



Universidade Federal do Pará
Instituto de Filosofia e Ciências Humanas
Programa de Pós-Graduação em Segurança Pública – PPGSP
Resolução N°. 4.091, de 27/01/2011 – CONSEPE

Prova de Proficiência em Língua Inglesa do Processo de Seleção – Turma 2015 – dia 21/05/2015

Leia com atenção as regras da prova:

- i)* A prova de língua inglesa consta de 4 (quatro) questões de leitura, tradução e interpretação de texto, devendo ser respondidas em língua portuguesa.
- ii)* Durante a realização da prova de língua inglesa pode ser utilizado somente dicionário impresso.
- iii)* Não é permitido nenhum tipo de recurso eletrônico durante a realização da prova de língua inglesa.
- iv)* Cada uma das 4 (quatro) questões a serem respondidas na prova de língua inglesa vale 2,50 (dois vírgula cinquenta) pontos; as quatro questões somam 10 (dez) pontos.
- iv)* As questões devem ser respondidas com letras legíveis, preferencialmente, com letras de forma.

A comissão

Todas as perguntas são baseadas no texto: “Treating drug dependence: from coercion to cohesion”, publicado no United Nations office on drugs and crime - UNOD

Questão 1: O que disse Yuri Fedotov, diretor-executivo do Escritório das Nações Unidas contra Drogas e Crime (UNODC), na abertura da 56ª Sessão da Comissão de Narcóticos em março?

Questão 2: O que enfatizou Vladimir Tochilovsky, membro do Grupo de Trabalho sobre Detenção Arbitrária?

Questão 3: Quais as outras diretrizes são apresentadas sobre o tratamento da dependência das drogas no parágrafo que diz que “o tratamento para a dependência de drogas deve ser baseado em evidências, voluntário, confidencial e com o consentimento informado?”

Questão 4: Que tipo de serviços a UNODC e a Organização Mundial de Saúde, ao destacarem a disponibilidade e acessibilidade, como princípios necessários para o tratamento eficaz da dependência de drogas?



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Treating drug dependence: from coercion to cohesion

By Gilberto Gerra, Chief of UNODC's Drug Prevention and Health Branch

09 April 2013 - To think about public policies related to the problematic use of drugs is one of today's major global challenges. Effective and balanced responses should also focus on the health needs of dependents without stigma or discrimination.

Yuri Fedotov, Executive Director of the United Nations Office on Drugs and Crime (UNODC), said at the opening of the 56th Session of the Commission on Narcotic Drugs in March that "human rights and public health considerations must be at the core of international response to drug use and to HIV". Considering that one of the objectives of the drug conventions is to protect the health of individuals and of societies from the adverse effects associated to drug use, the importance of actions that promote a move from a logic of punishment to one of health care becomes evident.

Brazil recently received two important UN missions: the Special Rapporteur on Torture, Juan E Méndez; and the Working Group on Arbitrary Detention. Both of them observed how the treatment of drug users in the country is getting entangled

with punishment in the field of criminal justice. Both missions alerted to the risk that involuntary confinement of drug users would cross the "threshold of mistreatment, equivalent to torture or to cruel, inhuman or degrading treatments", said Méndez.

The Working Group on Arbitrary Detention showed concern about the involuntary confinement of crack users, especially of children and teenagers who live on the streets, and whose relatives have reported difficulty in accessing information about the place where they have been taken to. Vladimir Tochilovsky, member of the Group, emphasized: "During the visit we were presented with cases of people living on the streets who are drug addicts, and who are apprehended, detained and imprisoned by the police not for committing crimes, but over a health issue."

Treatment for drug dependence should be evidence-based, volunteer, confidential and with informed consent. It should also be developed inside communities through clinical and social interventions under the scope of the health system, with an



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approach that follows the ethical principles of health care. Actions of social support that attend to the basic needs of shelter and food are also essential, as well as the access to programs of education, income generation, microcredit and career guidance to promote the social reintegration of individuals.

Involuntary confinement of drug users in prisons or treatment centers should be an emergency measure for a few days only, based on reports from at least two health professionals, in order to protect the individual and the community in cases of acute intoxication, or when the individual presents a risk to other people's safety or his own. Several studies show that there is no evidence about the effectiveness of these measures, which actually strengthen stigma, contribute to the exclusion process, weaken social links and raise the risk of HIV infection.

UNODC and the World Health Organization highlight availability and accessibility as principles necessary for the effective treatment of drug dependence. More accessible and qualified services, with a greater capacity to receive people and fewer stigmas, can help reduce the use of legal tools to compel people who need treatment to start it.

Personal engagement and emotional involvement are essential in order to develop a combined project of humanized treatment that motivates patients, relatives and communities, opening up a way to transform spaces of involuntary treatment into community spaces of cohesion.

Fonte: <http://www.unodc.org/lpo-brazil/en/imprensa/artigos/2013/04/08-treating-drug-dependence-from-coercion-to-cohesion.html>