READINESS TO CHANGE OF MOTIVATION IN SUBSTANCE ABUSE PATIENTS

THESIS

Submitted in Partial Fulfillment for MD Degree in Psychiatry

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List of Abbreviations

ADHD:	**Attention Deficit Hyperactive Disorder**
APA:	**American Psychiatric Association**
ARV:	**Anti Retro Virus**
ASI:	**Addiction Severity Index**
ATAQ:	**Addiction Treatment Attitude Questionnaire**
BC:	**Before Christ**
BDI:	**Beck Depression Inventory**
CBT:	**Cognitive Behavioral Therapy**
DAST:	**Drug Abuse Screening Test**
DATOS:	**Drug Abuse Treatment Outcome Study**
DAWN:	**Drug Abuse Warning Network**
DSM-IV-TR:	**Diagnostic and statistical manual of mental disorders 4th edition, text revised**
ECA:	**Epidemiological Catchment Area**
ED:	**Emergency Department**
FDA:	**Food and Drug Administration**
HBV:	**Hepatitis B Virus**
HCV:	**Hepatitis C Virus**
HIV:	**Human Immunodeficiency Virus**
HLM:	**Hierarchal Linear Model**
HMO:	**Health Maintenance Organization**
ICD-10:	**The tenth Revision of the International Classification of diseases and Related Health Problems**
IDUs:	**Injecting Drug Users**
JHAS:	**Johns Hopkins AIDS Service**
LOS:	**Length Of Stay**

LSD:	**Lysergic acid diethylamide**
LTR:	**Long Term Residential**
MET:	**Motivational Enhancement Therapy**
NADR:	**National AIDS Demonstration Research**
NIDA:	**National Institute of Drug Abuse**
NIDU:	**Non Injection Drug Use**
OAG:	**Older Adult Group**
ODF:	**Outpatient Drug Free**
OMT:	**Outpatient Methadone Treatment**
ONDCP:	**Office of National Drug Control Policy**
OTC:	**Over The Counter**
PDA:	**Personal Digital Assistance**
PE:	**Physical Education**
POA:	**Personal Digital Assistance**
PTSD:	**Post Traumatic Stress Disorder**
SAMHSA:	**Substance Abuse and Mental Health Services Administration**
SEDU:	**Self Evaluation of Drug Use**
SOCRATES:	**The Stages of Change Readiness and Treatment Eagerness Scale**
STD:	**Sexually Transmitted Diseases**
STIs:	**Sexually Transmitted Infections**
SWLS:	**Satisfaction With Life Scale**
TSF:	**The12 Step Facilitation**
UNDCP:	**United Nation Office of Drug Control and Crime Prevention**
URICA:	**University of Rhode Island Change Assessment Scale**
WAIS:	**Wechsler Adult Intelligence Scale**
WHO:	**World Health Organization**
YAG:	**Young Adult Group**

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INTRODUCTION

Awareness of substance abuse problems and readiness to receive treatment are salient patient characteristics that have an impact on treatment-seeking behaviour and treatment adherence ***(Wanberg et al., 1977 and De Leon, 1986).***

Hospitalized substance-abuse psychiatric patients are at increased risk of denial of their substance abuse problem ***(Docherty, 1985).***

Change is a process that unfolds over time through a series of stages: **precontemplation**, in which the individual does not intend to take action in the forseeable future such individual are characterized as resistant or unmotivated. **Contemplation** is a stage in which the individual intends to tale action within the ensuing six months. **Preparation** is a stage in which the individual intends to take action in the immediate future (usually measured as the ensuing month). **Action** is a stage in which the individual has made specific overt modification in his or her life style with in the preceding six months. **Maintenance** is a stage in which the individual is working to prevent relapse. **Termination** is the stage in which the individual an individual has zero temptation and 100% self efficacy ***(Prochaska, 2003).***

Identification of key factors that may affect treatment compliance among this high risk clinical population, such as sociodemographic data of sex, age, marital status, other factors like employment status, family history of substance abuse, number of years of abuse, medical comorbidity, accessibility to health care and treatment program.

All these factors would affect the efficacy of clinical intervention and optimize treatment matching efforts ***(Salloum, 1998).*** As it is important to match particular processes of change with specific stages of change. So for example, patients in the precontemplation stage of change benefit most from the processes of consciousness raising, dramatic relieve, and environmental reevaluation. However, patients in the contemplation stage benefit from the previous three in addition to self-reevaluation. Patients in the preparation stage benefit most from the self-liberation process and patients both in action and maintenance benefit most from contingency management, helping relationships, counter-conditioning and stimulus control ***(Prochaska, 2003)***.

The dropout rates are major problem in all treatment of substance abuse. First of all, this wastes resources. Second, since time spent in treatment is a powerful predictor of positive outcome, it is relevant either to be able to select clients more strictly or to modify programs so they can help a wider variety of clients ***(Simpson, 1979; De Leon and Ziegenfuss, 1986).***

HYPOTHESIS

We hypothesize that the positive change in the behaviour of addicted patients is related to the time spent in treatment either as an inpatient or as a regular follow up outpatient. Notably readiness; motivation; circumstances & complications are among the most important factors determining the behavioral change.

THIS WORK AIMS TO:

1- Prove that the longer the time spent in treatment the more the patients is ready and motivated to change his addicted behaviour

2- Delineate the factors that affects patients motivation to change, among identified factors notably readiness, circumstances and complications

DRUG AND ALCOHOL ADDICTION

I) Introduction

Drug and alcohol abuse is an enormous societal problem due to individual suffering as well as associated disruption of families and communities through criminality and violence and health care costs. During the 1990s, at least 134 countries and territories were faced with a drug misuse problem, with three quarters of all countries reporting the use of heroin and two thirds misuse of cocaine ***(WHO, 1998).***

II) Historical background:

The concept of addiction could be traced back to the 5th century BC when Hippocrates set down explanations of diseases he had observed ***(Miller, 1995).*** Problems of drug abuse were recognized even in ancient times, drunkenness was mentioned in the Bible and in the writings of ancient Greeks and Romans ***(Loza, 1990).***

1) Alcohol:

It is considered from the first psychoactive substance that had been abused by the human being. China is considered a leading society to know and make even before birth, the ancient Chinese know how to ferment different kinds of food to make the wine known to them as “Jiu”. The yellow wine made of fermentation of rice, the white wine made of fermentation of potato while the grape wine they knew from the Romanian emperor 200 BC. Beside the above mentioned types which used for recreation another types for