

This among the type
of session and type



**ASSIGN
BUSTER**

This study focuses on how the Self-Reported drug use scores of 142 prolific drug offenders and other priority offender status who tested positive for heroin or cocaine during their arrest, is dependent on the type of session and type of therapy provided to them. Participants were randomly allocated into the different levels of type of session that included group and individual, and type of therapy that included CBT and MI, 12-Step Programme and Standard Care or Treatment as Usual. The participants were asked to fill in log books to record the scores and were required to attend their sessions for a period of 12 months. A two-tailed hypothesis was conducted. The null hypothesis stated that, there will not be a significant difference in Self-Reported drug use scores among the 3 different drug treatment groups. The experimental hypothesis stated that there will be a difference in the self-reported drug use scores between the three types of treatments (CBT with MI, 12 Step Programme and Standard Care). The study also examined whether there is a significant interaction effect among the type of session and type of therapy. After computing the results the null hypothesis was rejected and a significant interaction effect was found between the type of therapy and type of session.

The two drugs that are generally identified with these crime-spree situations are cocaine or crack and opium that consist of heroin or morphine (LeBoutillier & Love, 2010). 29% of drug users use cocaine, which is the third most widely used illegal drug in the United Kingdom (Mann, 2014). Among hard drugs the general perception of Britons is that they consider heroin to be the most harmful to health followed by crack, crystal meth and cocaine. Amid heroin users, crime related activity levels are high with an estimate of

the social cost of drug-related crime being between £65, 000-100, 000 per user entailing a cumulative cost amidst all heroin users in the England and Wales to be in the range of £3.

5 to 10. 5 billion (Bryan, Bono, & Pudney, 2013). Research reveals that about three-quarters of acquisitive crime among heroin users is attributable to drug use, but essentially no violent crime (Bryan, Bono, & Pudney, 2013). It was reported that the amount of property crime was high in heroin users but there was no compelling indication of any violent crimes being committed by these users. (Bryan, Bono, & Pudney, 2013). However, this study does not take into account the level of acquisitive crime that would have been committed by these drug users or suppliers if they had not been on drugs and hence that is an unknown.

Most Britons aged 16-24 believe that high levels of street crime are directly or indirectly related to the use of drugs, linking 50% of all street crimes to drugs, and that decriminalisation of these would result in lesser crime rates (Mann, 2014). However, reports suggest that a huge mass (95%) of the drug users denied committing a crime to get these drugs. In the year 2009, self-reported drug use displayed that cannabis was the most frequently used drug (8. 9%), after which there was cocaine (2. 4%), ecstasy (1.

6%), amphetamine (1. 3%), amyl nitrate (1. 2%), and hallucinogens (1. 1%) (LeBoutillier & Love, 2010). Cognitive Behavioural Therapy or CBT is a form of therapy that targets an individual's attitude and thought process to develop a pattern which helps to cope with the distress. The change in cognition helps to reduce symptoms and is generally a short-term solution but improved

cognitive functioning is a long-term aspect to this method of therapy (Gaudiano, 2008). Motivational Interviewing or MI is the form of therapy where the client is motivated by the counsellor who supports them and helps them reflect up on their behaviour. CBT and MI share some common aspects like empathy and collaboration between the client and counsellor.

MI can be applied together with CBT, which is theory based, to make it more effective (Carter, 2011). The 12 Step Programme is a type of therapy where the individuals at first recognize that there is a problem and try to address the issue by taking part in 12 steps or activities and following general guidelines during the recovery process (Donovan, Ingalsbe, Benbow, & Daley, 2013). Findings report that individuals who attend the meetings routinely have higher rates of continence as compared to those who do not attend the meetings often. The RAPt (Rehabilitation of Addicted Prisoners Trust) offers a paradigm of abstinence based treatment which has been established from the 12 Step programme in nine prisons in the United Kingdom. Graduates from the RAPt have shown significant and constant minimization of drug use and offences and their rate of reconviction was also lower than the predicted rate (McSweeney, Turnbull, & Hough, 2008). In a study conducted by Maude-Griffin et al.

, (1998) to check whether CBT was more effective than the 12 Step facilitation for reducing the amount of cocaine abuse in adults, participants were randomly allocated to CBT or the 12 Step facilitation. They received one individual counselling session and three group therapy sessions for a total of 12 weeks. Abstinence was established as sobriety from the use of cocaine for 30 days and a drug free urine sample.

<https://assignbuster.com/this-among-the-type-of-session-and-type/>

The participants of this study on an average, took part in 5 out of 12 individual therapy sessions and 14 out of 36 group sessions, which shows that client effort is required even in accord to the most effective treatment method (Palinkas, 1999). The results showed that there were more participants who attained four weeks of abstinence from the CBT type of treatment as compared to those who took part in the 12 Step facilitation. It was also found that at each point of the assessment, participants who took CBT were more abstinent as opposed to those who underwent the 12 Step facilitation (Maude-Griffin et al., 1998). Another study conducted by Crits-Christoph et al., 1999, included patients who were cocaine dependent.

The participants were randomly designated into four categories: individual drug counselling plus group drug counselling, group drug counselling plus cognitive therapy, group drug counselling plus support-expressive therapy or just group drug counselling. Reports were taken during treatment every month and at 9 and 12 months after baseline. The results reported that the most effective treatment on the Addiction Severity Index-Drug Use Composite score was individual drug counselling plus group drug counselling (Crits-Christoph, Siqueland, , 1999). This shows that the combination of individual and group setting administered effective reduction in cocaine users.

These reports suggest that there is a gap in research conducted regarding group vs individual therapy sessions among cocaine and heroin users. Thus, the present study aims to compare the outcome of Self-Reported drug usage scores among participants taking cocaine and heroin in the group as well as individual type of session. It also looks at the types of treatments like Cognitive Behavioural Therapy (CBT) with Motivational Interviewing (MI), 12

Step Programme and Standard Care or Treatment as Usual and aims to establish which is more effective among these drug users. It is also examined whether there is a significant interaction effect among the type of session and type of therapy.

The null hypothesis states that there will not be a significant difference in self-reported drug use scores among the 3 different drug treatment groups. The experimental hypothesis states that there will be a difference in self-reported drug use scores between the three types of treatments (CBT with MI, 12 Step Programme and Standard Care).