

## Blind men and women' perceptions of the use of illegal drugs\*

*A percepção de cegos e cegas diante das drogas*

*La percepción de ciegos y ciegas frente a las drogas*

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### ABSTRACT

**Objectives:** To explore and describe similarities and differences between blind men and women's perceptions of the use of illegal drugs. **Methods:** A qualitative descriptive study was conducted from October 2006 to March 2007 with blind men and women from an association of blind in Fortaleza, CE, Brazil. Data were collected through interviews. The sample consisted of 7 men and 5 women. The sample size was determined through theme saturation. **Results:** Content analysis suggested three themes: (1) what I know – participants define what illegal drug is and the scope of the problem; (2) what I experienced – they report on their personal and family experiences with the use of illegal drugs; and (3) what I think about prevention – they describe their opinions about strategies that can be used for the prevention of the use of illegal drugs. **Conclusions:** Illegal drugs were understood as a public health problem, affecting the user's lives and the society as a whole. Relatives, friends, and the media may or may not influence the use of illegal drugs, which strengthens the relevance to address illegal drug prevention among the blind as well as health promotion activities.

**Keywords:** Visually impaired persons; Substance-related disorders; Behavior

### RESUMO

**Objetivo:** Compreender a percepção de mulheres e homens cegos sobre as drogas, comparando semelhanças e diferenças. **Métodos:** Estudo descritivo, qualitativo, realizado em uma associação de cegos, em Fortaleza-CE, entre outubro de 2006 e março de 2007. A coleta de dados utilizou a entrevista com questão norteadora. A amostra foi limitada por saturação com cinco mulheres e sete homens. Adotou-se o método de Análise de Conteúdo, obtendo-se três temas. **Resultados:** Os temas - O que sei - definem o que é droga e abrangência desta problemática; O que vivi - relatam repercussão das experiências pessoais e familiares com o uso das drogas; e O que penso sobre a prevenção - opinam sobre estratégias de prevenção. **Conclusões:** A problemática é entendida como agravante à saúde pública, afetando a sociedade e a vida do usuário. As influências de familiares, amigos e mídia aproximam às drogas ou não, reforçando a pertinência da promoção da saúde e prevenção entre os cegos. **Descritores:** Portadores de deficiência visual; Transtornos relacionados ao uso de substâncias; Comportamento

### RESUMEN

**Objetivo:** Comprender la percepción de mujeres y hombres ciegos sobre las drogas, comparando semejanzas y diferencias. **Métodos:** Se trata de un estudio descriptivo, cualitativo, realizado en una asociación de ciegos, en Fortaleza-CE, entre octubre del 2006 y marzo del 2007. Para la recolección de datos se utilizó la entrevista con pregunta norteadora. La muestra conformada por cinco mujeres y siete hombres fue determinada por saturación. Se adoptó el método de Análisis de Contenido, obteniéndose tres temas. **Resultados:** Los temas – ¿qué sé? - definen lo que es la droga y la magnitud de esta problemática; ¿qué vivi? – relatan la repercusión de las experiencias personales y familiares con el uso de las drogas; y ¿qué pienso sobre la prevención? – reflejan las estrategias de prevención. **Conclusiones:** La problemática es entendida como un agravante a la salud pública, afectando a la sociedad y la vida del usuario. Las influencias de familiares, amigos y los medios de comunicación aproximan a las drogas o no, reforzando la pertinencia de la promoción de la salud y prevención entre los ciegos. **Descritores:** Personas con daño visual; Trastornos relacionados con sustancias; Conducta

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## INTRODUCTION

Drug is described as any substance that, when absorbed into the body of a living organism, alters its functioning, affecting several aspects of life. As for its forms, drugs can be classified into stimulants and hallucinogens. Regarding the characteristics, they can be licit or illicit; natural, synthetic or semi-synthetic; socially accepted or rejected; with a therapeutic purpose or not<sup>(1)</sup>.

Among the guidelines of the National Policy Against Drugs is to prevent and promote health as a priority against drug use/abuse, because it is the most efficient intervention with the lowest cost to society and government in general<sup>(2)</sup>. Despite this assumption, still, the number of preventive interventions that are really effective is still small, compared to the magnitude and severity of the problem<sup>(3)</sup>.

In this context, for the success of prevention programs, especially in primary care, it is essential to know the needs and characteristics of people with drug problems that will receive treatment by asking their opinions and assessing their knowledge on the issue, so that relevant interventions can be made, leading to reflections and a possible change in behavior<sup>(3)</sup>.

Considering, for example, disabled people, according to the last demographic census, there are in Brazil around 24.6 million people with some kind of disability, accounting for approximately 14.5% of the total population. Among these people, 148 thousand have declared to be blind and 2.4 million said they found it very difficult to see<sup>(4)</sup>.

However, the presence of sensory disability does not limit the growth and development of blind people or their introduction in the job market, in universities, and their contact with several social groups. Thus, they are susceptible to live with different groups and among the curiosity for experiencing new situations drug use may also be include. That is, any individual when facing favorable conditions can develop some kind of addiction or dependence.

In agreement with the study on alcohol use among blind people, those frequently using alcohol were males (75%); with ages ranging from 11 to 30 years old (66.6%); they had not finished high school (50%); they drank for fun (67%) and had drunk alcohol in the previous weekend (66.6%)(5). Surveys such as this one, show the need for greater knowledge on drug use among blind people, including illicit drugs. Therefore, interventions should be carried out to prevent initial contact and, if necessary, to decrease current use.

Reports of studies regarding the drug problem with blind people are rare, even with regards to prevention. Because of this limitation, the objective was to compare blind people drug perception, determining their similarities and differences.

## METHODS

Descriptive study with a qualitative approach carried out in an association for the blind in the city of Fortaleza, Ceará-Brazil, between October 2006 and March 2007. With over twenty years of operation, this foundation has 120 people between associate members and participants with different ages, with a greater presence of young adults and adolescents. Their activities are connected with education, professional training and rehabilitation of blind people, as well as training of human resources to work with this type of people.

There were 12 people from both genders at different ages taking part in the study. Participants' selection criteria were to be interested and available to take part in the study, after an open invitation had been made to the members of the association. As there were people interested to take part, the researcher made a previous scheduling with participants and, on the scheduled day the interview was made in a place provided by the institution.

Data collection used open interviews introduced by the guiding question: Give us your perception on the problem of drug use. With participants' permission, the interview was recorded using a portable recorder. As recommended, data collection was completed by saturation, which is obtained when there is a feeling of closure because new data bring repeated information.

Statement analysis was carried out using Content Analysis<sup>(6)</sup> which proposes three steps to assess the studied material: pre-analysis, exploration of the material (codification and categorization) and treatment of the results (inference and interpretation)<sup>(6)</sup>. First, in the pre-analysis stage, the material was organized by repeated listening and literal transcription of the content, initial ideas on the statements of blind men and women on drugs were systematized. Next, the material was explored and codification started by raising the most frequent theme in the speech of blind people, and then they were categorized according to the aspects found on the drug problem. These aspects approached mainly their knowledge on drugs; their personal, family and social experiences regarding this issue and aspects concerning prevention of drug abuse. Finally, when results were treated, inferences on the results were performed as well as their interpretations with the help of the literature.

As this is a study with a specific population and a limited number of participants, sociodemographic characteristics were not significant, however, thematic categories and especially the differences between genders were emphasized.

As required, the project has been approved by the Research Ethics Committee of the Hospital Complex, Universidade Federal do Ceará, under protocol # 126/06. Guidelines for research involving human beings were followed according to Resolution # 196/96 of the National Health Council: respect to confidentiality,

minimize the impact of the study on the subject's physical and mental integrity, be entitled to leave the survey at any time, and follow-up results. Free and Informed Consent was read and explained by researchers to participants who gave their written consent in the presence of a sighted witness.

## RESULTS

Five blind women and seven blind men have been interviewed. Ages ranged from 15 to 37 years old, and schooling from incomplete primary school to incomplete university. Two interviewees were married. Pictures 1

**Picture 1** – Theme 1: What I know about drugs

Categories	Men	Women
Problem definition	<ul style="list-style-type: none"> <li>- It is extremely harmful in all senses; the social and intellectual aspect. (H1)</li> <li>- It is a waste of what you have in life. (H2)</li> <li>- When it is placed on the Child and Adolescent Statute and nothing can be done, underage individuals start using drugs [...] selling, becoming potential users [...] and they will be adults tomorrow. (H3)</li> </ul>	<ul style="list-style-type: none"> <li>- The lead to violence and death. I think if there were no drugs the world would not be so violent. (M3)</li> <li>- Nowadays it is all over the world, it is popular among youngsters, adolescents and children, everybody is using it. (M5)</li> <li>- Some parents ask children to buy them cigarettes and this is wrong. (M1)</li> <li>- Everything is too loose; it is very easy for children to try them. (M4)</li> </ul>
Definition of the word drug	<ul style="list-style-type: none"> <li>- "Drug is a drug*" (*there is a play on words in the Portuguese language where drug also means something that sucks) This is to show that it is bad. (H5)</li> <li>- It is a way of retreating from society. (H4)</li> <li>- It is the evil of society. (H2)</li> </ul>	<ul style="list-style-type: none"> <li>- People use it and it their lives turn upside down, the addiction continues until their lives are totally destroyed. (M4)</li> </ul>
Types of drugs	<ul style="list-style-type: none"> <li>- Marijuana [...] it starts with glue, solvents, , crack, and cocaine powder, hashish, opium, LSD, ecstasy [...], psychotropic substances, cigarette [...] and alcohol. (H3)</li> </ul>	<ul style="list-style-type: none"> <li>- It is not only marijuana; a drug relates to all kinds of addiction, including alcohol and cigarettes. (M1)</li> <li>- The use of medications such as drugs, injections and alcohol. (M2)</li> <li>- Cocaine, that is the one I know most about. This is the one that comes in pills, right? (M5)</li> </ul>
Drug effects	<ul style="list-style-type: none"> <li>- It affects the brain, the head, the whole body and the physical structure. (H1)</li> <li>- Some make people happier, other make people more active. (H6)</li> </ul>	<ul style="list-style-type: none"> <li>- It destroys families, the lives of innocent people and makes people do bad things. (M4)</li> <li>- There are drugs that make you away from reality, you get high, imagine things. (M3)</li> </ul>
Reasons that lead to use	<ul style="list-style-type: none"> <li>- Many times people resort to something [...] (H2)</li> <li>- Many times they use drugs to fulfill something that is missing. (H5)</li> <li>- Wherever you go there is advertisement. Television influences a lot. (H4)</li> <li>- Cultural drug is when everyone is drinking and smoking and you don't do it, so you start to feel embarrassed. (H3)</li> </ul>	<ul style="list-style-type: none"> <li>- It is a way to run away from family problems, lack of care, lack of job, so they get the nerve and steal. (M2)</li> <li>- They do not study, do nothing, don't work and in the end they are idle. (M1)</li> <li>- There is no support from the father or mother to speak frankly. (M3)</li> <li>- It is because it is forbidden. If it is forbidden I'll try, if it is forbidden, here I go. (M4)</li> </ul>

**Picture 2** – Theme 2: What I have experienced regarding drugs

Categories	Men	Women
Personal experience	<ul style="list-style-type: none"> <li>- Since I was a child I am used to drinking beer. (H3)</li> <li>- I have been offered, but I have not used... (H1)</li> <li>- I felt lonely; I wanted something to fulfill my life. (H1)</li> </ul>	<ul style="list-style-type: none"> <li>- I have already tried cigarettes, it is bitter. (M3)</li> <li>- I have tried alcohol to feel its taste. I felt light as if I were in another world. (M1)</li> <li>- I never touched it, I never felt like it, but I have already been offered, even at school. (M5)</li> </ul>
Why do you use it	<ul style="list-style-type: none"> <li>- My father let me [...] when there was beer at home, if they did not drink, I drank. (H3)</li> <li>- [...] At first it was marijuana, and then it was crack. (H1)</li> <li>- Because other people were drinking you find it nice and I though I was also doing the right thing, and it was cool. (H2)</li> <li>- Unfortunately, the friends I had were always drinking and all [...] I really liked them, I did not want to lose touch with them. (H5)</li> <li>- I thought that drinking would alleviate my suffering, but when the effect passed, I felt worse than before. (H6)</li> </ul>	<p>-----</p>

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Categories	Men	Women
Why don't you it any longer	<ul style="list-style-type: none"> <li>- I lost my senses, and did things that were completely outside my personality [...] then I would have a moral hangover. (H2)</li> <li>- After I lost my senses I did dangerous things such as running on the streets. (H2)</li> <li>- The experience is nothing, this has no future; it does not do any good to people. (H7)</li> <li>-The person has to decide. If the person does not want to give up, nothing will make them. (H4)</li> <li>- There was a soccer player [...] I saw his testimony and I was very touched by it and I made a decision. Thank God, Jesus was wonderful and He took away from me this desire to drink. (H3)</li> </ul>	_____
Family experience		
Living with users	<ul style="list-style-type: none"> <li>-My father drank [...] I used to see it since I was a child. (H3)</li> <li>- At home I am the only one who does not smoke. (H7)</li> <li>- There are people in the family that smoke I am deeply sorry for them, because cigarette is a slow suicide. (H2)</li> </ul>	<ul style="list-style-type: none"> <li>- My youngest (brother) drinks a little. (M2)</li> <li>- My brother-in-law took drugs. (M4)</li> <li>- My mother and my father smoke. (M3)</li> </ul>
Losses	<ul style="list-style-type: none"> <li>- He drank and wanted to break everything, we were scared. (H3)</li> <li>- Shame, we were embarrassed because we had to leave our house and the neighbors saw, night? [...] (H4)</li> <li>- There comes a time when you get used to it. (H1)</li> </ul>	<ul style="list-style-type: none"> <li>- She (mother) gives me (drink) and she tells me to be careful. (M1)</li> <li>- The relationship with the family is a little hard. (M4)</li> <li>- Parents drink, an alcoholic father, complicated mother. (M5)</li> </ul>

**Picture 3 – Theme 3: What I think about drug abuse prevention**

Categories	Men	Women
Dialog	<ul style="list-style-type: none"> <li>- It also starts at home, talking is important regardless of being disabled. (H6)</li> <li>- I think families nowadays don't talk. (H7)</li> <li>- My father gave advice – not to me, because of my disability I did not leave the house very often – but he always gave advice to my siblings. (H1)</li> <li>- They never sit down with us and talked [...] then he, my brother, started to drink, then it was too late. (H1)</li> </ul>	<ul style="list-style-type: none"> <li>- When we talked about these things, they thought it was not the time to explain. (M3)</li> <li>- Parents from other generation are colder, quieter and maybe they are afraid to say something is forbidden. (M4)</li> <li>- With my friends, they have told me how awful this is. (M2)</li> </ul>
How they inform themselves	<ul style="list-style-type: none"> <li>- This information we get through our own experience. (H2)</li> <li>- It was through the press, radio, television. We listen to it a lot on the radio. (H6)</li> <li>- I've never taken part in any kind of class about this, not even when I studied in a regular school, or when I started studying at ACEC. (H3)</li> </ul>	<ul style="list-style-type: none"> <li>- Lecturers and we had the cultural week. (M5)</li> <li>- There was a show at TV Cultura approaching drugs. (M2)</li> <li>- In school there has never been drug prevention. (M1)</li> </ul>
How to inform	<ul style="list-style-type: none"> <li>- Presenting more lecturers in schools approaching the issue. The press should show examples just as they do with cigarettes. (H7)</li> <li>- Visually impaired people need to touch things [...] to have an idea, a notion. (H3)</li> <li>- In addition to speak, they should show testimonies, bring people who abused drugs and alcohol and who have stopped. (H2)</li> </ul>	<ul style="list-style-type: none"> <li>- Lecturers in school every day. (M2)</li> <li>- To be disciplined about the subject, make books available at school. (M3)</li> <li>- Groups, people who have taken these drugs, who are now recovering, they should tell us about their experiences. (M4)</li> <li>- To put children to practice sports, encourage them to go to cultural activities, going to the theater. (M1)</li> </ul>

to 3 present results from the interview analysis, grouped in the themes: What I know about drugs. My drug experiences. My opinion on drug prevention. Each theme has its respective categories.

## DISCUSSION

The opinion built about a problem is influenced by several factors, such as family values; the media that brings concepts that induce to the common sense; the

life with friends and, especially, the personal experience with the problem. Therefore, to express their perception of drugs enabled blind people to use ready statements or just make assumptions and also to observe the way this problem influences their personal, family and collective environment. That is, they form their idea about the drug problem in society, with a perception that is critical at times and common at other times.

Regarding personal effects, blind men mention the disadvantages that drug abuse cause to human beings:

impairments in physical and mental health, negligence in work and study. Literature mentions loss in family ties, financial problems; work and traffic accidents with real risk of death<sup>(7)</sup>. Reflections about the Brazilian legislation regarding drug abuse show that these people see it as a way to increase drug traffic, especially the Brazilian Child and Adolescent Statute, which they consider protectionist regarding under age users and/or criminals. These are complex issues demanding a careful discussion.

The opinion of blind women about the drug problem corroborated that of experts who state that drugs hinder the possibility of a healthy life. It is associated as cause for criminality, violence, social, family, and personal disruption<sup>(7)</sup>.

Although the Brazilian legislation forbids the use of legal drugs such as cigarettes and alcohol by those younger than 18 years old, these drugs are common and access of young people to them is easy<sup>(8)</sup>. Overall, measures that are basically to repress are commonly used to face this problem, both regarding the use and trading<sup>(9)</sup>.

Blind women associate drug use to non-compliance with the law and to the influence of the freedom children have to use legal drugs, when even parents themselves ask their younger children to buy them cigarettes and to light it for them<sup>(10)</sup>. This attitude makes children live with drugs and encourages their use.

In the definition of drugs, main types of drugs and best known effects have been mentioned. This is a relevant aspect, since knowledge prevents people from taking drugs. According to a study, the access to information prevents drug use by young people at risk<sup>(10)</sup>.

Men and women interviewed mentioned some types of drugs, but their speeches were mainly marked by alcohol, cigarette and marijuana, better known drugs, more commonly broadcast by the media. Some of them also mentioned crack, cocaine and psychotropic pills, and only one of the interviewees knew many types of drugs. This shows the need for health education to fight drug abuse among blind people.

However, different from men, blind women's knowledge on the types of drugs was limited. They only listed stimulants, depressant and hallucinogens. As observed, drugs known are those usually commented in the group and mentioned by the name adopted by users. All women mentioned alcohol, reinforcing the increase in its use by young people and confirming that it is the most commonly used psychotropic drug in Brazil<sup>(11)</sup>.

They remembered drugs effects, physiological and behavioral changes. This "knowledge" is superficial and it is restricted to the most common drugs, such as alcohol, tobacco and marijuana. According to women's report, the knowledge they have is based on what they

have heard or seen. The male statements show the experience of individuals when they talk about the effects caused by these drugs in the body, the psychological changes and social problems. They mention the difference in the effects of drugs considered as "heavy" and other drugs such as cigarette and alcohol.

Blind men and women taking part in this study also gave their opinions on the reasons why healthy individuals, most of the times aware of the harms of drug addiction, start this practice. The prevalent opinion was that drugs are available when people are trying to solve personal problems such as loneliness, unemployment and family conflicts.

There are indicators showing that drug use is influenced by a desire to be an adult, since drugs, especially legal ones, are seen as real symbols of majority; other reasons mentioned for use are curiosity and search for overcoming one's limits; family independence; relief from personal problems and also the pleasure of using it<sup>(12)</sup>.

The influence of the media and friends has also been mentioned by blind men as an encouragement, corroborating, therefore, previous studies which stated the initial contact with drugs occur through the encouragement of relatives and friends and also due to the influence of advertisement and the media.

Women consider friendship as crucial to induce the use of these substances, since friends usually go to the same places and belong to the same group. A study with young people shows the similarity of answers regarding the reasons for alcohol use: identification, fun, pleasure, and reduced inhibition. Not perceiving the risk, curiosity and lack of information contribute to the onset of psychoactive drug use<sup>(12)</sup>.

In addition to make theories about drugs, almost all interviewees have already experienced (or experience) drug use, especially alcohol use. Although it is a socially accepted drug, according to reports, alcohol can affect personal and family life.

Some reports mentioned that encouragement of alcohol use occurred in childhood with approval of the father who was a user. Therefore, the child tends to repeat this practice, considered as correct, starting at an early age. As stated by the literature, the greater the presence of alcohol in the family, the greater the tendency for this practice to be incorporated and accepted by other member<sup>(11)</sup>.

The experience of women with drugs is more difficult to see and it is believed that they follow traditional rules more often than men do. The same thing occurs to blind women. Occasional use of legal drugs is prevalent as shown by statements. In the female discourse, there is small contact with illegal drugs. However, we wonder if it is really that rare, or if these

women were not answering to preserve their image. The vulnerability of these women is clear during school years, since school is the place with greater drug flow.

Different from women, blind men clearly state the use of legal drugs and in the subcategories "why do you use" and "why don't you use anymore", there are only male statements. Among the reasons for drug use is the circle of friends during adolescence, when young people usually start to live to and for them. They are together, sharing healthy experiences intensively, however, they can also share dangerous practices such as drug use. Just as with sighted young people, the risk of not being part of the group because one does not use drug makes blind people start this habit even if when aware that this is not the correct option<sup>(12)</sup>.

Because of the mostly negative experiences, the option for not using drugs, especially alcohol, is reinforced by seeing that it is a useless practice and because of the self-destruction it leads to. Another factor present was the value of spirituality as a way to recover and run away from drugs, and also to prevent the first experience. Religiosity preaches a constant search for conversion, love to the other and giving up everything that make men slaves, including chemical dependence, it prevailed as an inner meaning that gives hope and fulfills loneliness.

Studies relating religiosity and drug use show that religion, its practice and moral values tends to keep young people away from drug use and abuse. According to these studies, spiritual support helps individuals grow as human beings and form a personality geared to their and other people's wellness for future personal achievement, thus excluding the use of chemical substances<sup>(13-14)</sup>.

As reported, men and women experienced or still experience living with users, especially alcoholic and usually their father. This is difficult and some of them face it at a very early age. Statements showed a prevalent feeling of helpless for having a family member using drugs, even when they are legal drugs such as tobacco due to their direct result in users' health and quality of life.

There was one report where the father was aware and took responsibility for being an alcoholic; however, he did not want his son to have the same kind of behavior. The use of legal drugs by parents may directly influence children to be distant from this practice since when they live every day with the reality of personal and family disruption, they avoid the addiction<sup>(14)</sup>. The problem of dealing with users brings behavioral changes that affect family harmony, trigger violent behavior, verbal aggressions and humiliation; they feel embarrassed and fear users' unsteady behavior.

Blind people's opinions on drugs are directed at use prevention, especially at an open dialogue in the family

since childhood. They also focused their personal experience of the different ways available at society for information: the media, classes, lecturers, among others. They give creative and interesting opinions about prevention strategies for drug use in several aspects and with blind people, demonstrating their potential to find solutions to this problem.

One of the most effective ways to prevent and fight drug use is communication between parents and children, through a guiding and honest dialog. Encouraging family unit and facing the reality which includes drug offer, must make parents adopt this behavior to face the problem. In a previous study on the reasons for young people not using drugs; dialog with parents, respect and consideration stood out<sup>(10)</sup>.

An interviewee stated that dialog in the family was exclusive to sighted siblings. It is worth remembering that blind people present the same potential to develop health risk behavior. They have special needs and the same qualities and limitations of other human beings<sup>(15)</sup>. Overall, reports show that lack of dialog about this problem is a risk factor for drug use. Studies among sighted people on the protective factors against drug use highlighted the influence of parents, especially with regards to moral values and access to information of the harms of drugs which are decisive to non-adherence to this practice<sup>(14)</sup>.

As for means of mass communication, they are limited sources of information. Despite this, television is one of the most commonly used resources, since blind people absorb the contents of the messages, even though they cannot see images of the issue. The place mentioned for greater access to information was the school. Educational events and talks with teachers are mentioned as ways to increase their knowledge, confirming the school to be the place to approach issues related with drug abuse<sup>(16)</sup>. Schools have a new challenge: to educate for prevention, prioritizing self-knowledge in students, their self-esteem, the ability to make decisions and deal with the group, the ability to resist to peer pressure and to present the best alternative to face drug use among students<sup>(17)</sup>.

Lectures are seen as a way to spread knowledge with greater attention and depth. Health education must take into account the people it is talking to, encompassing their personal, daily, family, professional and community lives. Thus, when their needs are diagnosed, it can lead to reflection and finally to a change in behavior<sup>(18)</sup>.

The study has limitations, since blind people in the group belong to the same social environment. However, it is justified as an exploratory study with a little studied population group. One aspect is highlighted here: the issue of gender regarding drugs showed that blind women are more protected by the family and in a way,

this protects them from exposure. This had already been observed in the approach of sexuality with blind adolescents<sup>(19)</sup>.

The results from the present study with blind people when compared to interviews with sighted people show small differences, however, the lack of knowledge on many aspects demonstrate the need for an educational approach that takes into account the learning characteristics of blind people. Thus, health services have to offer a health education process incorporating concepts of special education and materials and methods using special technology. It is not enough for blind people to listen to the message on television. Audio materials must be followed by tactile means, Braille texts, individual or group interactive proposals, and the approach often has to be inclusive in which teaching means themselves are universal.

## FINAL CONSIDERATIONS

The drug problem is acknowledged by blind people as a public health problem because it affects society and the life of users. However, despite this perception, they know little about the characteristics, effects and consequences of the main drugs. Even so, the influence of family, friends and the media demonstrate that they

may or may not take drugs, thus emphasizing that they are not free from risks and that the possibility of legal and illegal drug use/abuse is real among these people.

This statement is corroborated by the fact that most blind men have already faced a situation of drug abuse, especially alcohol. Regarding women, the problem has a different focus: they are narrators of someone else's experience.

The behavior and perception of blind people regarding the health problems have little or no difference from the behavior of sighted people. Likewise, as we can see with the drug issue, it has results that are similar to those found with the sighted population. These data reinforce the importance of initiative focusing health promotion and prevention of drug use, in an inclusive and accessible way to blind people, since there are limitations in accessibility to these people and in prevention programs regarding this issue.

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