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Diversity of Contexts in Drug Use Among Street Adolescents

Yone Goncalves de Moura,[1] Zila van der Meer Sanchez,[1] and Ana Regina Noto[1]

Abstract

In this study we aimed to investigate through ethnographic methods the different contexts of drug use by street adolescents in Sao Paulo, Brazil. Participant observations and semistructured interviews were performed at 11 major points of adolescent concentration in the streets of the city and in 10 care institutions. The sample was composed of 17 adolescents between 12 and 17 years of age. Data showed diverse patterns of drug use distributed by geographic situation and street circumstances. Observations were grouped into three main contexts: (a) immersion: greater intensity of drug use associated with greater involvement in the street culture; (b) surface: less drug use associated with family closeness; and (c) alternative–migratory: greater involvement with drug trafficking and prostitution associated with less family closeness and street culture. The drug use patterns varied in accordance with the diversity of street situations. Therefore, the peculiarities of each context should be taken into consideration in the development of social/health policies.

Children and adolescents concentrate in the urban centers of major cities of the world and roam the streets without parental or guardian supervision. These youths, alone or in groups, are involved in activities such as doing odd jobs, begging, juggling, washing car windshields, guarding cars in the area, and/or committing crimes, all in the pursuit of survival for themselves and their families (Auerswald & Eyre, 2002; Kidd, 2007; Scanlon, Tomkins, Lynch, & Scanlon, 1998). Others utilize the street as a place to live, having little contact with their family of origin. These situations occur on all continents, but more so in countries of Latin America and Africa (Aderinto, 2000; Belfer & Rohde, 2005; Montauk, 2006; Olley, 2006).

In Brazil, the unequal distribution of wealth, extreme poverty of a portion of the population, necessity of child labor for survival, and fragility of the family structure all promote the presence of children and adolescents in the streets of major cities (Carvalho et. al, 2006; Forster, Tannhauser, & Barros, 1996; Noto, Nappo, Galduróz, Mattei & Carlini, 1997; Raffaelli, Koller, & Morais, 2007). However, little is known about drug use in the reality of life in the street, because Brazilian studies carried out in this population are predominantly quantitative in nature, which limits a deeper understanding of the phenomenon

within its own context. Ethnography can help fill this gap. Between 1987 and 2003, five epidemiologic surveys were conducted in Brazil regarding this theme, with the last one including all 27 Brazilian capitals (26 state and 1 national; Noto et. al 2003). In the national survey of 2003, researchers found that 43.8% of adolescent boys and 31.1% of adolescent girls used drugs daily. The greatest positive association with nonuse of drugs in this population was the family bond. Noto et al. (2003) demonstrated that among adolescents living with their families, 19.7% used drugs daily, vs. 72.6% of those not living with their families.

The role of care institutions for this population is also noted in the literature (Auerswald & Eyre, 2002; Carlson, Sugano, Millstein, & Auerswald, 2006; Carvalho et al., 2006; Pollio, North, Eyrich, Foster, & Spitznagel, 2003). Some researchers have demonstrated that care institutions and the professionals involved make up part of a solid

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socioaffective network for these adolescents. In this way, one sees the importance of the social context for drug use even when faced with the diversity and changeability of street life. In quantitative terms (i.e., answering the question, How much?), Brazilian studies do not appear to have differed from those carried out in other countries in Latin America (Belfer & Rodhe, 2005; Pinzón-Rondón, Briceño-Ayala, Botero, Cabrera, & Rodríguez, 2006). However, at the moment, the large gap of scientific knowledge in this area is found in the understanding and depth of the phenomenon, allowing the joint interpretation of drug use and social context in which the adolescent is immersed.

To fill this gap, the consideration of social networks in this study was fundamental to understanding the diversity of contexts in this population. The social network, as defined by Sluzki (1997) and Tracy and Martin (2007), encompasses not only the people, but all of the experiences lived by people, including family, school, job, friends, and community, as well as any individual actions within one's environment. It is important to emphasize that these teenagers come from countless exclusion situations that intensify the inherent vulnerability to adolescent development that is characterized by psychosocial conflicts, the need for social integration and individual independence, the search for self-affirmation, physical changes associated with puberty, and the initiation of sexual activity. Moreover, adolescents in the street environment deal with networks that involve other risks, such as the absence of family or a primary social network, and other risks such as engaging in drug trafficking, infantile prostitution, and violence. The complexity of these factors favoring the use of drugs in this population highlights the importance of studies that contribute to our understanding of the interrelationship between different social network elements present in the street environment (Milburn et al., 2009; Street Youth Study Group et al, 1994; Tracy & Martin, 2007).

Researchers have used ethnographic studies to try to understand drug use, a behavior that is marginalized and/or poorly accessible for study in populations that are themselves poorly understood (e.g., street youth). In the extant literature, ethnographic research has added a better understanding of the topic, providing a different perspective about the subject and complementing the epidemiologic studies of the use and abuse of substances (Atkinson, Coffey, Delamont, Lofland & Lofland, 2001; Stahler & Cohen, 2000). Thus, the objective of this study was to investigate ethnographically the different contexts of drug use by street adolescents in the city of Sao Paulo, taking into consideration individual characteristics, family histories, daily activities, social networks, patterns of drug use, health risk behaviors, and involvement with drug trafficking.

Methods

Two qualitative/ethnographic techniques were utilized: participant observation and in-depth interviews (Morse, 1994; World Health Organization, 1994).

Observational Studies

Various observational studies were carried out in two different settings: the street and the shelters designated for this specific population (Irwin & Johnson, 1995). In the street, the participant observation occurred at 11 meeting points of street adolescents in the city of Sao Paulo. This population moves daily through the city, from one location to another, being at one of the points in the morning and another at night. Although adolescents generally meet in groups, the number of participants in each group during the observations varied greatly, considering that the groups had from four to eleven adolescents each. The total period of observation was 21 months, between October 2003 and July 2005. Each location observed was visited two or three times for about 6 hours each time, totaling about 350 hours of observation.

The second site for participant observation consisted of 10 care institutions for street adolescents in the city of Sao Paulo. On the occasions of these observations, there was a familiarization with the communal environments and the routine activities of each of them. It should be pointed out that street children and adolescents need a dynamic social environment and stable relationships because they have already experienced all forms of exclusion. As a result, these care institutions constituted the main reference point for the majority, taking the place of the family at this moment in the lives of the youths.

In the streets, the investigator (first author) performed a preobservation to become familiar with the points of greatest congregation of adolescents and to learn their habits, approaching them gradually. The investigator frequented the gathering points and finally attended as well as participated in the routine of the group after the observation period. In this case, it was established by the group that they would not use drugs in the presence of the researcher, nor would they engage in any other illicit activity (stealing, fighting, and disrespecting people). After all group members accepted the researcher's participation as an observer in their activities, the researcher invited the adolescents to participate in an interview. This participant observation revealed that the adolescents performed daily activities such as doing odd jobs, begging, working at the traffic light by selling candy or working as jugglers and street performers, and begging for money from the drivers stopped at traffic lights, all in an effort to

provide for themselves and their families. These activities were observed as part of their daily routine.

At the institutions, the first contact was made with the educators who served as key informants (World Health Organization, 1994). These educators had a wide knowledge of the studied population and helped the investigator approach this group by explaining the activities of the institution and the reality of the street. After establishing contact and building trust, the educators invited the investigator to participate in the activities with the adolescents, facilitating closeness with potential interviewees.

The situations observed in the institutions and in the streets, described in the results section, were annotated in field notes (FN) for later analysis (Morse, 1994). All of the manifestations (verbal, behavioral, and attitudinal) of the adolescents, the interaction forms of the groups (routines, values, norms, and survival strategies), and the social context (location, persons, dynamics of the street, resources of the institutions) were observed and recorded. The central foci of the observations were drug use behaviors (forms of use, times, associated risk behaviors) and factors related to drug use (access to drugs, policing, government policies, and so forth). In addition, the following aspects were analyzed regarding the dynamics of the institutions: the interactions of the professionals when dealing with adolescents intoxicated with some type of drug, the routine of activities, the difficulties of steering individuals to health services, and the rotation of the professionals in various institutions, along with these professionals' reports of the constant lack of help in dealing with drug situations. This information was also recorded in FN immediately after leaving the location. The recordings of field experiences were later submitted for analysis of content (Bardin, 2004) along with the material obtained in the semistructured interviews, permitting triangulation (Patton, 2002) of the diverse topics and a deeper understanding of the phenomena under study.

In-depth Interviews

In-depth interviews were conducted (World Health Organization, 1994) with 17 street adolescents; that is, adolescents who spent the greater part of the day or all day in the streets of the city without parental or guardian supervision, in search of leisure or sustenance. Intentional sampling with predetermined criteria was utilized (Patton, 2002). The inclusion criteria for the sample were as follows: age between 12 and 17 years, being on the street for at least 1 year, and having used illegal drugs within this period. Adolescents who showed difficulties in understanding or were under the influence of drugs were excluded from the research because they could not understand the researcher's explanations, were sleepy or

agitated depending on the type of drug they used, and were sometimes even aggressive, which made the approach difficult. First, four pilot interviews were conducted. In these pilot interviews, we allowed for the adaptation of the semistructured interview for suitable, understandable language for this population. This was possible because of the observational nature of the study and the relationship with the teenagers, with the investigator using colloquial Portuguese and even slang terms used by the teens.

The sample was composed in three ways: (a) indication by key informants at the institutions; (b) direct contacts in the streets; and (c) snowball sampling (Biernarcki & Waldorf, 1981), in which the first interviewees referred us to other adolescents (or groups), who in turn indicated others. The snowball method was also utilized for accessing the institutions working with this population. In this way, participants at each institution indicated others who carried out similar services, until redundancy of the institutions listed was achieved.

Out of the 11 regions observed in the streets, the interviewed participants were located in five gathering points (two traffic lights in bustling commercial areas, one very busy central block, one location in the old center region known as Crack Land, and one very busy block in a neighborhood around the city center). Crack Land refers to a central area where there are many businesses, with buildings and houses built at the beginning of the last century. Nowadays, some buildings and residential homes are occupied by families with few resources, as well as those without any resources who are living on the streets, in parks, and in abandoned buildings in this area. Those who live on the streets include adults, children, and adolescents. The majority of these people use multiple types of drugs. Some groups use large amounts of alcohol daily in addition to other types of drugs. Other groups smoke crack (cocaine) in the morning and at night. The adolescents stay in groups, negotiating, arguing, and using crack.

While under the influence of crack, the adolescents lay down on sidewalks, in parks, in front of business doorways, or in cultural areas, until they are ultimately removed by the police or private security. Further aggravating the situation, some of these existing buildings still host cultural events and are maintained for this purpose. In this study, we observed that adolescents sometimes spent many days in this pattern of use. As this is also a business area, other people often walked by the adolescents, for example when getting off buses or subways and then walking toward their destinations. When adolescents were anxious to use their respective drug of choice, they performed illicit activities such as theft and group robbery, attacking passers-by. The interviewed adolescents

were also located in nine of the ten visited institutions (three government institutions, one university, three private institutions, and two nongovernmental organizations). The dynamics of these institutions were examined by observation and by questions asked by the researchers of the employees to identify the difficulties inherent in the work. They were asked about the following: (a) activities undertaken by the institution, (b) the role and training of the staff, (c) the presence of intoxicated youth at the facilities, and (d) the institution's role in the social network of adolescents.

Throughout the process, the interviews and observations were discussed by the investigators to evaluate the necessity of inclusion of new interviews and/or the continued search for different profiles until no new information was being added, reaching redundancy (World Health Organization, 1994) or a point of theoretical saturation (Patton, 2002). The semistructured interviews were individual, anonymous, and conducted in isolated locations, with only the participant and the interviewer present. The outline of the interview included questions about the street situation, drug use, beliefs, attitudes, risk behaviors, and the social network of their surroundings such as family, school, care institutions, community, police, sexual activity, and daily life. The topics studied were initially defined based on the participation and experience of the investigators in previous studies (Nappo, Sanchez, Oliveira, in press; Noto et al., 2003; Noto et al., 1997); in pilot interviews; and on participant observations, which, for example, revealed the importance of investigating the family history of drug use or trafficking.

Following a period of frequent interaction with the group, during which stronger bonds were formed between the group and the investigator, the latter invited the adolescents to participate in the interviews. After accepting, the adolescent was taken from the group to a place out of view of his or her street friends, and verbal informed consent was obtained (in addition to a signed consent form from the institution director) before the start of the interview (Olley, 2006).

The interviews were tape-recorded, transcribed verbatim, and analyzed using the technique of analysis of content (Bardin, 2004), which in addition to describing, also permits discussion and proposal of inferences based on the data. After transcription, floating readings (the first reading, before the coding process; Bardin, 2004) of the interviews were carried out. This allowed the determination of the principal categories of interest. Each interview was then coded; that is, the literal information was transformed into a coded format. At the same time, each interview was read as many times as necessary so that answers to the questions posed to the interviewee

were understood in the most complete manner possible (Minayo, 2004).

To preserve the anonymity of the participants, the interviews were identified with an alphanumeric code. The research project was approved by the Ethics Committee of the Federal University of Sao Paulo.

Results

Using participant observation, we learned that the social network that most supported these young people consisted of the institutions. They were the main service centers accessed by adolescents for hygiene, nutrition, recreation, housing, security, and references for help. However, institutions reported several difficulties, such as political issues and a lack of financial resources. It was also noted that events and policies of the city in effect at any given time influenced the operation and maintenance of institutions, as reported by the professionals interviewed. With regard to drug abuse, the difficulty of referral for treatment emerged, even though these institutions had considerable experience working with this population. The adolescents sought solutions to their difficulties inside their street group, forming their own social network. This network assisted in their exchanges of information about the existence and functioning of local institutions where they could seek help.

Of the 17 interviews conducted, 10 took place at an institution and 7 in the street. Participants included 12 adolescent boys and 5 adolescent girls; their ages varied between 12 and 17 years. Only 3 participants returned home every day, and only 1 was attending school. As for the others, the departure from their families was justified by constant arguments/fights at home, abuse, and the search for freedom. The majority of the adolescents reported living on the street for more than 2 years. Based on interviews and observations, we identified two salient aspects for differentiating the interviewees: geographic location and level of immersion in the street culture. Two patterns of drug use were identified according to geographic location, and three circumstances were identified according to level of immersion in the street culture.

Situation of Use According to Geographic Location

We identified two street situations by geographic region: one in the old city center (situation 1), and one in the surrounding regions, that is, distant from the center of the city (situation 2). Both had the constant presence of street adolescents as well as a general street population. It should be pointed out that the studied municipality underwent a political restructuring during the study period in

relation to the locations of drug use, principally in the center of the city, altering considerably the movement of adolescents in these regions. During one of the months of participant observation, an international United Nations event took place. Representatives of various countries were present, along with the national military, in the old city center, where the event was being held and which also had the largest concentration of adolescents. During this period, the presence of children and adolescents in the main circulation areas of the city dropped considerably, a fact noted and reported by the few adolescents who insisted on remaining in hideouts in abandoned places. The majority of them had fled to nearby cities, seeking shelter, as mentioned in the FNs:

> From there on, up to the corner, there are two kids, doing juggling. I talked to them asking them where were the others, because the other times that I passed by they were not there. They said that the others scrammed because the police was making arrests, that they took off in no particular direction. (June 7, 2005, night)

Because the observational study lasted almost 2 years, it was possible to observe the movement of these youths before, during, and after these events.

Geographic situation 1: Center. In addition to adolescents, the old city center also contained adult street dwellers who were in a permanent drunken state. Some adolescents joined the group of adults and also consumed alcohol, glue, and crack, with the last two used almost constantly. In this region, the adolescents showed greater agitation and aggression within their own group and with persons who passed through the area. It was observed that when using crack, they gathered in smaller groups, away from the group of adults. They argued among themselves during use because of distrust that some of them had used more than others. In the use of glue, the groups were larger and the individuals appeared to be less aggressive toward each other. Because they were always intoxicated on crack or glue, the majority did not meet the criteria for participation in the interviews. However, this constant intoxication was observed only at these locations. Interviews with adolescents in this geographic situation only occurred when they sought help at the institutions outside the city. Another characteristic of the city center was that the adolescents organized themselves into groups to wander through the streets, continuously migrating from one location to another, and sleeping in abandoned places or under bridges. Among the adolescents at the old center, survival through the practice of small crimes and odd jobs, along with the use of drugs—especially glue—was observed at all moments of the day, as is apparent in the following FN:

> On the sidewalk, there were three boys sleeping on the same mattress. On another mattress, two other girls sniffed glue, while another slept on the other side of the mattress. They barely answered the questions because they were under the influence of the drug (glue). Later, two girls and another more talkative woman teen asked us for money. The three girls surrounded people who walked in their direction, asking them for money or trying to steal it when they did not receive it. There were also three other boys who seemed to be smoking marijuana because they hid something similar when they saw us. (September 15, 2004, night, center of city)

Geographic situation 2: Surroundings. In the regions farther from the center, surrounding the city, the adolescents utilized the street space to work. Adolescents reported working at traffic lights by selling candy or working as jugglers and street performers, as well as begging for money from the drivers who stopped at traffic lights. Part of the day was exclusively dedicated to work, for the purpose of helping to support themselves and their families. In this group, the use of drugs was not explicit, making it difficult to detect. The few observations of this phenomenon most often took place at night and in a discrete way, as recorded in the FN:

> Close by there is an abandoned couch with a child of about one year in age playing and just behind they are dividing and making marijuana cigarettes, they see us and continue without talking to us. (October 28, 2005, night, surrounding areas)

In general, it is the youths of these regions who sought out the institutions for hygiene, food, recreation, friendship, and safety. It was observed that in situations of excessive drug use, the adolescents asked the institutions for help with a place to stay. However, other difficulties were reported by the professional institutions, such as questions dealing with money and politics regarding drug use, and about the difficulty of guidance for treatment:

> It is that way, it is a very difficult work, even thought we like it, it is a very hard job, very stressful. Sometimes it is needed to refer the teenager [for drug treatment], but there is not a place to refer him, for example. Yeah, there isn't. We cannot refer him, we do not know if there is. (FN, February 28, 2005; day)

Circumstances Identified Regarding the Level of Immersion in the Street Culture

Using testimonies and observations, we identified associations between patterns of drug use and lifestyle of the adolescents. These associations were grouped into three principal circumstances: (a) immersion context: characterized by a greater intensity of drug use and immersion of the adolescents in the street culture; (b) surface context: characterized by less drug use and a situation of greater proximity of the adolescents to their families; and (c) alternative/migratory context: characterized by greater involvement of the adolescents in drug trafficking and prostitution, and less proximity to the street culture.

Immersion Context: Greater Intensity of Drug Use and Greater Proximity to Street Culture

This context included patterns of great intensity of drug use and immersion in the street culture. The eight participants, who at the time of the interviews were living this dynamic life, reported staying in public locations: streets, squares, sidewalks, abandoned buildings, or in hideouts. The first episode of drug use in this situation occurred between 7 and 12 years of age, and the majority began using drugs before going out into the streets, while still living with family. Substance use was predominantly initiated with alcoholic beverages, tobacco, and inhalants.

In view of the difficulties of staying and surviving in the street, the adolescents commented that they grouped together. To belong to the group, they began to participate in the daily routine of the street, including ritual drug use. These adolescents commented that they began leaving their home for the street without parental or guardian supervision between 6 and 8 years of age, accompanying some friends and/or siblings in search of fun:

> I began to hate it when they [parents] began to fight in the house and I began leaving [home] at 6 years old. I asked for money, robbed. I like the street because I could do whatever I wanted—use drugs anytime I wanted. I used crack, cocaine, marijuana, glue. People drink [beer/alcoholic beverage distilled from sugar cane] in the morning, in the street, in any way you buy [drug], use drugs all day. (age 14)

In the field, some peculiarities were observed among the adolescents located in the downtown district and near its perimeter. The adolescents of the center (geographic situation 1) congregated in larger numbers, forming groups of 7 to 11 members, and in general showed more aggression. The pattern of crack use was constant and explicitly performed within the group; however, it intensified at night when there were fewer police in the streets and fewer people in the area. The routine of these adolescents generally consisted of activities aimed at obtaining drugs, including robbery, which furnished money for drugs as well as food, as recorded in the following FN:

> In Cracolandia [Crack Land] adults, adolescents, and children are using crack together in small groups in front of the doors of the houses, on sidewalks, and even in the middle of the streets. When we walk by them, they get angry because we are around. They send us away and go back to drug use. Those who are still not under the influence of drugs take advantage of our presence to ask us for money, or to try to sell any of their belongings. We noticed some of the groups watching people who walked by. The intention of the groups was to rob those that passed by. (September 15, 2004, night)

In geographic situation 2, the highly immersed adolescents showed less aggression and stayed in smaller groups, between 5 and 7, maximum. The pattern of drug use was different, predominantly alcohol consumption combined with the use of glue. Despite involving a more intense drug use, the drug of choice among these adolescents was different. Generally, alcohol was used early in the morning, when waking, and as the day progressed the use of glue intensified:

> The people, everybody like that, I began to drink. I went to make a drink, I got drunk because I see alcoholic distillated [distilled] beverage made from sugar cane there in front of me, and right away I get sick. I don't remember anything, people say that I get aggressive with glue, it is a breeze. I am normal, I am sad, you know, sniff glue and normal. (age 16)

The adolescents reported that they did odd jobs and robbed to obtain these substances. They were known in the area in which they stayed, and therefore they did not need to rob to feed themselves because most of the time someone gave them food. Additionally, some restaurants gave them leftovers in the early morning. In all areas of the city, these highly immersed adolescents reported that drugs had the function of easing the difficulties inherent to life in the street such as hunger, cold, and violence, but also had the attraction of fun. In this circumstance, and for the purpose of leisure and passing the time, the institutions played an important role for these adolescents. In these locations, adolescents were offered various types of sports and games, and when under the responsibility

of the institution, they were not allowed to use drugs. Many reported moving around between various institutions in search of help as a consequence of intense drug use and other health risk behaviors.

Surface Context: Less-Intense Drug Use and Greater Proximity to Family and Work

In this context, 5 adolescents grouped together, showing patterns of less drug use and greater proximity to family. Initial drug use in this context occurred between 6 and 10 years of age. In the majority of cases, use began before leaving the family home for the streets, with alcoholic beverages, tobacco, and glue. The adolescents in this context still had not completely broken ties with the family; one of them still had school ties. They would leave the house every day in search of sustenance. They spent most the day in the street, but rarely did they sleep in the streets, generally returning home at night:

> I go to school in the morning. I am attending supplementary 7th and 8th grades GED-like [GED = General Educational Development; for students who are older than normal for a particular grade in school]. I study in the morning, come back home, help my mom with house chores, I bathe my brother before he goes to school and my little brother who does not walk, and then I come here to the mall traffic light. (age 16)

In the interviews, the adolescents who were living this dynamic life reported daily family interactions and trying to make some money for their own sustenance and/or to support their families. Their main activity was working at traffic lights. These adolescents reported selling candy or working as jugglers and street performers, as well as begging for money from the drivers who stopped at the traffic light. The activities were considered a serious job for these adolescents, who reported having started these activities at an early age, usually guided by their mothers or older sisters:

> Working in any way, working for me is a thing that keeps me from thinking, where if I stay busy I don't go imagining drugs, robbing, killing, where there you are with your head in work and not in life of the world, the big world. (age 17)

The adolescents attended to their personal hygiene to avoid repulsing their clients (drivers who stopped at the traffic lights), and tried not to lose time with leisure. In this group, there were some children in the range of 7 to 9 years old who were sometimes accompanied by an adult.

The pattern of drug use was less intense, generally involving tobacco and marijuana, which was smoked far from the place of work. The use of marijuana took place more often in the evening, in small groups of 2 or 3 adolescents, in some specific and private locations. The use of drugs was avoided in working areas (at the traffic lights):

> He returned home every day. I began to work at the traffic light before I was six. I began using marijuana. I only used when I had time and was not working. When I stayed in the street I used drugs, smoked cigarettes, sniffed glue, sniffed cocaine. (age 16)

These adolescents were in a context described as *surface* because their relationship with drugs was still superficial, and drug use was not necessarily daily, showing evidence of possible regression of behavior if they were subjected to interventions. Such adolescents were identified only in geographic situation 2:

> Then I moved over here. Time was passing, was passing. I began to leave home. I already knew how to use the subway, I sold bullets inside in subway. I found a kid, I went with him. The people would come out in the day like that. I began to sniff glue, smoke cigarettes, was the beginning and I was passing time, passing, passing. (age 12)

Alternative/Migratory Context: Greater Involvement With Drug Trafficking and Less Proximity to the Street

We included 4 girls involved with selling drugs and prostitution in this category. Despite having lived the reality of the street in the past, they were encountered only in the institutions, because they had migrated to an alternative lifestyle in which they were seen as women of the drug dealer, and no longer belonging on the streets. The four had left home at around 10 years of age because of relationship difficulties with their mothers, who had a history of pairing with drug users or dealers. The girls reported having been beaten by their parents for running away, for prostituting themselves, and/or for using drugs:

> Then my father arrived. He came at me to beat me, then I talked with him that he had no right, that he was not the one who created me, that he never did nothing. Then he beat me, so much that it left marks until today. First I began smoking mesclado [marijuana and crack], afraid with the pure crack, and cocaine because of mesclado. I don't really

remember the order, I used marijuana, glue, mes-clado, crack cocaine. I injected cocaine, heroin. I used ecstasy and drank all types, I used [paint] thinner. (age 14)

During field observation, no street youths were found with this profile. On that particular week, the girls described above and some boys had fled the streets because an event was taking place that led to a strong presence of police and soldiers in the city. These adolescents sought space in institutions, but the institutions were full. As reported by the few teens hidden in the street, many had found space available in one particular institution. Although there were only a small number of girls with this profile, we were able to observe and describe the culture of a previously unknown group. It should be also be pointed out that these participants were accessed by the snowball method, and were not in contact with each other. Although they experienced street life, such as breaking ties with the family, leaving home, roaming and/or sleeping in the streets, using drugs, and forming groups, they did not stay in the streets. Based on this fact, we characterized them as migrants, escaped from the context of immersion and installed in an alternative context, away from the street. These adolescents were very careful with their appearance. They also reported that they were not attached to the street culture, despite already having experienced it. They did not work at traffic lights because they were ashamed:

> I do not work at traffic lights. I never did. I feel completely ashamed. I also do not eat in the streets. I prefer to have some water and smoke crack to not feel hunger. (age 12)

In this group, first drug use occurred between 7 and 11 years of age, before leaving the family home for the street, with illicit drugs such as marijuana, cocaine, and glue. The use of crack was reported by all the adolescents, and the first episode of drug trafficking occurred in the home with some family member, usually the stepfather. The activities related to drug dealing initially included observing and exercising small functions such as taking care of clients, making deliveries, packaging, preparing drugs for use and sale, and making small collections. After this, other activities of greater responsibility were performed, as noted in the report below:

> I was highly considered [regarded] by the pusher. I began with delivering [drugs], I began to deal. In the beginning I ran some errands for money. If I had to charge someone, I would; if I had to kill someone,

I would. I did it, but I only did it three times. When I didn't have coke [cocaine], I used Anador [an over-the-counter pain medication], I would use a phone card or a money bill, roll it and sniff. (age 13)

Based on their reports, early participation at home facilitated contact with drug trafficking and dealers, which in turn facilitated the search for sustenance through drug dealing and prostitution. Thus, despite frequenting the institutions helping street adolescents, they lived in slums on the outskirts of the city as sex partners of dealers, which provided them status, protection, and the possibility of having drugs for use when desired. Other behaviors common to this group were the start of sexual activity between the ages of 10 and 12 (with a much older person), and the practice of abortion.

The adolescents of this context moved sporadically between the immersion and alternative/migratory contexts; one of them was initially observed in the street, and then found for the interview in one of the visited institutions. However, the surface context was experienced by them only in an experimental way, and only immediately (for a few months) after leaving home for the street; it was then substituted by immersion.

Oscillating Between the Geographic Situations and the Circumstances of Immersion in Drug Use

Although the adolescent participants reported determined patterns of use and predominant lifestyles (immersion, surface, or alternative/migratory contexts), they had a history of oscillating between these contexts related to the time in life and the necessity of sustenance. Therefore, they were classified based on the present experience, that is, that which was occurring at the time of the interview. These oscillations in street situation occurred intra- and inter-group in the different contexts. Factors such as time in the street, age, necessity of sustenance, type of drug, and environmental context of the moment were determinants for this migration from one context to another, with a predominance of the surface circumstance compared to that of immersion.

Our purpose was not to group these adolescents into tight categories, but rather to explore the diversity of behaviors and their associations with historical–social contexts. This population remains inaccessible and socially excluded. However, the importance of care institutions for these youths became apparent though participant observation. It was found that through these services the adolescents had at least a minimal access to facilities for hygiene, food, and care.

Discussion

In this article we have described different street contexts in which the pattern of drug use by adolescents varies according to the complexity and peculiarity of the phenomenon. Despite this diversity, some aspects appear to be common to the different street circumstances. Among these is the search for integration into groups through involvement with street culture and the easy access to drugs. Also readily seen are the vulnerabilities inherent in the street situation itself, such as hunger, cold, violence, and facing adversities in general, which appear to be factors that predispose adolescents to drug use in the street. Thus, principally in the context of immersion, the use of drugs takes on the goal of self-medication, that is, acting as a relief from the difficulties of reality. For some youths, the pleasure felt with the use of drugs took on the character of fun, which was noted in all of the contexts. This, coupled with a lack of limits for use, favored the intensification of the behavior. These aspects have also been demonstrated in other studies, and should be considered in the implementation of specific policies (Auerswald & Eyre, 2002; Scanlon et al., 1998).

In light of these findings, the social network approach, as proposed by some researchers (Milburn et al., 2009; Street Youth Study Group et al., 1994; Tracy & Martin, 2007), contributed important insights to the study of this population. Along with participant observations, the social network approach increased the comprehension of the interaction process for both participants and the researcher in the natural environment of the studied theme. A contextualized comprehension of these teenagers' realities was also possible, including their development in the street environment, as well as how they interacted with the various social segments that formed their personal and communal social networks. The observational nature of the study enabled the understanding of the influence of these various social network segments: institutions of care, health facilities, schools, community, and finally the importance of strengthening the significant bonds established by the group itself by finding survival strategies in an adverse environment. Furthermore, it enabled the insertion of the researcher into the group's culture. Interaction was fundamental to the proximity between the researcher and the study participants happening in a natural manner. This was observed in the geographic context when the presence of adolescents in the city center diminished because of an international political event. However, this reduction was not the result of a social or health care intervention in this population. On the contrary, the constant presence of police and military soldiers for security removed these adolescents from the city center streets without providing an alternative place for them. This fact seemed to strengthen the social network support among the groups for survival, while searching for institutions for protection and care. Likewise, the three identified levels of street culture immersion each have specific patterns of drug use; adolescents acted in groups to solve difficulties according to the resources found in their specific street environment, thereby creating their own social network that addressed the existence and location of institutions for daily food, hygienic care, entertainment, and orientation. Additionally, the adolescents informed each other about which health services were provided, which institutions would treat them, which type of professionals should be sought after regarding certain subjects, and which institutions offered free entertainment and allowed their participation. Thus, they propagated this support network among themselves, and furthermore, they told professionals about the institutions that helped them survive during adversity.

We also observed that the use of drugs was part of the routine of different groups of street adolescents, based on the rules and values established by them. In this sense, each adolescent showed a series of peculiarities not only with regard to the time of the interview, but also to his or her history (Irwin & Johnson, 1995). That is, although the adolescents reported set patterns of use and predominant lifestyles, they had a history of oscillating between patterns of use, geographic situations, and/or life circumstances. We observed that oscillation occurred more frequently among the adolescents moving from the surface context toward the immersion context. At this time of transition, the youth normally migrated from the city center to the surroundings, alternating not only the circumstance of drug use, but also his or her geographic situation, and appeared more resistant to any intervention, focusing exclusively on drug use. However, it was possible to identify some cases of the reverse process, in which youths migrated from the immersion context to the surface context in a movement of departure from drugs. At this time, generally triggered by crisis, the adolescents sought support from the institutions, the most important segment of the social network—especially those youths who were more open and ready to receive help.

These were adolescents who had already experienced, from a very early age, all forms of exclusion and stigma in various spheres: family, school, and community (Reutter et al., 2009). They had made the street their home, thereby moving deeply into the culture of the street and using drugs intensely, but then made an effort to seek their family of origin and their history in an attempt to stop or reduce drug use. It was at this moment also that they were concerned with working and being able to earn money in a more honest way, and working at the traffic lights of large avenues constituted their professional aspirations. It

should be recalled that these oscillations occurred in the street setting, not only with respect to migration between the three contexts or the two geographic situations, but with regard to the dynamic decision of returning or not returning to their homes. Thus, these groups could not be considered as being static because there was at least a dynamic continuum between returning home daily or remaining totally in the street (Raffaelli, et al., 2007).

The idea of the dynamics of the street situation also appeared to apply to the use of drugs, because the interviewed adolescents reported processes of change in patterns of use that varied according to geographic situation. This seemed to be reflected in the continued risk behaviors of these young people, undermining the possibility of a healthy development because such development occurs in a harsh environment that intensifies the risks of easy access to drugs. In addition to the existence of the many difficulties involved in street life, this availability of drugs seemed to be decisive in the choice of use. It was noted that there was a process of immersion in the street culture, whereby the deeper the involvement with drugs, the more the youth was separated from traditional culture (family and school). Within a few months, because of the need to "breathe," the submersed youth again sought his or her culture of origin, sought the family, distanced him- or herself from the street culture, and looked again to work and to earn money in a more honest way. Similar dynamics were observed by Auerswald and Eyre (2002) among homeless youths in San Francisco.

Adolescents who lived the culture of the street more intensely, that is, deeper in the culture, used a variety of drugs. Among these, the more intense use of crack and the use of solvents stood out. This pattern of use was also observed in epidemiologic surveys conducted in São Paulo from 1987 to 2003. In the last study in 2003, the interviewees reported that 12.6% and 28.7% used crack and solvents, respectively, in the month preceding the study. Of the 2,807 interviewees, 27.1% used solvents as their first drug. Despite the gravity of the question concerning street youth drug use, and the recurrent observation of adolescents living on the streets in different national studies, the Brazilian government still has not consolidated a health care policy with regard to providing health care and drug addiction treatment to this population (Noto et al., 2003).

One of the most important factors differentiating between circumstances, especially in the surface context, was the quality of the family bond and the compromise with work exercised in the street. This factor has been described in the literature as an important part of these people's social network. It is noteworthy that the family is the first social network involved in the development of adolescents. As these adolescents usually experience exclusion from the family, professionals should focus on strengthening family ties. In the surface circumstance, adolescents saw their relationship with family and with work in the street as the principal factors responsible for a lower intensity of drug use. It should be pointed out that for these adolescents, involvement early in life with some activity to help in the sustenance of the family appeared to reinforce the maintenance of family ties. Based on this point, we conclude that the role of the family is a factor associated with protection, and also is a social network of belonging for the adolescent (Noto et al., 2003).

The family can also be related to risk factors, however. For this population, the previous macro social situations of exclusion and vulnerability in the family environment highlight the difficulties of the family in handling already fragile family ties. This appears to contribute frequently to adolescents leaving home for the streets, to the early use of drugs, and to situations of domestic violence, along with the need for children and adolescents to work to help support the family. Therefore, it is worth pointing out the necessity of policies of care aimed at these families and their needs and/or opportunities (Abdelgalil, Gurgel, Theobald, & Cuevas, 2004).

In the alternative/migratory context characterized by greater proximity to drug dealing and prostitution, a number of girls reported this context as being an alternative to having to continue living the street culture (immersion context). Prostitution to buy or obtain crack, as observed in this study, has also been pointed out as a phenomenon present in other populations of women (Nappo et al., in press). For these adolescents, drug use, violence, and clandestine behavior give them status, which leads them to involvement in drug trafficking and prostitution. Moreover, it was observed that the condition of women of drug dealers conferred a differentiated status, guaranteeing care and protection by the dealer. These adolescents seemed to believe that this situation was less risky than others, such as street culture, the family environment, or even official institutions. This alternative encountered by the girls was one of the reasons there was a greater presence of boys in the street culture, as indicated by earlier studies (Le Roux & Smith, 1998; Scanlon et al., 1998). However, these findings cannot be generalized to all girls living in the street. The finding is particularly important because it provides evidence of an underdescribed group which demonstrates high levels of peculiarities, and thus should be accessed in future studies.

The ethnographic method utilized in this study allowed the broadening of the focus of quantitative studies on drug use in the streets by enhancing our understanding of the diversity and complexity of this issue. In addition, studying parts of adolescents' social networks, such as

various institutions of care, professionals who assist them, health care, and entertainment services, allowed for the analysis of the environment in which these adolescents were involved, as well as the influence of the interaction between the environment and each observed context. This was mainly feasible through the observations with the description of the three contexts, which complemented the interviews. This study allowed us to become familiar with the reality of the street situation through the adolescents who experienced it, and thereby can facilitate the implementation of specific programs of prevention and intervention for each context and geographic situation, taking into account the dynamic character of each street situation.

The findings reveal a difference in the pattern of drug use according to geographic location among these adolescents. Paradoxically, the teenagers presented a more intense pattern of drug use in the areas of greater movement. However, these areas seemed to favor drug trade and sometimes drug trafficking, because they were often in busy areas with many abandoned houses and buildings. Moreover, remote areas that were less busy seemed to favor less intense drug use, as the adolescents in these areas were worried about providing sustenance for themselves and their families. These locations also seemed to be associated with the three observed contexts. The immersion context in the street culture was found in the geographic location that had greater movement and ease of access for drug use. The surface context was present in the remote or less busy areas. Adolescents in these areas were more worried about their survival, and therefore engaged in less risky behavior. The alternative/migratory context merged these two geographic locations: adolescents in this context were first in the busier area and later went after less busy areas for their subsistence, but ultimately abandoned both because they did not feel comfortable in either of them.

Based on these findings, we suggest implementing public policies that not only evaluate the number of children and adolescents in the streets of these cities, but also where they are located, how the environment influences their development, and which resources are used as part of the social network. Our goal in this study was ultimately to strengthen the resources identified and used by the youths themselves for their survival, by creating their own social networks through actions relating to daily institutions of care for alimentation, hygiene, entertainment, and direction. In addition, the adolescents searched for health services that would offer them care, for professionals to help with certain problems, and for centers offering free entertainment, propagating this support network among themselves. They also told professionals about institutions that supported their survival during adversity.

Those who establish prevention programs must value the work and knowledge of the professionals specializing in the development of these adolescents, and furthermore must consider them when developing public policies. The Street Youth Study Group et al. (1994) demonstrated the importance of the network in sharing experiences of existing services by forming groups and specific discussion forums. Such actions will allow us to construct a specific social network for adequate intervention in this population seeking social and familiar reinsertion, reduction of crime rates when feasible, and school integration, thereby improving their conditions.

We also suggest that the various segments of the social network that cares for street adolescents should be strengthened. For professionals who work with these adolescents to be optimally effective, it is important for them to evaluate these differences in the handling of cases. This fact appears to demonstrate the ineffectiveness of isolated interventions, which do not involve the diverse teams of professionals for the integration and strengthening of inter- and intradisciplinary care. Thus, the results of this study show the need to value the work of the various segments of care for the street situation, such as the educators in the institutions, the police in the streets, the teachers, and all the professionals involved with these adolescents. It should be noted that it is not enough to prohibit drugs, but it is also necessary to understand the life history of these adolescents and the contexts that do or do not favor the process of change as important aspects to be considered in preventive work.

Although qualitative studies make it possible to obtain a more in-depth description of complex themes such as the use of drugs, a limitation of these studies is that they are carried out with a small number of participants, and the results are inherent to that specific group but cannot be generalized to the whole population. Another limitation was the impossibility of accessing the adolescents who were constantly intoxicated because of the cognitive alterations related to this state.

Final Considerations

The diversity of contexts observed in this study makes an important contribution to the understanding of the dynamics of drug use by street adolescents in a large metropolis. Added to epidemiologic studies are findings that it is only possible to observe and collect data through the use of a method that allows daily involvement with this group. It is evident that there is a need for suitable public policies that value the experience accumulated by investigators and professionals working directly with these adolescents, and for developing interventions focused on the reality of the street situation.

The existence of the three identified contexts suggests that more studies should be performed to determine which health policies would be most appropriate in each context. The members of the surface group appear most accessible to care institutions among this population. The members of the immersion group access these institutions less often and remain more inaccessible and much more compromised by the abusive use of drugs. The alternative/migratory group included a specific group of girls who left the immersion context and sought protection in drug trafficking, being characterized as women of the drug dealer, but still also seeking help from the institutions for street people. This suggests that they could be accessed regarding questions of social and health care assistance at these locations.

The findings also justify the development of social/health interventions that reach the families of these adolescents in an attempt to remove the latter from the street. However, this measure appears to be the most complex because some of the youth, especially those in the surface circumstance, are in the street with the consent of the parents to earn money to help support the home or to attempt to escape domestic violence.

Thus, it is believed that the content of this work can help guide public policies and the practice of professionals who work directly with these adolescents. The new knowledge regarding the diversity and peculiarities of each context can broaden the gamut of possible resources for studies on this population.

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