in a therapeutic community in the city of Pinheiro, located in the state of Maranhão. All participants were male; 46.2% had not completed elementary education, and 73.1% were single. The most frequently used substances were alcohol and cannabis (34.6%).

Based on the available evidence and the limited number of studies conducted in the state of Rondônia, the present study aims to describe the sociodemographic profile of individuals admitted to therapeutic communities in the region and to analyze their substance use patterns, including the most frequently used substances, previous attempts to quit, and the level of intervention required.

Method

Participants

This study employed a non-probabilistic convenience sample consisting of 150 participants who, at the time of data collection, were undergoing treatment in therapeutic communities in the state of Rondônia. Inclusion criteria were: being 18 years of age or older, having completed at least elementary education, and demonstrating adequate mental capacity to respond to the questionnaires.

Instruments

A sociodemographic questionnaire was used to characterize the sample regarding identification and sociodemographic data (age, gender, marital status, education level, and social class), following the guidelines of the Brazilian Economic Classification Criteria. To assess substance use among participants, the Alcohol, Smoking and Substance Involvement Screening Test (ASSIST) was used. This is a structured questionnaire consisting of eight questions addressing the use of nine classes of psychoactive substances (tobacco, alcohol, cannabis, cocaine, stimulants, sedatives, inhalants, hallucinogens, and opioids). The questions assess lifetime and past three-month frequency of use, problems associated with use, concern expressed by others, failure to fulfill expected responsibilities, unsuccessful attempts to quit or reduce use, feelings of compulsion, and injection drug use (Henrique et al., 2004). Each item is scored on a scale from 0 to 4, yielding a total score ranging from 0 to 20. Scores between 0 and 3 indicate occasional use, 4 to 15 suggest problematic use, and scores above 16 are indicative of dependence.

Procedures

To collect data, the researchers first contacted the coordinator of the *Federação Brasileira de Comunidades Terapêuticas* (FEBRACT-RO, Brazilian Federation of Therapeutic Communities – Rondônia) to identify regulated communities. Subsequently, therapeutic communities in the state of Rondônia were contacted. After receiving authorization from each community coordinator, data collection began. Interviews were conducted in five municipalities

in Rondônia (Porto Velho, Candeias do Jamari, Ji-Paraná, Ouro Preto, and Cacoal) and took place on-site, conducted by a team of trained researchers.

Participants signed an Informed Consent Form (ICF). The sociodemographic questionnaire was completed individually, and the ASSIST was administered individually by the researchers, based on self-report. This study was approved by the Research Ethics Committee at the Federal University of Rondônia (approval no. 5.949.056).

Data Analysis

Data were analyzed using the IBM®SPSS® (version 21). Descriptive statistics were used to characterize the sample, including absolute and relative frequencies for categorical variables, and measures of central tendency and variability. A normality test was initially conducted.

Frequencies from both the sociodemographic questionnaire and the ASSIST instrument were analyzed to examine the participants' sociodemographic profile, the most frequently used substances, patterns of use, associated harms, and the level of intervention or treatment required for this sample.

Results

In terms of age, the majority of participants were between 26 and 59 years old (71.0%), followed by those aged 19 to 25 (19.2%). Only 3.0% were 18 years old, and 4.6% were over 60.

Regarding gender, 4.6% identified as female and 94.7% as male. The lower number of women reflects the difficulty in locating therapeutic communities that provide treatment for women; only one such facility was included in this study.

As for marital status, 83.3% of participants were single, while 16.7% were married or in a stable union.

Concerning income, 58.7% of participants reported earning less than the minimum wage, with some receiving government assistance; 31.1% reported earning between one and two minimum wages, while 10.0% reported earning more than three.

In terms of educational level, 59.3% had completed or partially completed elementary education, 36.7% had completed or partially completed high school, and only 4.0% had completed or partially completed higher education (Table 1).

Table 1
Sociodemographic data of the sample – Porto Velho, RO (Brazil), 2023

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Sociodemographic Variable	Total sample = 150	
	n	%
Age (years)		
18	3	2.0
19–25	29	19.3
26–59	111	74.0
Over 60	7	4.7
Gender		
Female	7	4.7
Male	143	95.3

Table 1
Sociodemographic data of the sample – Porto Velho, RO (Brazil), 2023

Sociodemographic Variable	Total sample = 150	
	n	%
Marital status		
Single	125	83.3
Married/Stable Union	25	16.7
Income		
Class D–E - Low income (< 1 minimum wage)	88	58.7
Class C–B - Lower-middle income (1–2 minimum wages)	47	31.3
Class A - Upper income (> 3 minimum wages)	15	10.0
Education		
Elementary (complete/incomplete)	89	59.3
High school (complete/incomplete)	55	36.7
Higher education (complete/incomplete)	6	4.0

Note: *n*: Sample size; %: Relative frequency. The minimum wage in Brazil in 2023 was BRL 1,320.00 per month.
Source: Associação Brasileira de Empresas de Pesquisa (2021).

Analysis of responses to the ASSIST revealed that the most commonly used substances among participants were: alcohol (94.7%), tobacco (89.3%), cocaine/crack cocaine (88.7%), and cannabis (78.7%). Other substances, such as inhalants, hallucinogens, and sedatives, had lower prevalence rates. Inhalants (e.g., glue and "lóló" – a drug similar to "poppers" in the UK) stood out with a 40.0% prevalence, while all other substances had rates below 25.0%. Additionally, 5.3% of participants reported having used injectable drugs, although not within the past three months (Table 2).

Table 2
Substance use frequency in the studied sample – Porto Velho, RO (Brazil), 2023

ASSIST data	Total sample = 150	
	n	%
Substance		
Tobacco	134	89.3
Alcohol	142	94.7
Cannabis	118	78.7
Cocaine/crack cocaine	133	88.7
Amphetamines or ecstasy	22	14.7
Inhalants	61	40.7
Hypnotics and/or sedatives	18	12.0
Hallucinogens	33	22.0
Opioids	4	2.7

Note: ASSIST: Alcohol, Smoking and Substance Involvement Screening Test; *n*: Sample size; %: Relative frequency.

Regarding substance-related problems, whether financial, legal, social, or health-related, 33.4% of alcohol users reported experiencing negative consequences in the past three months. Among users of other substances, 19.3% of tobacco users, 46.0% of cocaine/crack cocaine users, and 18.7% of cannabis users reported similar adverse outcomes.

When asked whether they had attempted to stop or reduce their substance use during the same period, 34.0% reported efforts to reduce tobacco use, 44.7% alcohol use, 52.0% cocaine/crack cocaine use, and 28.0% cannabis use (Table 3).

Table 3
Attempts to reduce or stop substance use – Porto Velho, RO (Brazil), 2023

ASSIST data	Total sample = 150	
	n	%
Substance		
Tobacco	51	34.0
Alcohol	67	44.7
Cannabis	42	28.0
Cocaine/crack cocaine	78	52.0

Note: ASSIST: Alcohol, Smoking and Substance Involvement Screening Test; *n*: Sample size; %: Relative frequency.

Lastly, the study assessed the degree of intervention needed based on participants' ASSIST scores. Intensive intervention – defined as a score of 27 or higher – was indicated for 13.3% of tobacco users, 33.3% of alcohol users, 47.3% of cocaine/crack cocaine users, and 11.3% of cannabis users (Table 4).

Table 4
Need for intensive treatment by substance – Porto Velho, RO (Brazil), 2023

ASSIST data	Total sample = 150	
	n	%
Substance		
Tobacco	20	13.3
Alcohol	50	33.3
Cannabis	17	11.3
Cocaine/crack cocaine	71	47.3

Note: ASSIST: Alcohol, Smoking and Substance Involvement Screening Test; *n*: Sample size; %: Relative frequency.

Discussion

Based on the data presented, the majority of participants were male (94.7%), aged between 26 and 59 years (71.1%), with a monthly income below the minimum wage (58.7%), single (83.3%), and had completed or partially completed elementary education (59.3%). The most frequently used substances were alcohol (94.7%), tobacco (89.3%), cocaine/crack cocaine (88.7%), and cannabis (78.7%). These findings align with existing literature on the sociodemographic characteristics of individuals with substance use disorders and on commonly used substances. In studies involving the use of multiple substances, alcohol is often identified as the most prevalent – an outcome consistent with the present study.

Although most studies focus on the sociodemographic profiles of individuals seeking care in specialized outpatient services rather than inpatient settings, Sezorte and Silva (2019) examined the profile of male users hospitalized in a therapeutic community. The majority were between 39 and 45 years old (28.9%), had not completed elementary education (50.0%), were single (63.2%), and earned less than the minimum wage (86.8%). In contrast to other findings, the most commonly used substance in their study was cannabis (84.2%), followed by alcohol (73.7%), crack cocaine (68.4%), and cocaine (60.5%).

Given the consistency of findings regarding the sociodemographic profile of individuals with substance use disorders, it is important to consider these characteristics as potential risk factors for

the harmful use of psychoactive substances. Individuals who fall within these demographic categories may be more vulnerable to dysfunctional behaviors. Previous studies have demonstrated that higher levels of education and income are associated with lower rates of substance use, identifying education as a protective factor by facilitating greater access to information and health services (Abreu et al., 2016). Moreover, the data suggest that being single may also constitute a risk factor, as having a partner can provide a support network that reduces the likelihood of substance use.

In terms of dependence severity, although alcohol was the most frequently used substance in the sample (94.7%), participants most often reported attempts to reduce their use of cocaine and crack cocaine (52.0%). This substance group was also most frequently associated with the need for intensive treatment (47.3%). This finding may be attributed to the substantial harms linked to its use, which, according to reports from both participants and their families, were often the primary reasons for seeking hospitalization.

This study was conducted in therapeutic communities in the state of Rondônia, Brazil. One of its main limitations was the difficulty in locating communities that offered treatment for women. As a result, it was not possible to make gender comparisons. Despite these limitations, the study contributes to the advancement of mental health care in psychiatry and psychology, particularly in the treatment of substance use disorders.

Final Consideration

Based on the analysis, it can be concluded that multiple risk factors are associated with substance use disorders. These factors may contribute not only to the onset of substance use but also to barriers in accessing and maintaining treatment. Low educational attainment often limits access to information and health services, while low income and transportation difficulties may hinder treatment adherence.

Alcohol was the most frequently consumed substance, likely because it is often the initial drug of use. However, in the present sample, cocaine and crack cocaine use were more strongly associated with the need for intensive treatment and with more frequent attempts to reduce consumption. This may be explained not only by the severe consequences linked to these substances, but also by a tendency among users to underestimate the harms of alcohol when it is consumed in conjunction with other drugs.

Therefore, these social determinants should be considered in the development of public policies aimed at reducing disparities in treatment access and outcomes. By informing the design of improved treatment approaches, the findings of this study help advance both psychiatry and psychology in addressing substance use disorders. Finally, further research of this nature is essential – particularly in the Northern region of Brazil – given its distinct sociocultural and geographic characteristics, which differ substantially from those of other parts of the country.

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Acknowledgments

We extend our deepest gratitude to our colleague, master's degree holder, and friend, Nádia Valéria Moreira Santos, for her contribution and dedication to the data collection process, including administering the instruments and conducting participant interviews.

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