

An Exploratory Study on Association between Family Relationship and Relapse among Methamphetamine Users in Compulsory Treatment System of Khon Kaen and Yasothorn Provinces

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Background: It was estimated that 3.5 million Thais have ever used “Yaba (methamphetamine)” at least once in their entire life. The Northeastern region had the highest number of Yaba users with a high relapse rate after treatment.

Objective: The authors aimed to explore the association between relapse, among methamphetamine users in the Compulsory Treatment System of Khon Kaen and Yasothorn Provinces, and family relationship as well as other contextual factors.

Material and Method: An exploratory study was conducted from all cases of post-treatment methamphetamine users in the databases of Khon Kaen Drug Dependence Treatment Center and Yasothorn Provincial Probation Office during October 2007 and February 2008. Interviews and observations were done for data collection. Double data entry was applied. Pearson Chi-square, Fisher’s exact test and odds ratio were used to assess the associations.

Results: Sixty-five users were found (13 relapses and 52 abstainers). Family relationship revealed no significant association with relapse of the methamphetamine users. Other contextual factors, however, did. They were social acceptance [acceptance by community leader ($p = 0.006$), acceptance for working or studying ($p = 0.049$)], risky community situations [using Yaba of close friend, existence of Yaba users and Yaba trading in community ($p = 0.014$, $p < 0.001$ and $p = 0.038$ respectively)] and risky personal behaviors [ever selling or being a Yaba agent and drinking of alcohol to reduce Yaba desire ($p = 0.012$ and $p = 0.013$)].

Conclusion: Effect of family relationship on relapse among post-treatment methamphetamine users could not be demonstrated in the present study. But several contextual factors had significant relationship with the relapse.

Keywords : Methamphetamine, Relapse, Family relationship, Contextual factor

J Med Assoc Thai 2010; 93 (Suppl. 3): S1-5

Full text. e-Journal: <http://www.mat.or.th/journal>

Methamphetamine has been recognized in Thailand under the name of “Yama” for more than 50 years. The meaning of its name was expected from the logo on the tablet and effect of the drug. It causes users to be active, strong and able to work against time. It is also known as “Yakayun”. Ministry of Public Health (MOPH) changed unofficial name of “Yama” to the official name of “Yaba”⁽¹⁾. It is clear that “Yaba” has spread among the Thai population regardless of gender, age, occupation and regional setting⁽²⁾. In 2001, the Administrative Committee on Substance Abuse

Academic Network (ACSAN) composed of academics from five Thai universities performed a household survey throughout the country. The household survey was supported by the Office of the Narcotics Control Board (ONCB), the Narcotics Affairs Section (NAS), and the Embassy of the United States in Bangkok. The survey estimated that 3.5 million Thais have ever used Yaba at least once in their entire life, accounting for 7.8% of the Thai population aged 12-65 years old. It was shown that the Northeastern region had the highest number of Yaba users and the relapse rate after treatment was high. The evidence corresponds with the academic hypothesis, which was that the Yaba effect matched very well with the having-fun lifestyle, the essential way of life of lay people in the northeast⁽³⁾.

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Reviews indicated that there was limited research about family role on the understanding of relapse phenomenon, despite the notion that the family plays an important role in the addict's recovery, or that "the family can consciously or unconsciously sabotage the addict's recovery process"⁽⁴⁾.

Due to the high rates of post-treatment drug-abuse relapse, increasing attention has been given in recent years to developing relapse prevention programs as well as to studying the various factors impinging upon relapse⁽⁵⁻¹⁰⁾. The authors aimed to explore the association between relapse, among methamphetamine users in the Compulsory Treatment System of Khon Kaen and Yasothorn Provinces, and family relationship as well as other contextual factors.

Material and Method

An exploratory study was conducted from all cases of post-treatment methamphetamine users in the databases of Khon Kaen Drug Dependence Treatment Center and Yasothorn Provincial Probation Office during October 2007 and February 2008. Interviews and observations were done for data collection. Double data entry was applied. Pearson Chi-square, Fisher's exact test and odds ratio were used to assess the associations and p-value less than 0.05 was considered a statistically-significant result.

Interview

The interview questionnaires were applied by the researcher and research assistants. The assistants had a bachelor degree or above. All of them were trained in the interviewing techniques and passed the performance test before going to the field. The research protocol was approved by the Ethical Committee for Human Research of Khon Kaen University, Khon Kaen, Thailand.

Results

Sixty-five post-treatment methamphetamine users were found from the database (13 relapses and 52 abstainers). From Table 1, ten components of family relationship revealed no statistical significance with relapse of methamphetamine users (p-value ranged from 0.210 to 1.000).

Table 2 shows bivariate analysis between social supports or acceptance and methamphetamine relapse. The users who were accepted by community leader had a lower rate of relapse comparing to ones who were not accepted (6% vs. 33%, p = 0.006). The users who were accepted for working or studying did the

Table 1. Family relationship and methamphetamine relapse (n = 65)

Family relationship	OR	95% CI	p-value
1) I think nobody can help me	2.33	0.17 32.58	1.000
2) Family never care or worry about my feelings	2.33	0.16 32.58	1.000
3) I feel like I must confront the world alone	3.20	0.22 45.19	0.550
4) I don't want to associate with others	1.71	0.12 23.93	0.600
5) I reject help from family or friends	1.25	0.08 17.65	1.000
6) Although I can stop using Yaba that does not make my family love and care for me	1.71	0.12 23.93	1.000
7) Members in my family usually ask me "You have relapsed to Yaba, haven't you?"	3.60	0.25 50.33	0.210
8) My family does not talk informally with me	1.50	0.10 20.67	0.530
9) Sometimes my family scolds me unreasonably	1.50	0.10 20.67	1.000
10) I feel worried when my family usually mutter about me	2.66	0.19 36.75	0.570

Table 2. Social supports or acceptance and methamphetamine relapse (n = 65)

Social support/ acceptance	Relapse n (%)	Non-relapse n (%)	p-value
Care from relatives			0.089*
- No	7 (35%)	13 (65%)	
- Yes	6 (13%)	39 (87%)	
Acceptance by community leader			0.006**
- No	11 (33%)	22(67%)	
- Yes	2 (6%)	30(94%)	
Acceptance for working or studying			0.049*
- No	8 (35%)	15(65%)	
- Yes	5 (12%)	37(88%)	

* Fisher's exact test , ** Pearson chi-square

same (12% vs. 35%, p = 0.049). The care from relatives had a marginally significant relationship with the relapse (p = 0.089).

Table 3 shows risky community situations that

may affect the relapse. All three components of the situation had significant association with the relapse. They are using Yaba of close friend, existence of Yaba users in community and existence of Yaba trading in community ($p = 0.014$, $p < 0.001$ and $p = 0.038$ respectively).

Table 4 shows risky personal behavior and methamphetamine relapse. Both components of the behavior had significant association with the relapse. They were ever selling or being a Yaba agent and drinking of alcohol to reduce Yaba desire ($p = 0.012$ and $p = 0.013$).

Discussion

Effect of family relationship on relapse among post-treatment methamphetamine users could not be demonstrated in the present study. This might be due to a small sample size especially for relapses, which were only thirteen cases.

Family is important mentally to the cured user, and if the family comment a lot about health, appearance, demeanor, criticize the drug addict, show distrust about giving up drugs, question and blame, the cured users will feel useless and respond by relapsing⁽¹¹⁾ which agrees with the research of Poophaiboon R⁽¹²⁾ who found that a problem which makes drug addicts relapse is that members of the family do not accept, are distrustful and frustrated when they come back home. Methamphetamine relapse is a problem which reflects a failure of family practice, because the family loses communication and a good relationship between members of the family⁽¹³⁾. Families must communicate openly; parents must look after and listen to problems of their children and observe their behaviors⁽¹⁴⁾. If they see improper behavior, parents should not mutter or blame but should explain the reason, because muttering or blaming will damage communication with the child and also make more isolation. From studies in the past it has been found that in a drug addict's family, parents do not praise or cheer up but have an attitude of carping or blaming.

In the present study, mental attitude is an important complement to relapse since users are often in a bad temper, have dispute, brawl with others, have pressure from society, are careless, want to probe themselves "can I control my mind?" and have drug need symptoms⁽⁸⁾. Another study found that if family does not heed Yaba information, it will make the family unaware of the wicked ways in which Yaba affects family and cannot prevent relapse to Yaba use⁽¹⁵⁾. One study showed that user's families having parents who

Table 3. Risky community situation and methamphetamine relapse (n = 65)

Risky community situation	Relapse n (%)	Non-relapsed n (%)	p-value
Using Yaba of close friend			0.014*
- No	6 (13%)	41 (87%)	
- Yes	7 (44%)	9 (56%)	
Existence of Yaba users in community			< 0.001**
- No	2 (5%)	35 (95%)	
- Yes	11 (42%)	15 (58%)	
Existence of Yaba trading in community			0.038*
- No	6 (13%)	39 (87%)	
- Yes	7 (39%)	11 (61%)	

* Fisher's exact test, ** Pearson Chi-square

Table 4. Risky personal behavior and methamphetamine relapse (n = 65)

Risky personal behavior	Relapse n (%)	Non-relapsed n (%)	p-value
Ever selling or being a Yaba agent			0.012**
- No	3 (9%)	31 (91%)	
- Yes	10 (35%)	19 (65%)	
Drinking of alcohol to reduce Yaba desire			0.013*
- No	3 (9%)	32 (91%)	
- Yes	10 (33%)	20 (67%)	

* Fisher's exact test, ** Pearson Chi-square

do not live together, divorced parents, and families which have only a father or a mother are characteristics of risk families for mental health problems and narcotic use problems⁽¹⁶⁾. Most cured users live with their parents which agrees with a study in the past⁽¹⁷⁾. The other cause of relapse is from the family problems (64%). The users whom which the family lost of warmth and understanding, became angry and felt frustrated while staying at home, which made the cured users going out to meet friends. When they have a close friend who uses Yaba, they will act similarly and may increase chance of using Yaba or other narcotics⁽¹⁸⁾. According to Yang C and co-worker⁽¹⁹⁾, narcotic addicts who relapse will return to associate with their old group of friends who will encourage them to use them again. So friends are important for relapse. Kaewdumkerng K⁽²⁰⁾ found that the factor of being able to trade narcotics easily can influence peoples' behavior. If people live in an environment where it is easy to use narcotics or

there are narcotics in the community, or there is a member of the family or friends who uses drugs, they will have a high opportunity to use narcotics.

Conclusion

Effect of family relationship on relapse among post-treatment methamphetamine users could not be demonstrated in the present study. But several contextual factors had significant relationship with the relapse. They were social acceptance, risky community situations and risky personal behaviors. Further study with a larger sample size is needed

Acknowledgement

The authors are grateful to the Illicit Drugs Substance Abuse Academic & Information Development Network for financial support. The authors thank Mr. Ian Thomas and Dr. Sompong Srisaenpang for assistance with the English-language presentation of the manuscript.

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**การศึกษาความสัมพันธ์ระหว่างปฏิสัมพันธ์ในครอบครัวกับการกลับมาเสพติดของผู้เสพ
เมทแอมเฟตามีนในระบบบังคับบำบัดของจังหวัดขอนแก่นและยโสธร**

ปริศนา รทสีดา, อมรรัตน์ รัตน์ศิริ, มานพ คณะโต, สมเดช พิณจสุนทร, อิศระ เจียวิริยบุญญา

ภูมิหลัง: ประชาชนไทยประมาณ 3.5 ล้านคนเคยเสพยาบ้า (เมทแอมเฟตามีน) อย่างน้อยหนึ่งครั้งในช่วงชีวิต ภาคตะวันออกเฉียงเหนือมีจำนวนผู้เสพยาบ้ามากที่สุด โดยมีอัตราการกลับมาเสพติดภายหลังการบำบัดสูง

วัตถุประสงค์: เพื่อศึกษาความสัมพันธ์ระหว่างการกลับมาเสพติดของผู้เสพเมทแอมเฟตามีน ในกลุ่มผู้เข้ารับการรักษาแบบบังคับบำบัดในจังหวัดขอนแก่นและยโสธร กับปฏิสัมพันธ์ในครอบครัวและปัจจัยบริบทอื่นๆ

วัสดุและวิธีการ: เป็นการศึกษาแบบ Exploratory study จากผู้เสพเมทแอมเฟตามีนทุกรายที่ผ่านการบำบัดแล้ว ซึ่งมีรายชื่ออยู่ในฐานข้อมูลของศูนย์บำบัดยาเสพติดขอนแก่นและสำนักงานคุมประพฤติจังหวัดยโสธร ระหว่างเดือนตุลาคม พ.ศ. 2550 ถึงเดือนกุมภาพันธ์ พ.ศ. 2551 เก็บข้อมูลโดยการสัมภาษณ์และการสังเกตนำเข้าสู่ข้อมูลสองครั้งแบบเป็นอิสระต่อกัน วิเคราะห์ความสัมพันธ์ด้วย Pearson chi-square, Fisher's exact test และ odds ratio

ผลการศึกษา: พบผู้เสพเมทแอมเฟตามีนที่ผ่านการบำบัดแล้วทั้งหมด 65 ราย (เป็นผู้กลับมาเสพติด 13 ราย และไม่เสพติด 52 ราย) ปฏิสัมพันธ์ในครอบครัวไม่มีความสัมพันธ์อย่างมีนัยสำคัญทางสถิติกับการกลับมาเสพติด อย่างไรก็ตามพบความสัมพันธ์ดังกล่าวในปัจจัยบริบทอื่น ๆ ได้แก่การยอมรับจากสังคม [การยอมรับจากผู้นำชุมชน ($p = 0.006$), การยอมรับให้เขาทำงานหรือเรียนหนังสือ ($p = 0.049$)], สถานการณ์เสี่ยงในชุมชน [การเข้ายาของเพื่อนสนิท, การมีผู้เสพยาบ้า และมีการซื้อขายยาบ้าอยู่ในชุมชน ($p = 0.014$, $p < 0.001$ และ $p = 0.038$ ตามลำดับ)] และพฤติกรรมเสี่ยงส่วนตัวของผู้เสพ [เคยขายหรือเป็นตัวแทนขายยาบ้า และการดื่มสุราเพื่อลดความอยากเสพยาบ้า ($p = 0.012$ and $p = 0.013$)].

สรุป: ไม่พบความสัมพันธ์อย่างมีนัยสำคัญทางสถิติระหว่างปฏิสัมพันธ์ในครอบครัว กับกลับมาเสพติดซ้ำภายหลังการบำบัดแต่มีปัจจัยบริบทหลายประการที่มีความสัมพันธ์อย่างมีนัยสำคัญทางสถิติ กับกลับมาเสพติดดังกล่าว
