


Perception of the family regarding the treatment of drug users: integrative review*

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Objective: to carry out an integrative review of national literature regarding the treatment of users of alcohol and other drugs from the perspective of their family members. **Method:** an integrative review of the national literature was performed in the Virtual Health Library, and Portal of Periodicals of the Coordination of Improvement of Higher Level Personnel portals, Web of Science, The Cumulative Index to Nursing and Allied Health Literature, and PsycINFO databases. After analysis of the studies retrieved, 21 studies were selected. **Results:** the literature showed that outpatient services were recognized by family members as important for improving family relationships and the health conditions of the drug user. They also felt it was important to include the family members in the treatment to help drug users. However, studies demonstrated the difficulties of these services to fulfill the present requirements, barriers to treatment access, and lack of knowledge regarding these services, contributing to them seeking internments, including compulsory ones. **Conclusion:** it is necessary to expand the outpatient services and provide support for the family members of drug users.

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Descriptors: Family; Drug Abuse; Substance Abuse Treatment Centers, Treatment Outcome.

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Percepção do familiar sobre o tratamento de usuários de drogas: revisão integrativa

Objetivo: realizar revisão integrativa da literatura nacional sobre os tratamentos de usuários de álcool e outras drogas a partir da perspectiva de seus familiares. Método: trata-se de um estudo de revisão integrativa da literatura nacional, nos portais Biblioteca Virtual em Saúde e Portal de Periódicos da Coordenação de Aperfeiçoamento de Pessoal de Nível Superior e nas bases de dados Web of Science, The Cumulative Index to Nursing and Allied Health Literature e PsycINFO. Após o processo de análise dos estudos recuperados, foram selecionados 21 estudos. Resultados: na literatura demonstrou-se que os familiares reconheceram os serviços extrahospitalares como importantes para melhorar as relações familiares e as condições de saúde do usuário, sendo importante a inclusão dos familiares nos espaços de tratamento para ajudar os usuários de drogas. Contudo, foram apontados, em estudos, fatores como a insuficiência desses serviços em atender a demanda apresentada, as barreiras no acesso ao tratamento e o desconhecimento desses serviços, contribuindo para a busca de internações – algumas, inclusive, forçadas. Conclusão: é necessária a ampliação dos serviços extrahospitalares, com o oferecimento de apoio aos familiares de usuários de drogas.

Descritores: Família; Usuários de Drogas; Centros de Tratamento de Abuso de Substâncias; Resultado do Tratamento.

Percepción del familiar sobre el tratamiento de usuarios de drogas: revisión integrativa

Objetivo: realizar una revisión integrativa de literatura nacional sobre los tratamientos de usuarios de alcohol y otras drogas desde la perspectiva de sus familiares. Método: se trata de un estudio de revisión integrativa de la literatura nacional, en los portales BVS y Portal de Periódicos Capes y en las bases de datos Web of Science, CINAHL y PsycINFO. Después del proceso de análisis de los estudios recuperados fueron seleccionaron 21 estudios. Resultados: la literatura demostró que servicios extrahospitalarios fueron reconocidos por familiares como importantes para mejorar relaciones familiares y condiciones de salud del usuario, siendo importante incluir los familiares en espacios de tratamiento para ayudar a los usuarios. Sin embargo, estudios apuntaron la insuficiencia de esos servicios en atender la demanda presentada, barreras en el acceso al tratamiento y desconocimiento de esos servicios, contribuyendo a la búsqueda de internaciones, incluso forzadas. Conclusión: es necesaria una ampliación de los servicios extrahospitalarios y que éstos ofrezcan apoyo para familiares de usuarios de drogas.

Descriptorios: Familia; Consumidores de Droga; Centros de Tratamiento de Abuso de Sustancias; Resultado del Tratamiento.

Introduction

Family involvement in the care for people that use alcohol and other drugs began to be understood in a different way due to the Psychiatric Reform (PR) movement. The family and the community were recognized as partners in caring for people who had received a psychiatric disorder diagnosis⁽¹⁻²⁾, with the same being true for people who used alcohol and other drugs. The participation of the family in the treatment of these people began to be valued and stimulated by the health services and healthcare providers. Family members and users, together with the workers, began to play an active role in the transformations of the mental health field and in the PR, when they organized themselves as the anti-asylum movement⁽³⁾. Accordingly, the PR movement favored the promulgation of Law No. 10.216⁽⁴⁾, legislation that established the priority for treatment in outpatient services and the exceptional application of brief and motivated hospitalizations.

Aiming to strengthen community care, the Ministry of Health created the Psychosocial Care Network (*Rede de Atenção Psicossocial - RAPS*)⁽⁵⁾. This network is composed of the articulation of different primary health, specialized, urgent and emergency, transitory residential and hospital care services that must guarantee the health promotion, rehabilitation and social reintegration of the people who have received any mental disorder diagnosis⁽⁵⁾.

The Psychosocial Care Centers-alcohol and drugs (*Centros de Atenção Psicossocial - CAPSad*) are the main axis of articulation of this network for users of alcohol and other drugs and are composed of multidisciplinary teams that, in collaboration with the users and their families, aim to construct the individual therapeutic project, considering the needs and singularities of each person. The CAPSad are outpatient services that offer specialized daily care for those who use alcohol and other drugs, supported by the logic of harm reduction⁽⁵⁾. Harm reduction constitutes an alternative proposal to the emphasis on the internation of drug users, considering the establishment of abstinence as a goal that hinders access to health services⁽⁶⁾ for those who cannot or do not want to achieve this goal.

Within the RAPS, it is understood that family members should be seen as partners in the treatment of CAPSad users, considering the importance of actions that seek to guide and discuss the user's treatment with family members, as well as specific care actions required by the family members concerning the suffering and burden⁽⁷⁾. The family members of people who use alcohol and other drugs also need emotional care because they experience a variety of feelings such as anger, fear, worry and despair, which contribute to the development of physical and mental health problems⁽⁸⁾. In addition, many drug users do not seek treatment because they

do not consider their drug use to be problematic, with the family members being the main actors involved in seeking treatment⁽⁹⁾.

However, in practice, the number of community services and their interventions are insufficient to meet the needs of the users and family members⁽¹⁰⁻¹²⁾. Family members are commonly included in outpatient services as mere informants for collecting information about the patient's symptomatic condition, having a passive role in the treatment and being often seen by the services as resistant to the proposed treatment⁽¹¹⁾.

Another challenge to the expansion and implementation of the RAPS is the difficulty of breaking with the historical logic of the financing of a system that provides internation places as the public policy in the field of alcohol and other drugs, an action that was mainly performed through the Federal Program "Crack, it is Possible to Win"⁽¹³⁾. In this context, the burden experienced by many family members when faced with the problem⁽¹⁴⁾, the lack of knowledge about the existence and lack of access to outpatient services, such as CAPSad⁽¹⁵⁾, are issues that may influence drug users seeking internation. Often, the family members are the main companions in situations of voluntary and involuntary hospitalization, and in most cases, it is the family members that requested the hospitalization⁽¹⁶⁾.

Accordingly, the need is emphasized for practices that increase the active participation of the people who use alcohol and other drugs and their families in the decision-making and in the course of the treatment in order to promote health and prevent iatrogenic treatments such as those based on social exclusion. It is therefore important to identify the scientific production to better comprehend how the family constructs meanings about the treatment and about the services that offer treatment for users of alcohol and other drugs, in order to analyze the contributions and difficulties observed in the consultations and how these meanings affect seeking treatment by the family and the users. Thus, this study aimed to perform an integrative review of the national literature regarding the treatment of users of alcohol and other drugs from the perspective of their family members.

Method

This was an integrative review study of the national literature. The integrative review allows the analysis and synthesis of the results regarding the topic of interest, as well as the observation of gaps in the field of study researched and the investigation of the need for new studies⁽¹⁷⁾.

The following question guided the review process: What does the national literature present regarding the treatment of users of alcohol and other drugs from studies in which the sample consisted of family members of these users?

Data collection was performed in February 2018. For the performance of the search, the portals used were: Virtual Health Library (VHL) and Portal of Periodicals of the Coordination of Improvement of Higher Level Personnel (Capes Periodical Portal), using the terms indexed in the Health Sciences Descriptors (DeCS). A multidisciplinary database (Web of Science), a health database (The Cumulative Index to Nursing and Allied Health Literature - CINAHL) and a psychology database (PsycINFO) were also consulted, using terms from the Medical Subject Headings (MeSH Terms). These databases were consulted in order to find studies published in different areas of knowledge. The following combination of descriptors indexed in DeCS and MeSH Terms was used: ("family") AND ("drug users" OR "substance-related disorders") AND ("mental health" OR "mental health services" OR "substance abuse treatment centers" OR "health services accessibility") NOT ("HIV"). The search strategy included searching for the keywords throughout the text, without the use of filters for the delimitation of the year of publication.

Having defined the search strategy, the selection of the literature was carried out, which involved the preliminary establishment of inclusion and exclusion criteria. Potentially eligible articles were those studies that had the use of alcohol and other drugs as the main theme; articles that investigated treatments for drug users or the health services for the treatment of drug

users, in the Brazilian context; studies in which the sample investigated consisted of family members of drug users; and studies published in English, Spanish or Portuguese. Studies on other problems associated with drug use, such as comorbidities; empirical studies evaluating treatment outcomes for drug users; and books or letters to the editor were excluded from the study.

The selection of the studies was made through reading the titles and abstracts obtained and excluding duplicate articles and those that did not meet the previously defined inclusion criteria. Subsequently, 68 remaining studies were selected for reading in full, with a further 47 studies excluded that did not meet the inclusion and exclusion criteria and did not answer the guiding question of this review. Figure 1 presents the selection process of the studies, performed according to the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) protocol⁽¹⁸⁾.

The analysis corpus was composed of 21 studies, which were re-read for the extraction of relevant information considering the guiding question of this study. In order to organize the collected data, the researchers developed an instrument that included the following information: title, authors, year of publication, periodical of publication, area of knowledge of the periodical, database, objective, methodology, place of data collection, results and conclusions.

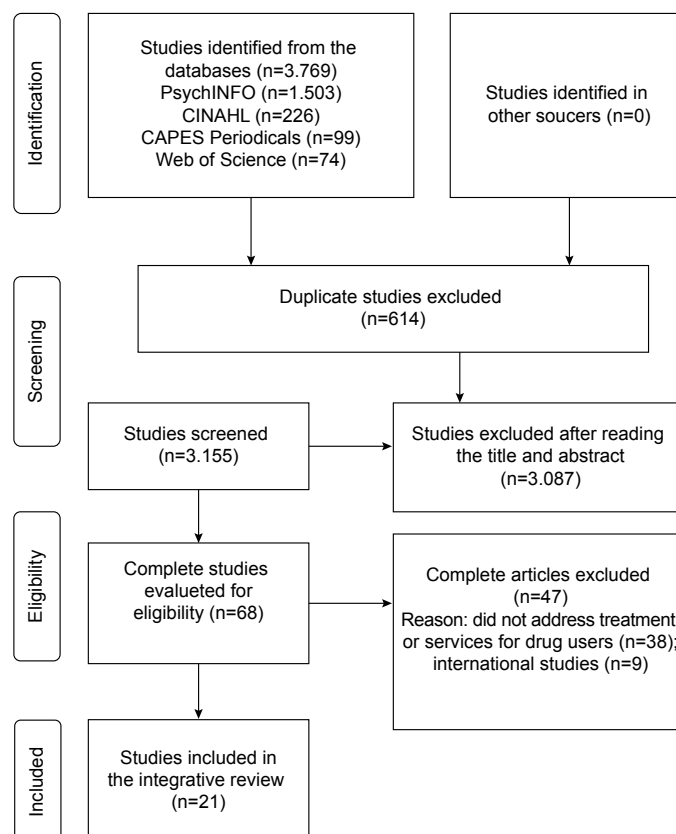


Figure 1 - Flowchart of the study selection process, performed following the recommendations of the PRISMA protocol⁽¹⁸⁾. February, 2018

Results

The 21 selected studies were published between 2004 and 2017, the majority of which were original articles, with only one being a master's thesis. It should be noted that in 10 articles the data collection was carried out in CAPS and/or CAPSad. Regarding the methodology, the majority of the studies used qualitative methodology ($n = 13$), with only three studies using quantitative methodology. In relation to

the area of the journal of publication, the majority of the articles ($n = 16$) were published in nursing journals, with the other studies being published in different areas (psychology, psychiatry and interdisciplinary) (Figure 2).

The themes identified as central in the different studies reviewed were grouped into three main axes: Construction of care practices; Challenges of an incipient care network; Issues involved in the process of seeking treatment (Figure 3).

Author	Year	Aim	Place of collection	Study participants
Osinaga, Furegato ⁽¹⁹⁾	2004	To identify what alcohol and drug users and their families think about the mental illness, the treatment and the care.	Psychiatric hospital and psychology and psychiatric outpatient unit	46 users of alcohol and drugs and 19 family members of the users.
Azevedo, Miranda ⁽²⁰⁾	2010	To investigate the perception of family members regarding the treatment provided in a CAPSad of the city of Natal-RN.	2 CAPSad	14 family members of drug users.
Azevedo, Miranda ⁽²¹⁾	2011	To identify the perception of family members regarding the therapeutic workshops developed at a CAPS of Natal-RN.	1 CAPS II and 2 CAPSad	28 family members of people attended by the services.
Braun et al. ⁽²²⁾	2014	To present an experience report on the care performed in CAPS with the family of a drug user by a social worker specialized in family therapy.	1 CAPS	1 drug user, his wife and his parents.
Costa ⁽²³⁾	2015	To reveal the challenges experienced by family members in the process of caring for drug users; to describe the coping strategies used by the family members in following their relative's treatment; to identify the types of support used by family members during the process of rehabilitation and social insertion; and to reveal the expectations of family members regarding the health services as a source of support for their relative.	1 CAPSad II	10 family members of alcohol and drug users.
Azevedo, Miranda ⁽²⁴⁾	2011	To apprehend the social representations of the family members of CAPS users regarding their participation in the activities of these services.	2 CAPS II and 2 CAPSad	28 family members of people attended by the services.
Bosque et al. ⁽²⁵⁾	2017	To assess the degree of satisfaction of workers, users and family members of CAPSad.	2 CAPSad	32 workers, 60 users and 28 family members.
Alvarez et al. ⁽²⁶⁾	2012	To identify the perception of family members of drug users regarding the importance of the support group as a care strategy.	1 CAPSad	10 family members of drug users.
Nasi et al. ⁽²⁷⁾	2015	To identify mental health care technologies for the care of crack user in a CAPSad.	1 CAPSad	8 professionals of CAPSad, 10 CAPSad users, 11 family members and 7 mental health managers.
Pandini et al. ⁽²⁸⁾	2016	To apprehend the experiences of families in relation to the drug user relative and to identify aspects of their social network.	1 Primary Health Unit	10 families of drug users.
Ventura et al. ⁽²⁹⁾	2014	To identify the perspective of family members or people close to illegal drug users regarding protective factors that help prevent involvement with these drugs.	Primary healthcare service	100 family members or people close to illegal drug users.
Souza et al. ⁽³⁰⁾	2011	To verify the presence of drug users in the social network of individuals under treatment and the possible interventions of the mental health service in the social network of four users of alcohol.	Not described by the authors	4 alcohol users and their respective family members.
Loyola et al. ⁽³¹⁾	2009	To identify how family members and people close to illicit drug users describe protective and risk factors, prevention actions, treatment services, laws and policies on illicit drugs.	Federal public health service	108 family members or people close to illicit drug users.
Silva et al. ⁽³²⁾	2009	To investigate the perception of family members and people close to illicit drug users regarding protective and risk factors, prevention initiatives, treatment units, and laws and policies.	Primary Health Units	100 family members or people close to illicit drug users.
Silva et al. ⁽³³⁾	2009	To explore the perspective of family members and people close to illicit drug users regarding risk and protective factors, treatment services, policies and laws related to the use of illicit drugs.	Outpatient health units of seven countries, including Brazil	1008 family members or people close to illicit drug users.
Brischiliar et al. ⁽³⁴⁾	2016	To comprehend the need for care expressed by family members of adolescents who use alcohol and psychoactive substances.	Psychiatric hospital	6 family members of hospitalized adolescent alcohol and drug users.

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Author	Year	Aim	Place of collection	Study participants
Sakiyama et al. ⁽³⁵⁾	2015	To describe family members of alcohol and drug users in the city of São Paulo who sought support in mutual help groups to deal with the abusive use of their relative.	The <i>Amor-Exigente</i> service	500 family members of alcohol and drug users.
Paula et al. ⁽³⁶⁾	2014	To analyze the meanings and experiences of family members regarding the crack user undergoing treatment.	CAPSad	14 professionals of CAPSad, 21 crack users and 4 family members.
Oliveira, Medonça ⁽³⁷⁾	2012	To analyze the difficulties faced by the family in the treatment of the family member with chemical dependence.	Public psychiatric hospital	5 families of interned patients.
Ferreira et al. ⁽³⁸⁾	2015	To identify the reasons that family members attributed to seeking treatment for chemical dependent individuals.	Integral internation rehabilitation unit	19 family members of interned alcohol and drug users.
Bard et al. ⁽³⁹⁾	2016	To evaluate the stigma and prejudice experienced by crack users in their social context.	CAPSad	10 crack users, 11 family members, 8 workers and 7 mental health service managers.

Figure 2 - General characteristics of the studies included ($n = 21$). February, 2018

Author	Categories		
	Construction of care practices	Challenges of an incipient care network	Issues involved in the process of seeking treatment
Osinaga, Furegato ⁽¹⁹⁾	The daily care of the user in the health service facilitates the familiar coexistence and the support offered to the family members by the service was essential for the family to care for the user.	Insufficiency in the number of alternative services to hospitalization makes it difficult to reduce the number of hospitalizations.	Psychiatric hospitalization was seen as the only option and should be facilitated in cases of aggression and lack of control.
Azevedo, Miranda ⁽²⁰⁾	The treatment of the users in CAPSad helped improve their health and the family relationships.	Difficulties of CAPSad in including the family members in the activities they develop due to precarious infrastructure or organizational management.	—
Azevedo, Miranda ⁽²¹⁾	The therapeutic workshops carried out at CAPS were identified as important for psychosocial rehabilitation, recovery of the citizenship and autonomy of the user, and improvement of social and family relationships.	—	—
Braun et al. ⁽²²⁾	Family and user care by CAPS contributed to the improvement of the family relationships, being important to guide the family regarding the problem and to accept the family's feelings.	—	The family reported that they did not know how to help the drug user relative.
Costa ⁽²³⁾	The treatment of the users in CAPSad helped improve their health and the family relationships.	Challenges in the care of drug users and their families: insufficient number of alternative services, lack of articulation of the health network services, and centralization in CAPSad of any form of support, overloading this service.	—
Azevedo, Miranda ⁽²⁴⁾	The treatment of the users in CAPS and CAPSad helped improve their health and the family relationships.	Needs: expansion of services and hours of operation, greater possibility of participation in the tours and training for inclusion in the job market.	—
Bosque et al. ⁽²⁵⁾	The family members presented positive overall satisfaction with CAPSad.	Needs: expansion and improvements in physical structure; qualification of workers; 24 hour service and offer of activities for the professional qualification of the users.	—
Alvarez et al. ⁽²⁶⁾	The CAPSad was described as an alternative to internation. The participation of the family members in CAPSad activities was important to help the users.	—	—
Nasi et al. ⁽²⁷⁾	Importance of the participation of the family members in the activities developed by CAPSad to help their family member.	—	The psychiatric hospitalization of the drug user was seen as the first option in view of the intense burden experienced by them.
Pandini et al. ⁽²⁸⁾	CAPSad was highlighted as a space of care for users of alcohol and other drugs.	The professionals of the Primary Health Unit do not offer support in the treatment of the user.	Psychiatric internation was seen as the better intervention since the family members did not know how to deal with the problem.
Ventura et al. ⁽²⁹⁾	Institutions offering prevention and treatment interventions for drug users functioned as a protective factor for the use of illicit drugs.	—	—

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Author	Categories		
	Construction of care practices	Challenges of an incipient care network	Issues involved in the process of seeking treatment
Souza et al. ⁽³⁰⁾	Group for the treatment of drug users was perceived as an intervention instrument in their social networks.	—	—
Loyola et al. ⁽³¹⁾	The main useful spaces in the recovery and creation of a care network for the user were described.	Inadequacy of health services to care for drug users.	Psychiatric hospitalization was indicated as the only treatment option for users and barriers in users' access to treatment were also highlighted.
Silva et al. ⁽³²⁾	—	National laws and policies on illicit drugs make the treatment for users difficult.	Some barriers for drug users to access health services were described.
Silva et al. ⁽³³⁾	—	Inadequacy of health services to care for drug users.	Barriers present in the access to services for the treatment of drug users were indicated.
Brischiliar et al. ⁽³⁴⁾	—	Inadequate support from CAPS and the Guardianship Council in the care of adolescents and their families.	—
Sakiyama et al. ⁽³⁵⁾	—	—	Families reported factors related to the delay in seeking treatment for the user and the main types of help they sought.
Paula et al. ⁽³⁶⁾	—	—	The psychiatric hospitalization of drug users emerged as the first treatment option faced with the intense burden experienced by the family members.
Oliveira, Medonça ⁽³⁷⁾	—	—	The lack of guidance from hospital professionals regarding the continuity of outpatient treatment after hospital discharge contributed to readmissions.
Ferreira et al. ⁽³⁸⁾	—	—	Some users did not continue outpatient treatment after hospital discharge because they felt they were cured, contributing to readmissions.
Bard et al. ⁽³⁹⁾	—	—	Barriers present in access to services for the treatment of drug users make their treatment and social reintegration even more difficult.

Figure 3 - Synthesis of the main results of the selected articles. February, 2018

Construction of care practices

In the review, it was verified that the family members considered that the treatment for the drug users helped to improve the family relationships^(19-23,24). According to some studies, family members believed that CAPS and CAPSad have favorable conditions to promote improvements in the health conditions of their drug user relative^(20-21,23-25) and are useful in reducing the damage associated with drug use⁽²¹⁾.

Participation in groups for family members of drug users at CAPSad was also seen by the family members as important for exchanging experiences, helping to construct support networks and reconstruct family ties⁽²³⁾. From the guidelines received in the CAPSad, the family members began to understand and accept the health needs of the drug user and thus, to deal with the problem better^(20,22,26).

The family members also realized that their participation in the activities developed by CAPS and

CAPSad was important to help their relative that makes problematic use of drugs^(21,26-27). Other studies showed that family members realized that the support provided by CAPSad helped them to face their feelings of helplessness and the lack of knowledge about everyday problems caused by drug use^(26,28), to elaborate feelings such as fear, anger and loneliness, and to develop more hope regarding the recovery of the drug user relative⁽²²⁾.

The institutions offering prevention and treatment interventions for drug users were described as a protective factor against illicit drug use⁽²⁹⁾. In addition, family members stated that the group for people who problematically use drugs in which the users participated, functioned as an intervention tool in their social networks, considering the potentialities of the groups identified in the interviews⁽³⁰⁾.

Similarly, family members and friends of drug users highlighted that the specialized hospital (93%), mutual aid groups (91%) and community therapies (85%) are useful spaces for recovery and creation of a care

network for the user⁽³¹⁾. However, in another study the family members understood that the drug user would receive better treatment within the family than when interned in the hospital (73.68%)⁽¹⁹⁾.

Challenges of an incipient care network

Family members considered that national laws on illicit drugs make it difficult for users to receive treatment⁽³²⁾. The primary health network, as well as the network of legal and social care services, have been described by family members as insufficient referring to the care of drug users and their families⁽²³⁾. Although there is talk of changes in the field of mental health, family members pointed out that they did not perceive changes in practice, since hospitalization time and number of beds were reduced, however, not enough alternative health services were created to meet the needs of this population^(19,23,31,33). Therefore, religious groups (52.8%) and general hospitals (47.2%) continued to be identified by relatives as the main institutions for the treatment of drug users in their community⁽³³⁾.

Family members highlighted limitations in the service practices, highlighting the lack of training of the professionals working in the Primary Health Units⁽²⁸⁾ and in the Family Health Program to act in the care of people who problematically use drugs and their family members⁽²³⁾. Many studies also presented suggestions from family members so that challenges present in the functioning of the CAPS and CAPSad could be overcome, such as improvements in the training of the professional and in the physical structure of the place⁽²⁵⁾, 24-hour functioning of the service⁽²³⁻²⁵⁾, expansion of therapeutic activities for users⁽²⁴⁾ and the development of activities for users to enter the labor market⁽²⁴⁻²⁵⁾.

Some of the studies highlighted limits in the practices of institutions that offered internation for drug users. According to the family members, there was concern about the possibility of abuse of the user during the internation (73.6%)⁽¹⁹⁾. Another challenge perceived by the family members was the devaluation of their participation in the treatment of the interned relative and the lack of guidance that should be provided by the professionals so that they could help the user⁽³⁴⁾.

Issues involved in the process of seeking treatments

According to some studies, families reported not having sought treatment for the drug user, sometimes because they believed that this problem was transient and would be resolved without help (40.6%), because they did not know where to look for help (29.7%), because the user did not allow family members to

seek help or they waited until the user accepted help (12.7%)⁽³⁵⁾.

Regarding the type of help the family members sought for people that used drugs, they reported having sought health professionals such as psychologists, physicians and therapists (35.8%) and self help groups (33%)⁽³⁵⁾. The family members also believed that only psychiatrists could help people who received a psychiatric diagnosis (84.2%)⁽¹⁹⁾.

Some studies have shown that psychiatric hospitalization of the person who consumes alcohol and other drugs was seen as the main treatment option^(19,27-28,31,36), because the family members did not know how to deal with problematic drug use⁽²⁸⁾ and experienced an intense burden^(27,36). The literature highlights issues that contribute to the readmission of people who use alcohol and other drugs, with the family members reporting the lack of continuity of treatment in outpatient services after hospital discharge^(19,37-38). The family members also understood that the user only seeks psychiatric hospitalization due to family pressure, court orders and the effort to obtain the place, consequently resulting in them abandoning the treatment⁽³⁸⁾.

Some studies presented the barriers perceived by the family members so that they and drug users could access services for the treatment of problematic drug use^(31,33,39). These include the high cost of the treatment, long waiting lists, the lack of specialized professionals, limited hours of operation of the services⁽³³⁾, client centered and negligent interventions, disregard for the legal principles that govern the care of the users of illicit drugs, especially in hospital emergency units⁽³²⁾ and the stigma in relation to the drug user^(32-33,39).

Discussion

It should be highlighted that the selected studies were carried out, mainly, with family members of people attended in CAPSad and CAPS. This issue seems to be related to the incentive of public policies to centralize these services within the organization of the mental health network, mainly between the years of 2002 and 2014, with a large number of studies on these services. In addition, these services had the integral care of the users and their families through community actions as their precepts, valuing studies that investigated the perception of the user and his/her family members⁽⁴⁰⁾.

There was only one study in which the participants were family members who attended mutual help groups for family members of people who problematically use drugs. However, many family members still seek these groups in the current context, because prior to the implementation of the substitutive services, such as

CAPS, the treatment of drug users was mainly carried out by therapeutic communities and self and mutual help groups⁽⁶⁾.

Historically, there has been a lack of State actions in relation to the care of people with disorders related to the consumption of alcohol and other drugs, which has led to the increase in the performance of judicial, philanthropic and religious institutions in relation to this problem⁽⁴¹⁾, with self and mutual help groups and therapeutic communities. These issues contributed to the Ministry of Health's acknowledgment of the State's neglect in including problems related to the use of alcohol and other drugs in public mental health policies⁽⁴⁰⁾. Since then, the need for the scientific community to develop studies on this topic with family members of drug users has increased, as, according to the Brazilian Psychiatric Reform, the family is seen as one of the protagonists in the construction of public mental health policies.

The need to involve different actors to achieve integral health care for people with problems arising from the use of drugs is recognized in the field of mental health. The involvement of the community, family members, professionals and services contributes to the construction of partnerships and social support networks that are co-responsible for the care to the user⁽⁴²⁾. Accordingly, some studies highlighted that family members understand the importance of their inclusion in the treatment of drug users.

The existence of conflicts between drug users and their relatives is common, mainly due to the control of the user's behavior exercised by the family to avoid relapses⁽⁴³⁾. The family members perceived the substitutive services as a space for dialogue between family members, users and professionals, helping to improve family relationships and deal better with the problematic drug use. By promoting meetings of family members of drug users experiencing the same situations, CAPSad makes it possible to accept difficult feelings and learn ways of dealing with daily life⁽²⁶⁾. Among the studies analyzed, the family members also highlighted that the outpatient treatments promoted the improvement of the health conditions of the user. Services such as CAPS and CAPSad are based on the harm reduction strategy that proposes the treatment of drug users without requiring abstinence, stimulating adherence to the treatment⁽⁶⁾.

However, several limits in the treatment of people with problematic drug use were described by their family members. Among them was the need to expand the practice of CAPS and CAPSad. Accordingly, the coexistence of outpatient services with the hospital-centered paradigm has implications for the construction of the psychosocial care network with an inability to

fulfill the requirements⁽⁴⁴⁻⁴⁵⁾. Historically, psychiatric care was governed by the tensions between social classes of service users, the poor had access to public services and the more affluent had access to services of liberal medicine⁽⁴⁶⁾. This fact was observed in CAPS, where the majority of the population was from the "lower" classes, described as "SUS dependent", with the middle class people who sought CAPS doing this in a selective manner, seeking medical and psychological consultations and prescriptions for medications⁽⁴⁶⁾.

Another challenge highlighted by the family members was the difficulty to access the services that offer treatment for problems arising from the use of alcohol and other drugs, with the stigmatization of the user being highlighted as a barrier. It is understood that the stigmatization of drug users is often committed by healthcare providers, who find it difficult to recognize the use of drugs as a health problem and present a moral judgment about it⁽⁴⁷⁾. Thus, the training of these professionals constitutes a resource that helps to break with health practices based on stereotypes constructed about the user of drugs⁽⁴⁸⁻⁵¹⁾.

Many studies have indicated situations that seem relevant for family members to continue to perceive internations as the best and only intervention options, including the family's lack of knowledge about where to seek treatment for drug users or other possibilities for treatment beyond internation, family burden in the care for the drug user, insufficient services and care network for drug users, disarticulation of the psychosocial care network and lack of training of the professionals working in the field of alcohol and other drugs. This situation was also discussed in the literature, highlighting that, according to legal professionals and regional health managers, family members requested compulsory internation due to the lack of health services and actions directed toward this population and their lack of knowledge about the public services offered⁽⁵²⁾. However, the continuity of treatment in substitutive services contributes to breaking the cycle of possible reinternations⁽⁵³⁻⁵⁴⁾.

Conclusion

The data from this literature review allowed the mapping of the scientific production on how family members perceived the treatment of drug users in the Brazilian context. The increase in scientific publications accompanied the inclusion of care for drug users and their families in mental health public policies.

The most studied research sites were CAPSad and CAPS, which were perceived by family members as spaces for fostering dialogue, contributing to the improvement of family relationships, improvement of the health of the user and reduction of the damage

caused by drug use. The inclusion of the family member in the treatment was considered important, to alleviate their distress, to help them in the relationship with the familiar user and to enhance the resources of the family to support the treatment of the drug user.

Among the difficulties observed by family members in services and treatments for drug users, the inadequacy of outpatient services in the care of drug users and in the involvement of family members in the treatment of the user, with the need for the extension of these services, stand out. The existence of barriers for the user of drugs to access health services was also highlighted, this mainly being due to the stigmatization of the user by healthcare providers, making it difficult to welcome them and understand the contexts of consumption and sustaining coercive treatment practices. These difficulties, together with the lack of knowledge of places that provide support and treatment for drug users or outpatient services, contributed to family members seeking internation.

The importance was emphasized of financial investments by the State in the expansion of the network of outpatient health services, in the dissemination of services available in the community and in the training of the healthcare providers. It is hoped that the results of this study also promote reflection among managers and professionals working in the area regarding public policies directed toward people who are problematic drug users. It is necessary for the services to offer support to the family members of drug users who are very burdened, through guidance and alleviation of their feelings.

A limitation of this study was the focus on the national literature, with a need for future literature review studies to also include the international literature. It is also suggested that studies are performed with family members who participate in self-help and mutual help groups for family members of drug users, aiming to understand their views on the treatments and services available to care for drug users.

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