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Abusive use of alcohol and other drugs in prison settings

Uso abusivo de álcool e outras drogas em contexto prisional Uso abusivo de alcohol y otras drogas en el contexto penitenciario

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Abstract:

Objective: to describe the sociodemographic and epidemiological characteristics of incarcerated individuals with substance abuse issues. **Methods:** a cross-sectional, epidemiological survey with a quantitative approach was conducted with a prison population from 2019 to 2020. A structured, self-reported questionnaire specific to this group was used. **Results:** 168 individuals participated in the study, mostly men (80.4%), aged 30-39 years (39.9%), with up to 8 years of education (61.3%), without a stable partner (61.9%), previously incarcerated (77.4%), and with tattoos (83.9%). Most used marijuana (80.9%), cocaine (62.5%), crack (34.2%), other non-injectable drugs (9.5%), and injectable drugs (2.4%). Regarding alcohol consumption, the majority reported abusive consumption (79.2%), with beer being the most common (62.5%), followed by *cachaça* (24.4%). Most reported smoking cigarettes (64.9%). Of those who consumed some alcoholic beverage, the average weekly intake was 170.5g (SD=343.0). Of those who reported smoking, the average weekly consumption was 19.6 cigarettes/day (SD=12.9). **Conclusion:** because this is a hard-to-reach population, still largely overlooked in research, the findings contribute to revealing this profile: male, young, with low levels of education, and previously incarcerated. Identifying the abuse of alcohol and other drugs in this population allows for better targeting of health actions within the prison system.

Descriptors: Prisoners; Drug users; Alcoholism.

Resumo:

Objetivo: descrever características sociodemográficas e epidemiológicas das pessoas privadas de liberdade que fazem uso abusivo de substâncias. **Método**: estudo transversal, do tipo inquérito epidemiológico com abordagem quantitativa, realizado com uma população em contexto prisional entre 2019 e 2020. Foi utilizado um questionário estruturado autorreferido específico para este grupo. **Resultados**: Participaram do estudo 168 indivíduos, predominantemente homens (80,4%), com idade entre 30 e 39 anos (39,9%), escolaridade de até 8 anos (61,3%), sem companhia estável (61,9%), com histórico de encarceramento prévio (77,4%) e com tatuagens (83,9%). A maioria utilizou maconha (80,9%) e cocaína (62,5%), crack (34,2%), outras drogas não injetáveis (9,5%) e drogas injetáveis (2,4%). No consumo de bebida alcoólica, a maioria relatou uso abusivo (79,2%), sendo a cerveja a mais comum (62,5%), seguida pela cachaça (24,4%). O hábito de fumar cigarro foi relatado pela maioria (64,9%). Entre aqueles que consumiram alguma bebida alcoólica, a ingestão semanal média foi de 170,5 g (dp=343,0). Para os que relataram o hábito de fumar, o consumo semanal médio foi de 19,6 cigarros/dia (dp=12,9). **Conclusão**: por se tratar de uma população de difícil acesso e ainda pouco visível em pesquisas, os achados contribuem para desvelar esse perfil: homens, jovens, com baixa escolaridade e com histórico de encarceramento prévio. A identificação do uso abusivo de álcool e outras drogas nesta população permite orientar melhor ações de saúde no sistema prisional.

Palavras-chave: Prisioneiros; Usuários de drogas; Alcoolismo.

Resumen.

Objetivo: describir las características sociodemográficas y epidemiológicas de las personas privadas de libertad que hacen un uso abusivo de sustancias. **Método:** estudio transversal, de tipo encuesta epidemiológica con enfoque cuantitativo, realizado con una población en el contexto penitenciario entre 2019 y 2020. Se utilizó un cuestionario estructurado autorreferido, específico para este grupo. **Resultados:** participaron en el estudio 168 individuos, predominantemente hombres (80,4%), con edades entre 30 y 39 años (39,9%), nivel de estudios de hasta 8 años (61,3%), sin pareja estable (61,9%), con antecedentes de encarcelamiento previo (77,4%) y con tatuajes (83,9%). La mayoría consumía marihuana (80,9%) y cocaína (62,5%), crack (34,2%), otras drogas no inyectables (9,5%) y drogas inyectables (2,4%). En cuanto al consumo de bebidas alcohólicas, la mayoría refirió un uso abusivo (79,2%), siendo la cerveza la más común (62,5%), seguida del aguardiente de caña (24,4%). El hábito de fumar cigarrillos fue reportado por la mayoría (64,9%). Entre aquellos que consumían alguna bebida alcohólica, la ingesta semanal media fue de 170,5 g (ds = 343,0). Para los que informaron del hábito de fumar, el consumo semanal medio fue de 19,6 cigarrillos/día (ds = 12,9). **Conclusión**: al tratarse de una población de difícil acceso y todavía poco visible en las investigaciones, los hallazgos contribuyen a desvelar este perfil: hombres, jóvenes, con bajo nivel de estudios y con antecedentes de encarcelamiento previo. La identificación del uso abusivo de alcohol y otras drogas en esta población permite orientar mejor las acciones de salud en el sistema penitenciario.

Descriptores: Prisioneros; Consumidores de drogas; Alcoholismo.

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INTRODUCTION

lcohol is a central nervous system depressant capable of inhibiting the prefrontal cortex, the region of the brain responsible for decision-making, planning, and impulse control. It can also cause alterations in neurotransmitters such as dopamine, which is responsible, among other things, for feelings of pleasure and reward. Due to their ability to alter mental state, the use of alcohol and other drugs has a complex association with mental disorders such as psychosis and depression and is closely linked to offensive behavior¹.

The prison population faces significant disparities in the health, social, and economic spheres. Alcohol and other drug use disorders are a common occurrence in this context, associated with health challenges and social repercussions, such as a significantly increased risk of infectious diseases, poor housing conditions, and a higher mortality rate². The high levels of traumatic exposure reported among incarcerated individuals contribute to a higher incidence of mental disorders in this population, such as substance abuse, when compared to community populations³.

Due to overcrowding and poor prison infrastructure, mental health issues are often neglected among inmates, particularly in low and middle-income countries. This contributes to higher rates of suicide, mortality, and reincarceration after release⁴. Within this context, individuals with alcohol and substance abuse disorders, while incarcerated, often return to society without receiving adequate treatment. This can hinder their reintegration and increase their propensity to reoffend, resulting in additional incarcerations and consequent financial impacts on the state⁵.

Although Brazil has one of the largest prison populations in the world and faces recurring problems with alcohol and other drug abuse within this context, studies providing a quantitative analysis of substance abuse disorders in the prison environment are scarce. The present study aimed to describe the sociodemographic and epidemiological characteristics of people deprived of liberty who abuse substances.

METHODS

This is a descriptive quantitative analysis consisting of a cross-sectional study using an epidemiological survey of sociodemographic characteristics and alcohol and other drug abuse among the prison population. The study is part of a larger study entitled: "Prevalência da hepatite C e ações para a macro e microeliminação em Uberaba/Minas Gerais – Brasil" (Prevalence of Hepatitis C and Actions for Macro and Micro-Elimination in Uberaba, Minas Gerais, Brazil). One of the main groups for the micro-elimination of Hepatitis C is the prison

population, and alcohol and other drug abuse are predisposing factors for the disease. The study considered the population of the Professor Aluízio Ignácio de Oliveira Penitentiary, a state institution located in the Triângulo Mineiro region of Uberaba, Minas Gerais, administered by the State Secretariat of Penitentiary Administration of Minas Gerais (SEAP/MG). At the time, it housed 1,564 inmates (95.1% male) and 220 employees. The institution held incarcerated individuals, both convicted inmates and those awaiting trial, with almost twice as many people as its designed capability. Data collection took place between December 2019 and March 2020, being interrupted due to the COVID-19 pandemic.

A simple random sample was defined based on the main study outcome (a 13% prevalence of Hepatitis C among the Brazilian prison population), with a 95% confidence level and a 4% margin of error. This resulted in a sample size of 240 individuals, in line with the action research proposal⁷.

Regarding the selection criteria for responding to the self-reported questionnaire, all incarcerated individuals, whether convicted or awaiting trial, inmates of the prison where the study was conducted were included. This system only works with incarcerated individuals over the age of 18. Those with prison records reporting reduced cognitive function, difficulties with logical reasoning, concentration, communication, and learning, or psychiatric problems that could hinder understanding of the Informed Consent Form (ICF) were excluded. Furthermore, records of those who did not self-report alcohol or other drug use were excluded from the analysis.

Regarding the data collection instrument and study variables, a structured self-report questionnaire was used - developed nationwide to address this population, based on Harnoldo Coelho's 2009 study⁸. This instrument has been described as important for individuals deprived of liberty. The variables included: sex; marital status; age; education; previous incarceration; presence of tattoos and piercings; homelessness; current or previous use of injectable drugs; alcohol consumption and quantity; and smoker status and quantity.

With the questionnaires in hand, the research team was led by the prison nurse and escort to the cell block designated by the officers. Within the cell block, the classroom adjacent to the courtyard was prepared to receive the interviewees. If they accepted, the Informed Consent Form was carefully read and their signatures collected. The data collection instrument was administered by the researchers, who read the questions and assisted with the answers. It took approximately 30 minutes⁷.

For data processing and analysis, a Microsoft Excel® spreadsheet was created to input all collected data, so that each questionnaire was assigned a separate number to maintain

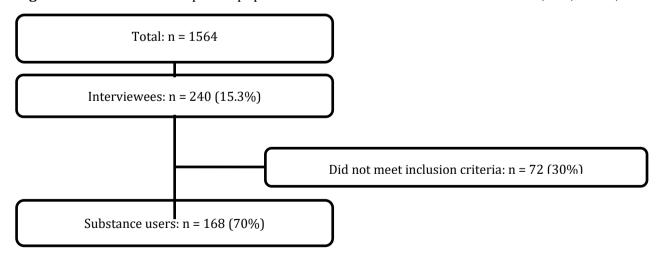
confidentiality. Variables were entered using independent double data entry. After verifying consistency across databases, descriptive statistical analyses were performed to compile the epidemiological profile, calculating absolute and relative frequencies, measures of central tendency (means) and dispersion (standard deviations), and the maximum and minimum values of the numerical variables.

Regarding ethical aspects, the study was approved by the Research Ethics Committee of the Universidade Federal do Triângulo Mineiro in December 2019, under opinion No. 3,918,981. The research followed the recommendations of Resolution 466/129 of the National Health Council. The study is part of the parent project "Inquérito Epidemiológico da Hepatite C em Penitenciária do Estado de Minas Gerais" (Epidemiological Survey of Hepatitis C in a Penitentiary in the State of Minas Gerais), under the guidance of the Hepatitis C Diagnostic Expansion Program of the Hepatitis Outpatient Clinic of the Hospital de Clínicas of the Universidade Federal do Triângulo Mineiro. Follow-up of the inmate for treatment of HCV and/or complications was guaranteed regardless of their inclusion in the study, together with the hospital itself.

RESULTS

A total of 240 incarcerated individuals were interviewed and were able to understand the consent form and respond to the questionnaire. Of these, 72 were excluded from the study due to reporting no alcohol or drug use (Figure 1).

Figure 1. Flowchart of the prison population considered in the research. Uberaba, MG, Brazil, 2020.



Of the 168 individuals participating in the study, 135 were men (80.4%) and 33 were women (19.6%). The predominant age group was 30 to 39 years (39.9%), followed by 20 to 29 years (34.5%), with up to 8 years of education (61.3%), no stable partner (61.9%), who had

been previously incarcerated (77.4%), who had a tattoo (83.9%), did not have a piercing (77.4%) and was not homeless (81.5%) (Table 1).

Regarding drug use, the majority used marijuana (80.9%) and cocaine (62.5%), followed by crack (34.2%), other non-injectable drugs (9.5%), and injectable drugs (2.4%). Alcohol abuse was reported (79.2%), with beer being the most common (62.5%), followed by *cachaça* (24.4%), whiskey (18.5%), vodka (11.3%), and other alcoholic beverages (8.9%). Most also reported smoking cigarettes (64.9%), as shown in Table 2.

Table 1. Epidemiological profile of people deprived of liberty who used some type of drug. Uberaba/MG, Brazil, 2020.

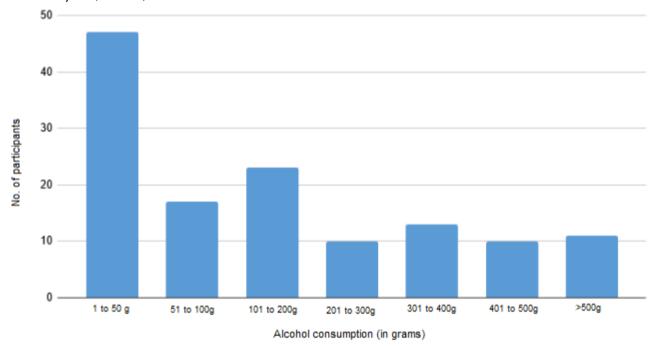
Variable	N	%
Sex		
Male	135	80.4
Female	33	19.6
Marital status		
Civil union	64	38.1
No partner	104	61.9
Age group		
18 to 29 years	58	34.5
30 to 39 years	67	39.9
40 to 49 years	37	22.0
50 to 59 years	05	3.0
Unknown	01	0.6
Educational level		
None	06	3.6
Up to 5 years	34	20.2
6 to 8 years	63	37.5
Incomplete Secondary Education	43	25.6
Complete Secondary Education	18	10.7
Incomplete Higher Education	03	1.8
Complete Higher Education	01	0.6
Has been arres	sted before?	
Yes	130	77.4
No	38	22.6
Tatto	00	
Yes	141	83.9
No	27	16.1
Pierc	ing	
Yes	38	22.6
No	130	77.4
Home	less	
Yes	31	18.5
No	137	81.5

Table 2. Substance abuse by people deprived of liberty. Uberaba/MG, Brazil, 2020.

Variable	N	%
Marijuana		
Yes	136	80.9
No	32	19.1
Crack		
Yes	58	34.2
No	110	65.8
Cocaine		
Yes	105	62.5
No	63	37.5
Other non-injectab	ole drugs	
Yes	16	9.5
No	152	90.5
Injectable drugs		
Yes	4	2.4
No	164	97.6
Alcohol consumpti	on	
Yes	133	79.2
No	35	20.8
Beer		
Yes	105	62.5
No	63	37.5
Cachaça		
Yes	41	24.4
No	127	75.6
Whisky		
Yes	31	18.5
No	137	81.5
Vodka		
Yes	19	11.3
No	149	88.7
Other alcoholic be	verages	
Yes	15	8.9
No	153	91.1
Smoker		
Yes	109	64.9
No	59	35.1

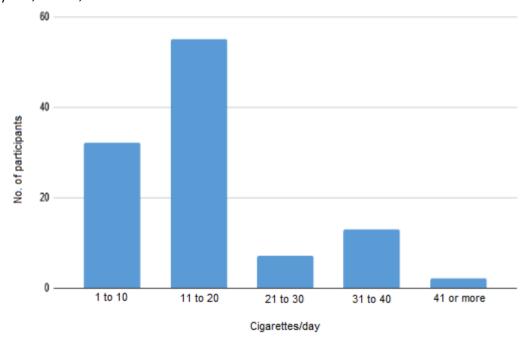
Of those who consumed some alcoholic beverage, the average weekly intake was 170.5g (standard deviation = 343.0), with almost half of the participants (48.1%) consuming 100g or less of alcohol per week, as shown in Figure 2.

Figure 2 - Amount of alcohol (in grams) consumed by people deprived of liberty. Uberaba/MG, Brazil, 2020.



Of those who reported smoking, the average weekly consumption was 19.6 cigarettes/day (standard deviation=12.9), with half of the participants (50.5%) smoking 11 to 20 cigarettes/day, as illustrated in Figure 3.

Figure 3. Number of cigarettes/day consumed by people deprived of liberty (n = 109). Uberaba/MG, Brazil, 2020.



DISCUSSION

The profile of inmates who use drugs coincides with the Brazilian prison population: male, young, with low levels of education, and previously incarcerated ¹⁰. These characteristics are similar to the profile of prisoners in countries like Mexico ¹¹, with the exception of the age group, which tends to be older, with nearly a third of prisoners over 50 in the United States and Israel ¹². According to the latest Brazilian Incarceration Map (*Mapa do Encarceramento*), there was a significant increase in the prison population over a seven-year period, particularly among young people between the ages of 18 and 24¹³.

According to the Minas Gerais Public Security Yearbook¹⁴, women represent approximately 4% of the prison population in the entire state. In the present study, female inmates who used some type of drug accounted for 19.6%. This high prevalence among women shows that, despite being a minority in prisons, incarcerated women have a strong link to drug use. Studies explain that female incarceration is largely due to drug involvement, first as users and later as traffickers¹⁵⁻¹⁶.

The presence of tattoos and piercings among those surveyed demonstrates belonging behaviors, which can be considered risky but also affirmative, in this case, illicit drug use¹⁷. In a prison context, tattoos may serve the function of following the internal conventions of the group that uses them, according to the individual's hierarchical level, or they may represent a closed code to be interpreted by those initiated into the world of crime¹⁸. The use of tattoos by these inmates was higher than that found in other prison populations around the world, such as Australia (60%) and Croatia (42%), while the presence of piercings was lower in countries such as France (42%) and the United States (53%)¹⁹.

The use of marijuana (80.9%), cocaine (62.5%), and crack (34.2%) was higher than the use of these illicit substances by the general population, which were 7.7%, 3.1%, and 0.9%, respectively, as recorded in the 3rd National Survey on Drug Use by the Brazilian Population²⁰. Marijuana is the most consumed illicit drug in the study group and also by the general population, mainly due to its low cost, ease of acquisition, and social acceptance²¹. Studies addressing the profile of alcohol and other drug abuse in the prison population are scarce. A systematic review on the subject identified that the regions with high levels of injecting drug use were Asia-Pacific (20.2%), Eastern Europe, and Central Asia (17.3%). Latin America and the Caribbean showed 11.3% of this behavior among prisoners, but it is not the most frequent form of drug use¹⁹. Another study in Germany showed that drug use among the local prison population was also above the general population average, with heroin being the most

commonly drug, used by 37.7% of inmates, well above the 1% of the German population who consumes this substance²².

Excessive time and boredom, which characterize the prison system, are factors associated with more consistent drug use²³. This is in addition to other factors such as treatment for insomnia and distress resulting from incarceration. Incarceration provokes negative feelings, such as anger and frustration, and drug abuse is a way of coping²⁴.

According to the NIAAA (National Institute on Alcohol Abuse and Alcoholism), weekly binge drinking is defined as consuming 15 or more drinks for men and 8 or more for women (standard dose = 14 g)²⁵. Taking these limits into account, alcohol abuse was 33.9% in the prison population studied, higher than the general population, which had a figure of 20.8% in 2023, according to the overview published by the Health and Alcohol Center for Information (*Centro de Informação sobre Saúde e Álcool* - CISA)²⁶.

When comparing alcohol consumption, including abusive and non-abusive, in the prison system (79.2%) and the general population $(44.7\%)^{26}$, an even more significant discrepancy was observed. The prison population is made up of individuals with fragmented families and broken social ties, a situation in which alcohol acts as a distance from these problems and as a means of forgetting their time in prison, in the case of repeat offenders²⁷.

Inmates were five times more likely to smoke than other individuals over 18 years of age²⁸. In prison, there is a profile of people with low levels of education, justified by socioeconomic inequalities that lead to school dropout due to early entry into the job market and school failures, a factor associated with higher tobacco consumption²⁹.

CONCLUSION

The analysis of the prison population that abuses substances revealed that the profile was composed primarily of men, aged 20 to 39, with low levels of education, no stable partner, repeat offenders, and with tattoos. The most commonly used illicit drug among participants was marijuana, and the most commonly consumed beverage was beer. Smoking is also a common habit among most respondents.

Regarding the study's limitations, one is that drug use variables were self-reported, without toxicological confirmation, and the reality may differ from what the participant reports. The study's relevance is established because it considers this population difficult to access due to the institution's operating rules, the availability of correctional officers and healthcare staff for monitoring, the need for bureaucratic research procedures, and the necessary and extensive training of research teams and the environment for optimal process management.

In general, this work, a local study carried out in a penitentiary in the Triângulo Mineiro region, contributes to the organization of future research aimed at accessing this population that is still invisible in studies.

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