

Resistance and prohibitionism in mental health: drug use as a complex problem

Resistências e proibicionismos na saúde mental: o uso de drogas como o bicho de sete cabeças da atualidade

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*“Não dá pé não tem pé nem cabeça
Não tem coração que esqueça
Não tem ninguém que mereça
Não tem jeito mesmo
Não tem dó no peito
Não tem nem talvez
Ter feito o que você me fez
Desapareça*

Bicho de sete cabeças, bicho de sete cabeças”
(Zé Ramalho, Geraldo Azevedo, Renato Rocha)

Few public health topics provoke as many divergent opinions and heated debates as drug use, whether those considered licit, in the case of alcoholic beverages, or illicit ones, such as marijuana, cocaine, and crack. This has been blown out of proportion by the media calling it a complex problem and, currently, it articulates different spheres of government and public policies besides health – public security and social assistance being the most common –, mobilizing significant portions of the public fund in this confrontation. These elements go beyond common sense and there is a lack of research, reflection, and systematization to deepen the debate based on critical appropriations of the multiple factors that constitute this theme as a political issue.

In this direction, issue 54 of *Em Pauta: social theory and contemporary reality* brings the thematic dossier *Brazilian Mental Health Policy and the use of alcohol and other drugs*. This edition brings together scientific articles originating from professional and activist experiences, relevant research and studies that corroborate Brazilian Mental Health Policy with a focus on comprehensive care for people

EDITORIAL

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who make use of alcohol and other drugs, based on the psychosocial care model, harm reduction, and the rights of users, family members, and healthcare workers.

The Coronavirus Disease (COVID-19) pandemic, which was declared over by the World Health Organization (WHO) on 5 May 2023, coincided in Brazil with the intensification of the economic, social, and political crisis, with setbacks in democracy and the significant dismantling of public policies undertaken by the Bolsonaro administration. In Brazilian Mental Health Policy, the psychosocial care model – a care strategy adopted after Law 10,216/2001 of the Psychiatric Reform (Brazil, 2001) – was the target of both defunding and political emptying, with the legal inclusion of Therapeutic Communities (TCs) in the Psychosocial Care Network (RAPS) and the advancement of prohibitionism as the flagship of the “new” drug policy established by Decree 9,761/2019 (Brazil, 2019).

It is worth noting that the establishment of RAPS in 2011 was an important milestone in Brazilian Mental Health Policy, as it introduced a new dimension to the set of mental health actions in the Unified Health System (SUS), whose established objectives were:

the expansion of access to psychosocial care for the population, at its different levels of complexity; promoting access for people with mental disorders and needs resulting from the use of crack, alcohol, and other drugs, as well as their families, to points of care; and guaranteeing the articulation and integration of health network care points in the territory, qualifying care through reception, continuous monitoring, and emergency care. (Amarante; Nunes, 2018, p. 2072).

Contrary to the principles of RAPS, the novelty mentioned is based on the withdrawal of rights from people with needs arising from drug use, opening the way to compulsory hospitalization through the stigmatization of users as dangerous and the medicalization of use scenarios as territories to be the target of hygiene policy by the state, like “Cracolândia” in São Paulo’s city center. This makes society believe that the return of the hospital-centric asylum model is the solution, that is, a counter-reform contrary to the logic of autonomy, care in freedom and in the territory, and the participation of subjects. It imposes a prohibitionist ideal, which violates fundamental human rights, without scientific bases and without a broad debate with civil society.

In 2019, through Recommendation 18 (Brazil, 2019), the Brazilian National Health Council (CNS) requested, together with the Federal Prosecution Service, the revocation of Decree 9,761/2019 based on several considerations, among which the following stand out: the contradiction between the treatment of mental health problems without violating civil rights expressed in the 1988 Constitution and the end of the harm reduction policy; the unconstitutionality of the setbacks in the advances made by the Psychiatric Reform

Law and the Anti-Asylum Fight through reorientations towards alienation, asylum, and the increase in suffering; and also the criticism of the new policy, which has as its axis the abstinence model, based on the financing of TCs in parallel with the disintegration of RAPS and the scrapping of Psychosocial Care Centers (CAPS).

The research entitled *Public Financing of Therapeutic Communities*, carried out by Conectas Human Rights and the Brazilian Center for Analysis and Planning (CEBRAP), found that, between 2017 and 2020, federal investment in Therapeutic Communities reached R\$ 300 million. This amount, added to the amounts transferred by state capital prefectures and state governments, totals R\$560 million (Conectas; CEBRAP, 2021). According to the Institute of Health Policy Studies (IEPS), this figure could keep more than six thousand CAPS units operating 24 hours a day or serve to implement more than 11 thousand new units in Brazil. In addition to the high direct public investment in Therapeutic Communities, “with the sanction of Complementary Law 187/2021, TCs now have the right to seek tax immunity and, thus, receive indirect public financing” (IEPS, 2022, p. 40).

In the care of people with needs resulting from drug use, there is no health production with isolation and deprivation of liberty. When this occurs, there is only a violation of their human rights. In inspections carried out in Therapeutic Communities by the Federal Council of Psychology (CFP), the Office of the National Ombudsman (PFDC) of the Federal Prosecution Service and the National Mechanism for Preventing and Combating Torture (MNPCT), practices were found that constitute rights violations and aggravate the psychological suffering of the subjects, such as abuses, punishments, signs of torture, and forced labor or “labor therapy” (CFP, 2018). On the other hand, when providing services under a closed hospitalization regime, Therapeutic Communities do not qualify for the requirements of Law 10,216/2001, which prevents their entry into the National Registry of Health Establishments (CNES).

On a political level, even though it was defeated in the 2022 presidential elections, the extreme right has strengthened in Brazilian society, especially within the legislative branch, as demonstrated by the profile of the Chamber of Deputies with a predominance of the interests of the Bull Caucus (agribusiness), the Bullet Caucus (armament industry) and the Bible Caucus (neo-Pentecostal churches). On the economic level, public disinvestment in social policies imposed by the austerity fiscal regime of Constitutional Amendment 95, which establishes the “Expenditure Ceiling” (Brazil, 2016), prevails.

It is illustrative of this process that, contrary to the principles of the Psychiatric Reform, the current federal government, taking office in 2023, has not revoked Decree 9,761/2019, maintaining the TCs in RAPS and having created the Department of Support for Therapeutic Communities within the scope of the Ministry of Development and

Social Assistance, Family, and Fight Against Hunger. This generated CNS Recommendation 1/2023, which, contrary to this initiative, emphasized the need to strengthen RAPS in the SUS.

Against the psychosocial care model structuring RAPS, this offensive that places abstinence as a priority measure is racist, sexist, homophobic, and transphobic, as it constitutes a moral counterpoint to the harm reduction policy, corroborating dimensions in care that are religious/not secular. In an antagonistic position, it is necessary and urgent: to reinforce the defense of the SUS as the main strategy for mental health actions; repeal Bolsonaroist legislation; expand coverage of 24h CAPS and reception units; centralize the supervision and monitoring of psychiatric hospitalizations in the Department of Mental Health of the Ministry of Health; and strengthen participatory management and democratic social control in health policy.

From this perspective, the article that opens the thematic dossier of this edition, produced by Marco José Oliveira Duarte, Dayana Barbosa Furtado, Marcilea Tomaz, and Thays Ribeiro da Silva, addresses the limits and challenges of health care for people who make use of harmful drugs, considering the historical articulation between the hegemony of the asylum logic and the drug prohibition policy in Brazil. The text highlights the political and economic setbacks in society and their consequences for the care of service users, pointing out that strategies to combat drugs based on repression and violence must be replaced by harm reduction policies, by education in human rights, by health, and by comprehensive, territorial, and psychosocial care, as well as for market regulation and legalization of drugs.

The following four texts also focus on the Mental Health, Alcohol and Other Drugs Policy in Brazil. The first article, prepared by Alessandra Ximenes da Silva and Rosiane Oliveira da Costa, analyzes the Mental Health and Drugs Policy in Brazil, particularly in the ultra-neoliberal governments of Michel Temer and Jair Bolsonaro, with emphasis on the counter-reforms that corroborate the trend of (re)asylumization treatment today, as opposed to the Anti-Asylum Fight. The second article, written by Liziane Silva Cruz and Cynthia Studart Albuquerque, focuses on the prohibitionist re-updating of drug policies during the Bolsonaro administration, through the advance of neoliberalism. The study demonstrates that the realignment of drug policies, on the one hand, reduced investments in RAPS, and, on the other, increased spending by the Ministry of Justice and Public Security (MJSP), showing a substantial investment in the “fight against drugs”, from the perspective of repression and punishment. The third article, written by Leandro Sobral de Lima and Dan Pinheiro Montenegro, addresses the binomial of prohibitionism-racism within the scope of the “drug issue”, based on historical aspects and based on current data on incarceration in Brazil. The text argues that the logic reproduced by prohibition updates historical forms of oppression present in the constitution of the Bra-

zilian social fabric, mainly with regard to class and race. That is, the prohibitionist logic has been effective in incarcerating and killing the poor and black population. The fourth article, written by Marianna Nascimento Fernandes and Andréia de Oliveira, discusses the strengthening of Therapeutic Communities in the process of counter-reform and privatization of the National Policy on Mental Health, Alcohol and Other Drugs in the SUS, whose mode of intervention, based on discipline-work-spirituality, operates against the principles of health and psychiatric reforms.

The second block of the thematic dossier consists of six articles. The first article, by Betina Ahlert and Vitória Cravo Costa, discusses the anti-asylum perspective in the Brazilian Mental Health Policy, based on the perception of CAPS workers in Cuiabá, Minas Gerais. The authors highlight the contradictions, advances, and setbacks in the implementation of services that oppose the hospital-centric asylum culture of disrespect for human rights. The second article, by Ana Carolina Niside, Thiago Bagatin, and Maria Lucia Boarini, presents the results of a survey carried out at Paraná's Court of Justice. The results demonstrate that there is consolidated jurisprudence that endorses compliance with security measures in judicial asylums, violating the principles of the Psychiatric Reform. This, consequently, reinforces the maintenance of hospitalization and the association between madness-dangerousness-crime.

Considering an open field of possibilities, the third article, by Olívia Barbosa Miranda and Thaísa Vieira Costa, reports the work carried out by a CAPS team with a subject diagnosed with a serious mental disorder and his family. The inspiring experience of deinstitutionalization highlights the challenges of the process of returning to society and the role of substitute services, in conjunction with the role of the family and the mental health team, during the transition from the asylum to a free family and social life. The fourth article, by Yago Pereira de Freitas, Liane de Souza, Ariadne de Jesus, and Thiago Cunha, presents the interesting experience of the Espaço da Diferença program, which is part of the programming of the community web radio Revolution FM. Under the coordination of the Trilhos do Engenho Coexistence and Cultural Center, this program is produced collectively with users of the mental health services of the Instituto Municipal Nise da Silveira in Rio de Janeiro and seeks to strengthen the fight against social segregation and discrimination of subjects, through artistic-cultural expression. The fifth article, by Renata de Valentim and Mariah da Silva Martins, also addresses the Nise da Silveira Municipal Institute, proposing a brief cartography of the history of the forms of care developed there. The authors indicate that the use of art and culture in the existential reinvention of institutionalized subjects builds new forms of treatment, as opposed to the asylum model. The sixth and final article in this group, by Jose Maria Alberdi, brings critical reflections on the Mental Health Policy in Argentina, in a context of reforms and counter-reforms, focusing, in particular, on the case of the Province of Santa Fé.

The free theme section is composed of the article written by Ricardo Peres da Costa and Olegna de Souza Guedes, which addresses the association between the socio-metabolic control of capital and the contemporary effects of the penal state, considering the degrading reality and precarious conditions of Brazilian prisons, further aggravated in the context of the Coronavirus Disease (COVID-19) pandemic.

In this edition of the *Em Pauta Journal*, Ana Inês Simões Cardoso de Melo and Ney Luiz Teixeira de Almeida conducted an unmissable interview with Sonia Barros, nurse and current director of the Department of Mental Health, Alcohol and Other Drugs of the Secretariat of Specialized Care of the Ministry of Health, which, in 2022, was awarded the Nise da Silveira Prize. The interviewee told us about the current perspective of rebuilding the Mental Health Policy in the country, in line with the precepts of the Psychiatric Reform, and the resumption of the Alcohol and Other Drugs Policy, based on human rights, on interministerial and intersectoral coordination, and on resuming popular participation in the construction and management of policies.

This edition also presents two reviews of fundamental works for the mental health debate. The first, prepared by Roberta Lima Costa, is from the book by Deivison Faustino entitled *Frantz Fanon and the crossroads: theory, politics, and subjectivity*, published in 2022 by Ubu Editora. The second, written by Ana Carolina Bondezan Nogueira, is from the book by Rachel Gouveia Passos entitled *In the sights of the rifle: the mental health of black women under analysis*, published in 2023 by Hucitec Editora.

In this edition, the *in memoriam* life tribute is in recognition of the transformative influence exerted by neurologist Domingos Sávio do Nascimento Alves in the field of mental health. Domingos played a prominent role in the Anti-Asylum Movement in Brazil and his role was essential in the debates and in the process of building the Psychiatric Reform from the 1980s onwards, leaving a legacy of achievements in the Brazilian Mental Health, Alcohol and Other Drugs Policy.

Closing this edition, the photographic exhibition presents the work of Eduardo Mourão Vasconcelos who, in addition to being a teacher, researcher, and writer, is also a sculptor and photographer. We cannot fail to note that Eduardo is a psychologist, political scientist, and associate professor at the School of Social Service at the Federal University of Rio de Janeiro (UFRJ). His career is marked by his political activism and advisory work, especially in mental health, alongside the Psychiatric Reform and Anti-Asylum movements. His artistic work proposes landscape contemplation, through which it is possible to create insinuating “pictorial works.” The images created in a balance of light and color show realities captured by the wonder of a look that goes beyond the camera lens, producing aesthetics and meanings.

Finally, locking up is not treating! It is through the centrality of the mobilization and participation of workers, users, and families in the demand for public financing and

effective social control for health that the idea of the “complex problem” can be faced. There is an urgent need for the daily construction of democratic, anti-prohibitionist psychosocial care, with the contribution of different areas of knowledge and in defense of the SUS, of mental health, and of the public social policies that comprise it. It is in this spirit that we invite everyone to wander, explore, and be affected by the content we present in this issue of *Em Pauta*. Enjoy reading!

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