The UN established the comprehensive care route for disorders associated with the use of psychoactive substances; six harm reduction programs related to injected drug use are advanced, and a transversal process of the territorial capacity building supported by international cooperation was launched. Besides, the medical and scientific use of cannabis was regulated. About the reduction of substance use, it is essential to mention that health is recognized as a fundamental right, there is a comprehensive care policy known by human rights, which adopts public health and human rights approaches in its Actions. There are technical guidelines to guide the development of prevention, harm reduction, and evidence-based actions (Hodgkin, 2018).

The number of people who have inappropriate use of inappropriate prescription opioids is about 35.1 million, of which about 17.7 million have used opiates (heroin and opium). Improper use of pharmaceutical drugs continues to be of concern in many countries, particularly in the United States, where, along with the increased use of heroin and fentanyl, there has been an increase in opioid-related morbidity and mortality. There are also indicators of the recent growth in heroin use in parts of Western and Central Europe, suggesting an end to the declining trend in some areas of this sub region (Hodgkin, 2018) .

Nearly half of the population uses this substance with some frequency, and not less than a fifth are at risk or with problems associated with their abuse. Draws attention to alcohol consumption at an early age despite the prohibition of selling alcoholic beverages to minors. The survey in schoolchildren shows that 60% have consumed alcoholic drinks in the last year. Alcohol consumption is directly related to age and the school year, while 20% of 11 and 12-year-old students report alcohol consumption in the previous month. The figure rises to 43% among students 13 and 15 years, reaching 58.16% in the group of 16 to 18 years (Hodgkin, 2018).

In the field of prevention, the effort to improve the coverage and quality of the interventions stands out, positioning the need for the evidence base, the development of evaluations of some programs and the preparation for the process of revision and improvement of the School Program of School Prevention of the Anti-Narcotics Police. It also highlights the development of drug use prevention guidelines by the MSPS, which propose a systemic approach in the different areas and moments of life, with recommendations and criteria based on evidence (Johnson, 2018) .

About treatment, normative, technical, and management advances are evidenced with the creation of comprehensive health care routes, the care model, and the national census, which align with the new Comprehensive Health Care Model (CHCM). The number of health care related to drugs and the number of people served in the problem-solving services in 2016 exceeded 50,000 people, a figure that accounts for the advances in access to treatment that are made possible with the current legal framework (Johnson, 2018).

Regarding the role of nurses in the intervention programs, it focuses on reducing the magnitude of substance use and abuse and its adverse consequences through a consistent, systematic and sustained effort, aimed at promoting healthy conditions and lifestyles; in the prevention of consumption and the attention of people and communities affected by drug use; and to the strengthening of public health information and surveillance systems (Marcus, 2015).

The primary prevention program, developed initially at the University of Iowa, is a positive model for the development of Latin American youth and adolescents between the ages of 10 and 14. What it seeks is to avoid problematic behaviors, such as the use of psychoactive substances, teenage pregnancy, peer violence, and domestic violence (Marcus, 2015).

In secondary prevention, the role of the nurse allows the development of community articulation processes based on real data of the profile of the communities that contribute to the identification of risk and protection factors associated with five problematic behaviors: substance use, juvenile delinquency, violence family, dropout and teenage pregnancy. It is based on the creation of community coalitions, using as a conceptual basis the social development strategy and the public health approach (risk and protection factors). Faced with the component of integral and differential care for the population in vulnerable conditions, nurses in tertiary prevention of violence are the institutional and legal integrators that facilitate and oblige their ethical and professional approach and compliance with the prevention mechanisms (Marcus, 2015).

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