



藥癮戒治社會心理復健模 式之發展與評估

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藥物濫用成因

- Personality of abusers
- Stress & frustration factors
- Family factors
- Schooling factors
- Social & cultural factors



Personality factor

- Poor self-image & concept
- Poor frustration tolerance
- Impulsivity control problem & irrationality
- Traumatic reaction: depression & anxiety
- Avoidance & fear
- Addict prone personality

Stress & frustration

- Coming from daily lives
- Inconsistent parental discipline
- Poor family economy
- Traumatic childhood experiences
- Family disharmony & disorganization
- Failure in schooling

Family factors

- Dispute & conflict among family members
- Broken family structure
- Inappropriate discipline
- Alienation from families
- Poor attachment with parents

Family factors

- Poor family economy
- Lack of healthy leisure activities
- Victimization within family
- Witnessing drug abuse in family

Schooling factors

- Low or dissatisfactory academic achievement
- Negative relationships with teachers & peers
- School dropouts or loitering
- Violation to school regulation
- Allured by drug dealers & curiosity
- Limited prevention education of drug abuse

Social & cultural factors

- Negative social learning & different association, e.g., smoking & gang activities
- Negative socialization
- Unhealthy leisure activities & pleasure seeking
- Influenced by lower class culture
- Associated with deviant social behaviors, e.g., gambling, prostitution, wrong means to revitalization
- Associated with organized crimes & gang activities

Purpose of research

- Comprehensive exploration to various factors
- Programming the experimental intervention
- Evaluating the effectiveness of psychosocial intervention



Method of research

- Construction of psychosocial intervention program
- Identification of the criteria for effectiveness evaluation
- Bio-psycho-social assessment
- Administering group therapy
- Individual interviews & home visitations
- Comprehensive evaluation of treatment effectiveness

Participants of research

- 12 drug addicts receiving pending prosecution, with one female, 11 males, one amphetamine combining heroin addict, 11 heroin addicts
- Recruiting from outpatients at Veteran Hospital of Chia-Yi
- Group leaders: Psychiatrist (MD), Clinical social worker, Clinical psychologist
- Researchers & observers

Instruments of data collection

- Beck depression inventory
- Family life satisfaction inventory
- Table of dosage change of methadone consumption
- Observation records by the observers
- Recidivism follow-up checklist

Data analysis

- Comparing with the norm of BDI
- Comparing the means difference (t-test)
- Analyzing verbatim qualitatively, including data from individual interviews and family visitations
- Analyzing data from field observation
- Analyzing changes of methadone consumption

Findings of research

- Two of the subjects dropped out, ten of them stayed
- Six of the stayed subjects consumed same or lesser dosages of methadone
- Most of the stayed subjects demonstrated same or better life satisfaction
- Job hunting still being a big problem

Findings of research

- Motivational interviews are essential
- Comprehensive bio-psycho-social assessment are necessary



Findings of research

- Medical treatment, psycho-counseling, social work casement management & family intervention are necessary
- Vocational guidance, social & family ties are very critical



Motivational interviews

- May be set as the first priority, since no motivation, no change
- Individualized interviews encouraging the clients' aspiration for change
- Good resources allocating to motivated clients

Comprehensive assessment

- Bio-chemical tests, building up the baseline information for treatment
- Providing essential medical treatment for the addicts in addition to methadone alternative medication, for example, anti-depressants, anti-impulsivity prescription.
- Personality trait, social relations, family relations
- Peer relations, career exploration, job preference, job training, & job matching

Treatment action

- Case management, social work individual & group treatment, psychiatric & psychological treatment, & family treatment
- Sufficient professional staffing, concrete job description, collaboration among resource institutes, & adequate salaries & morale being critical for the success of psychosocial treatment

Conclusion

- Bio-psycho-social assessment & intervention are promising in concordance with methadone alternative treatment



- Auxiliary assistance to maintain the effectiveness & continuation of hanging on the treatment are necessary for successful psycho-social intervention.



Thank you