Male Thai Adolescents' Transition from Drug Dependence to Being Drug Free

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Abstract: The purpose of this study, using Heideggerian phenomenology, was to understand the challenges male Thai adolescents face as they transition from drug dependence to being drug free. The sample consisted of 12, purposively selected, male Thai adolescents who: were undergoing treatment or involved in a required one-year, post-treatment, follow-up for drug abuse; were 16 to 19 years of age; had no withdrawal, toxic or psychotic symptoms; and, agreed to participate. Each participant was interviewed between two to four times, so as to gain insight regarding: a) their drug abuse experiences; b) what they had learned from their experiences; and, c) how they coped with their drug abuse. Demographic data were analyzed using descriptive statistics, while qualitative data were analyzed via the hermeneutic circle and thematic analysis.

Three categories and seven themes emerged from the data. The first category, 'Being a drug abuser,' consisted of three themes: 'It is not what I thought it would be; 'It is an undesirable existence;' and, 'I lost my place in the world.' The second category, 'Learning from looking back,' consisted of two themes: 'Love and home bring me back' and 'I struggle to stay clean.' The third category, 'Constructing a new world,' consisted of two themes: 'Look, I am a new person' and 'This is the life I want.' The findings may serve as a guide for nurses and other healthcare providers as they assist male Thai adolescents, who abuse drugs, in moving from drug dependence to being drug free.

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Introduction

Thai children and adolescents have been recognized as one of the most vulnerable populations for drug abuse, with approximately 14% of them being 7 to 17 years of age. Similar to Australian and German studies on youths' early involvement in substance abuse, 2,3 41% of male students and 19%

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of female students, in northern Thailand, have been found to abuse methamphetamines.⁴ Not only is substance abuse illegal, throughout Thailand, it interferes with one's socialization and cognitive development,^{5,6} and contributes to psychological disorders ^{7,8} and spiritual distress.^{9,10,11}

As an alternative to incarceration for drug offenses, the Thai government, in 2002, passed the Narcotics Addict Rehabilitation Act which provides funding and resources for treatment of individuals with drug problems. Young Thais who abuse drugs now may either volunteer, be legally directed, or be court ordered to receive treatment for their drug abuse.

Drug abuse treatment programs, in Thailand, are based on the assumption personal growth prepares young people to remain drug free.¹ Therefore, emphasis is placed on helping youth who abuse drugs re-learn life skills, especially how to take responsibility, gain self-control, and increase self-awareness. Those who have completed treatment at a Royal Army treatment program, for amphetamine abuse, have been found to have more self-efficacy, be motivated to make changes in their life, and have a desire to abstain from amphetamine usage. 13 However, young people often return to the same environment in which they were exposed prior to receiving treatment and, as a result, experience a relapse.¹⁴ Unfortunately, limited research has been conducted regarding what adolescents gain as they transition from drug dependence to being drug free.

Review of the Literature

Issues surrounding substance abuse among adolescents have been examined from multiple perspectives and with various approaches. The biomedical model has been used to investigate neuro-biological and genetic effects of substance abuse, and the effectiveness of pharmacotherapy in substance abuse treatment.^{15,16} The psychological

forces that lead adolescents to drug abuse has been studied, via psychoanalytic theory, with respect to their drives, conflicts and defense mechanisms.^{17,18} The benefit of cognitive-behavioural interventions have been investigated with respect to their use in substance abuse treatment programs that educate, encourage and empower individuals to have productive thoughts, emotions and behaviors.¹⁹ In addition, sociological ramifications have been studied in regards to how age, gender, ethnicity, environment, risk factors and protective factors influence and encourage substance abuse.^{20, 21}

Studies also have focused on the subjective or private views adolescents have of the world in relation to drug abuse, such as: feeling stressed and helpless when dealing with the legal system; seeing 'no way out' when arrested for substance abuse; 10 and, being more likely to abuse drugs to cope with their feelings of sadness, isolation and abandonment when their parents are drug dependent.¹¹ In addition, a study of the experiences of incarcerated American male juveniles, who had abused drugs, revealed they: felt unable to make decisions needed to become drug free; anticipated problems when they returned home; and, hoped to resolve their reputations and obligations. A study of the context of drug use by Brazilian street adolescents revealed, as a result of living on the streets, their diverse patterns of drug usage.²² Although these studies have enhanced understanding of adolescent drug abuse, little is known about the phenomenon in terms of adolescents' self-world relationships or their meaning, concerns, commitments and coping practices as they become drug free.

Thus, this study was designed to examine, via a Heideggerian phenomenological perspective, the self-world relations of Thai adolescents who abused drugs. Based on an interpretive paradigm, this research sought to shed light on the practical understandings of Thai adolescents engaged in

treatment for drug abuse regarding: their drug abuse experiences; what they had learned from their experiences; and, how they coped with their drug abuse.

Method

Design: Heideggerian phenomenology provided the philosophy to understand the world of Thai adolescents and the methodology to describe their values, concerns, meanings, commitments and practices.²³ A Heideggerian phenomenological perspective was selected because it views the lives of adolescents in relationship to their 'being-inthe-world.' While they are situating themselves in the world, adolescents learn to make sense of the world through their sense of sight, hearing, smell, taste and touch. It is during this time adolescents begin to interpret their environment in order to determine what is meaningful to them, as well as what they are concerned about, committed to and value. By doing so, they demonstrate their existence in everyday practices and coping behaviors. However, since adolescents are intertwined with their world, they cannot approach it without building, connecting or sharing with others. The responses of others, as well as the consequences of their own actions, provide new contexts for them to interpret. New contexts often alter their perceptions or pre-understandings and lead them to new understandings of their actions. This hermeneutic process (pre-understandinginterpretation-new understanding) is considered a circle of learning known as 'the hermeneutic circle of understanding. 24, 25

The hermeneutic circle of understanding was employed throughout the research process from review of the literature, through in-depth interviews of each participant, to analysis and interpretation of the data. Interpretation of the data was facilitated by use of reflective questions as the adolescents unfolded their understandings of being drug dependent to becoming drug free.

Ethical considerations: Approval to conduct this study was granted by the primary investigator's (PI) academic institution and the Director of the public health hospital selected as the data collection site. The public health hospital, located in the eastern region of Thailand, was selected as the study site because the PI: knew a highly skilled and knowledgeable nurse who worked in the substance abuse treatment program, from which potential participants could be recruited; and, was familiar with the hospital.

The PI verbally informed the potential participants, as well as provided them written information, regarding: the purpose of the study; what their involvement would entail, including the use of audio-taping; the objectives of the interviews; the fact they could withdraw anytime without repercussions; and, the fact their identity and data would be confidentially maintained. Those under 18 years of age were directed to share, with their parents, the written information they were given about the study, including a consent form they needed to sign. All adolescents who consented to participate and were 18 years of age and over were required to sign a consent form. Those under 18 years of age were required to have a consent form signed by their parents, as well as sign an assent form themselves.

Participants: Seventeen adolescents, who met the study's criteria for inclusion and consented to participate, were obtained by purposive sampling. The inclusion criteria consisted of being a Thai male adolescent who: was 16 to19 years of age at the time of data collection; was undergoing, either voluntary or compulsory drug abuse treatment, or was involved in a required one-year, post-treatment, follow-up; had no withdrawal symptoms (restlessness, fatigue, depression, craving, insomnia, irritability, disorientation or nightmares); had no toxic symptoms (convulsions, fever, palpitations or hypertension); had no psychotic symptoms (hallucinations or paranoia); and, agreed to participate. Only 12 of the

17 original participants completed the study. Two of them moved to another province and three no longer desired to be the study. Although three of them had completed the voluntary treatment program and two had completed the compulsory treatment program, they all dropped-out of the study during their one-year, post-treatment, follow-up.

The 12 participants who completed the study were: 16 to 19 years of age (mean age = 17 years); and either employed (n = 9; 75%) or in high school (n = 3; 25%) at the time of their admission to a substance abuse treatment program or while in a required one-year, post-treatment, follow-up. Six (50%) participants had completed the voluntary drug abuse treatment program and were in a one-year, post-treatment, follow up phase, and one (8%) was still in the voluntary drug abuse treatment program. Five participants (42%) were in the compulsory drug abuse treatment program.

Those in the voluntary program volunteered for treatment, while those in the compulsory program had been ordered, by the court, to enter treatment after having been arrested. The voluntary treatment program consisted of either a stay of up to 15 days at a military camp or local temple, or four months in an Outpatient Matrix Program. Regardless of which program they attended, everyone was required to undergo a one-year, post-treatment, follow-up with personnel from the Ministry of Health. The compulsory treatment program consisted of four months in the Outpatient Matrix Program, with a one-year, post-treatment, follow-up with officers of the Ministry of Justice, Department of Probation. All participants were in or had completed the Outpatient Matrix Program at the public health hospital used for data collection.

Procedure: Upon giving consent/assent, each participant was interviewed in a private and relaxed area of the substance abuse counselling clinic in the public health hospital. Each interview was audio-

taped. One participant was interviewed four times, five were interviewed three times and six were interviewed twice. The number of interviews conducted, per participant, was based upon how quickly the data were saturated. Depending on the rapport developed and knowledge gained by the PI, each interview was 45 to 90 minutes (average = 60 minutes) in length. When multiple interviews were required, the interviews were done two to four weeks apart.

During each interview, the PI asked reflective and probing questions, to gain information about each adolescent's practical understanding of: his drug abuse experiences; what he learned from his experiences; and, how he coped with his drug abuse. Examples of the reflective questions were: "Please tell me about your everyday practices"; "What do these practices mean to you?"; and, "What lead you to this point?" Through use of participatory rapport and reflective questions the PI brought the adolescents to the hermeneutic circle, so as to ensure an interactive process. During the interactive process, the adolescents described their experiences in chronological order. They were encouraged to reflect on their life experiences so they could begin to develop a 'new understanding' about their individual situation. By so doing, the adolescents could reflect upon how their experiences had shaped their lives. The PI then asked probing questions, to gain insight into how their experiences were connected and the meaning their experiences had for them. Examples of the probing questions were: "What did you do after that situation?" and "What do the things you did mean to you?" These questions provided a way of determining the various approaches the adolescents used in particular drug-related situations and the meaning of the approaches they used. The adolescents then were asked more probing questions to determine if they had gained any practical understanding during their experiences and what

they did to cope with situations, such as withdrawal symptoms. These questions included: "How did what you did change the situation?"; "What did you learn about yourself from this practice?"; "What has been the most difficult experience related to your substance abuse?"; "Why was it a difficult experience?"; "What did you do?"; and, "How did your actions change the situation?" Through this process, the PI gained insight into the adolescents' understanding of their experiences. Upon completion of each interview, the PI: reviewed the audiotape, so as to ensure accuracy and understanding; transcribed the interview verbatim; wrote field notes regarding the interview; and, wrote in a journal to reflect how subjective elements (i.e. the PI's feelings, attitudes and opinions) may have affected the data collection and analysis processes.

Early interpretive analysis was conducted during summarization of each interview. Prior to the next interview, a summary of the previous interview was presented to each respective adolescent so as to start the interview from a common understanding of what previously had been discussed, as well as to seek clarity regarding the adolescent's previous responses. Each adolescent's interview cycle took two to four weeks to complete.

Data analysis: Demographic data were analyzed using descriptive statistics. Qualitative analysis was conducted to discern patterns, themes and categories that emerged from the interviews of each participant. Case by case, the transcription of each interview was read and significant statements were highlighted. Then, the significant statements were linked, so as to display patterns of meanings or themes. Analysis of the data was confirmed among all members of the research team.

Trustworthiness: To assure trustworthiness of the findings, the PI followed the criteria for qualitative research evaluation, including: credibility, applicability, consistency and confirmability.²⁶ Five activities were

used to establish credibility, including: a) meeting with the adolescents at least twice to encourage their prolonged involvement in the study, as well as to create rapport and establish a relationship of mutual trust with them; b) discussing with all members of the research team and each adolescent, for the purpose of validation, the interpretation of the findings; c) conducting the audio-recorded interviews in a quiet area, free from interruptions, with the recorder close to each adolescent so as to record exactly what he had verbalized; d) transcribing the tape recordings verbatim; and, e) developing the expertise required by conducting, prior to the study, practice interviews and data analysis with adolescents not in the study. To ensure applicability, consistency and confirmability, the PI conducted an audit trail that detailed how the researcher arrived at the findings, as well as kept a reflexive journal to avoid the intrusion of bias throughout the research process.

Findings

Three categories and seven themes emerged from the data. The three categories and respective number of themes were: 'Being a drug abuser' (three themes); 'Learning from looking back' (two themes); and, 'Constructing a new world' (two themes). Each category and its related themes follow. The initial "A" and a numerical value have been used to indicate which adolescent's direct quotes demonstrated the presence of the related theme.

<u>'Being a drug abuser'</u>, the first category, addressed what it was like to be a drug abuser. The related themes that emerged included: 'It is not what I thought it would be'; 'It is an undesirable existence'; and, 'I lost my place in the world.'

<u>'It is not what I thought it would be'</u> referred to the adolescents' experiences with the negative consequences of using drugs. Before trying drugs, most of them described themselves as "bullet proof"

and unaware of the ramifications of using drugs. Later, they perceived drug usage to be fun and involved having a good time with friends. The adolescents were unaware of the addictive nature of drug usage and believed they could quit drugs whenever they wanted. Among all of them, drug use fuelled their desires to use more until it became the major focus of their lives. Drugs created difficulties for the adolescents in regards to their physical, mental, and social functioning. When they reflected on their past experiences, they regretted having started the use of drugs. The adolescents became acutely aware that quitting the use of drugs was very difficult. This theme was supported by the following statements:

"I had hallucinations continually. I looked at a tree knowing it was a tree, but at first I thought there was a man hanging by his neck and he would come to kill me....open the window...at my home...over there...I saw him and he haunted me continually. I tried to close my eyes, but I couldn't sleep." (A1).

"I had never thought about it at all. Then, I got more addicted everyday. It made me think I shouldn't have tried it. If I had known about what would happen, I never would have tried drug." (A10).

'It is an undesirable existence' reflected the adolescents' suffering from drug abuse. They experienced an undesirable existence in being: considered unreliable people and in a state of guilt. Being unreliable people reflected the fact they were considered untrustworthy and did not perform well as sons, family members or students. Some of them felt pain and suffering from losing prestige as a person. Other adolescents felt the greatest amount of guilt when they caused problems for their parents and disgraced their families. This theme is represented by the following comments.

"I want to tell everybody, don't get involved with drugs because it is going to change your relationship with your family. When you heavily use drugs, family relationships change and people around you don't look at you in a good way. It was the kind of drug which everybody or all parents don't want their kids to use. When you use it, you are just disgusting. When you use it, other people won't like you." (A11).

"My mum's face had a look of disappointment. She asked what was going on. I told her the police arrested me for a positive urine test. She asked me when I used it and slapped my face, one time, then walked into the house. I felt sorry....my mom already forgave me the first time then I repeated the mistake again. I was very sorry." (A1).

'I lost my place in the world' involved the stigma of being a drug abuser. Using drugs is illegal and consequently generates a lifestyle that inevitably fractures adolescents' relationships with others. Some of the adolescents joined gangs, fought with other groups, damaged public property and/or violated traditional rules. One violated a Buddhist norm by using drugs while staying in a temple as a novice monk. Using drugs is considered a serious misconduct for Buddhist practitioners. After being warned, by the village headman, the adolescent was closely observed by key persons in the community.

As part of losing their places in the world, the adolescents contented with restrictions and constraints. They could not completely disclose themselves to others and their unconventional practices generated many forms of fear. For instance, the adolescents were afraid of facing disappointment from their parents and family members, fear of the effects of breaking public rules and fear of being labelled incompetent. Their fears tended to lead to personal

instability and fractured their existence in the world. The following statements demonstrate two adolescents' feelings about losing their places in the world.

"I lived my life as if I was a robber. I had to avoid others and hide. I even stopped talking to my friends. I was freaking out...just hearing a leaf fall...Crack...I would turn my head left and right looking for someone." (A5)

"I feel frustrated...feel tired when I go somewhere. Others just keep looking at me. They don't want me in their house. I know the owners of the houses. They shouldn't be like that, but there is nothing I can do." (A12)

'Learning from looking back', the second category that emerged from the data, addressed what the adolescents had learned from reflecting on their experiences as drug abusers, as well as their experiences while in drug abuse treatment. As they became involved in their respective treatment programs, they gained a new sense of direction in their lives. Two themes that emerged within this category were: 'Love and home bring me back' and 'Struggling to stay clean.'

'Love and home bring me back' conveyed that love and family were the most important aspects of the adolescents' experiences and served as anchors for becoming drug free. For example, one adolescent, who was jailed and detained for assessment, came to the realization that hard times brought forth people who really cared about him. Six of the twelve teens experienced detention and waited to be bailed out by their families. While they were separated from home, they developed a new understanding that 'there's no place like home.' Statements that reflected two of the adolescents' feelings about love and home were:

"I am very glad to hear my parents say they couldn't stand seeing me bit by mosquitoes,

starving and not getting enough food. I used to eat rice at home. I would sometimes eat many times in a day. (In jail) I couldn't sleep a couple of nights." (A5)

"My mother visited me on Sunday, but the officers wouldn't allow her to post bail. On Monday, my parents still couldn't bail me out because they did not have enough money. I told my mother to please get me out of here because it was really awful. I can't stay here anymore. Mom said she wants to help, but does not have enough money. She promised she would come back the next day. I waited for her all day long. She came in the evening. I was very glad." (A5)

"I was thinking about staying in there (jail). There were so many different things. No one forced me. My parents don't like to control other people. They let me do what I wanted to do. In jail, I had to obey the officers, live in a narrow place and couldn't do anything. It was better to live at home. When thinking about home I cried." (A1)

'I struggle to stay clean' involved the coping techniques the adolescents used to fight drug addiction and temptation. The major mechanism used involved the metaphor, 'mind over matter.' 'Mind over matter' reflected the adolescents' beliefs their minds were powerful and, thus, could be used to overcome their desires for drugs. They strengthened their minds by using thoughtful determination and problem-solving. The adolescents developed mental weaponry to strengthen their commitments to remain drug free. Two of them described their struggles to stay clean as follows:

"I had 200 baht and was going to see my friends. I squeezed the money in my hand. I thought I should buy noodles or a chewy sweet with chocolate, or use it for drugs. My mind said I was hungry. I squeezed the money in my hand until it became crumpled. I thought that if I used it for drugs...so what? The more I use drugs, the more I feel exhausted and decayed. If I use drugs, then I can sleep. That's all right! But drugs last for just two hours. So, I held the money and went to the grocery store. I bought food and then went back to bed." (A4)

"Pee (the therapist) told me that we have two parts in our minds, black and white. The black mind pushes us to do bad things and the white mind supports us to do beautiful things. Something like that! I applied this principle. We need to think just good things. We need to leave the bad things (the poison) alone. We need to wash the poison out, not let it stay with us." (A5)

'Constructing a new world', the third, and final, category that emerged from the data, dealt with the adolescents' understanding of becoming drug free and presented itself in the form of new practices to reach life goals. This category consisted of two themes; 'Look, I am a new person' and 'This is the life I want.'

<u>'Look, I am a new person'</u> addressed their desires to become 'good' people. As a result of wanting acceptance and recognition for being 'good people', the adolescents performed their roles in the family as responsible and truthful young men. This theme was reflected in the following comments made by two of them:

"My parents split up. I live with my dad. There is just the two of us. If there is something wrong with him, who is going to take care of him. Just me...so I want to make him realize that I am good." (A3)

"In the past, I didn't have any jobs, but just asked my parents for money. I started going to work everyday, saved money and did not buy drugs. When I obtained money, I just stayed home while others used their money for drugs. I didn't. I stayed home and had dinner with my parents. If they asked me anything, I responded truthfully to them." (A11)

<u>'This is the life I want'</u> reflected the adolescents' actions and determination to reach their life goals. All of them reflected on their desires for the future. Some of the adolescents had left school and now wanted to return, while those still in school hoped to finish. The ones who were working desired to get ahead in life with better prospects and jobs. All of the adolescents, using their own power and resources, intended to rely upon themselves. This was reflected in the following statements:

"I thought I couldn't go back (to school). I have to go for Kor-Sor-Nor (an informal education). When we get older, we might want to go for Or-Bor-Tor (a local government position). To obtain a local government job, you need a degree. It might also be necessary for other job positions. I currently work in a factory that makes bake goods, but not forever. I am still young." (A4)

"So I don't have to be an employee, I want to have my own business. I learned how tiring it is when we work to earn money, but I do it!" (A7)

Discussion

The adolescents experienced many unexpected and negative consequences from 'being a drug abuser' that led them to realize it is hard to stop abusing drugs. Numerous experiences taught them: 'It is not what I thought it would be'; 'It is an

undesirable existence'; and, 'I lost my place in the world'. The fact the adolescents, in this study, found involvement in drug abuse was not what they thought it would be is consistent with prior findings that revealed adolescents' have major concerns about the consequences of using drugs.²⁷ The concerns of the adolescents in this study (i.e. loss of pride, prestige, trust and worth) made them believe they had no real value or good qualities as people. As their lives eroded, their worlds became fragmented. No doubt this could have been attributed to the fact that, as adolescents, they were moving from childhood to adulthood, and, as a result, remained sensitive and curious about their changing worlds.²⁸

'I lost my place in the world' was evident from their expressions of painful feelings about their loss of support from significant others (family, peers, friends and community members), as well as being devalued because of violating religious and cultural principles. 'Being a drug abuser' meant hiding and facing the stigma of others. Because they demonstrated unacceptable behaviors and often violated social norms, they tended to be marginalised by members of society. This led to their feelings of being unwanted, unworthy and inadequate. It has been noted when adolescents who abuse substances lose their place in the world, they have less opportunity to create their lives in a constructive way. ²⁹ As previously noted, when adolescents lose their relationships with members of the community, they are more likely to fail to become healthy and mature adults.30

The adolescents noted there was 'learning from looking back' by realizing and understanding that 'love and home brought me back' and 'I struggled to stay clean.' The fact that 'love and family brought me back' served as the main factor assisting them to attend a particular treatment program to become drug free. A number of the adolescents realized the meaning of love from family members when they stopped to review some of their past family experiences.

Family attachment and love inspired them to fight the strong pull of drugs and to work on improving their lives. This finding is similar to those of a prior study that revealed incarcerated male adolescents, who had abused drugs, were more likely to stop using drugs as a result of receiving family love and support.⁹

The theme 'I struggled to stay clean' was a manifestation of the coping mechanisms the adolescents used to fight their drug habits. Being drug free was not an easy task for them to achieve and required determination on their parts. The adolescents mainly worked to control their minds through problem-solving techniques. This findings was similar to those of prior research wherein the use of problem-solving, as a coping strategy, was found to lead adolescents to be less likely to report engagement in substance abuse.²⁷

The final theme 'constructing a new world' lead the adolescents to note 'look, I am a new person' and 'this is the life I want.' Since they were more motivated to work on possibilities for their respective futures, their stories illustrated each of them was 'a new person.' After completing the treatment programs, a number of them obtained a job for the first time, stayed home more with their parents and expressed concerns about the welfare of others. The fact they expressed that 'this is the life I want' was demonstrated by some of the participants going back to school, realizing an education was important for job advancement and setting goals for the future. Similar to a prior study, the adolescents became aware of who they really were by being open and honest with others. 31

From a Heidegger phenomenological perspective, the twelve adolescents in this study were found to be no different from any other adolescent in that they constructed meaningful relationships and practices, while working out how to situate themselves within their respective worlds. The study's findings demonstrated the ability of

adolescents who abuse drugs to construct a new way of life when provided with a safe place (i.e. treatment program) where respect, trust and non-judgmental relationships can be established. By understanding what male adolescents thought regarding 'being a drug abuser,' 'learning from looking back,' and 'constructing a new world,' healthcare providers may be better prepared to assist them as they transition from drug dependence to being drug free.

Limitations and Recommendations

Like all studies, this study had limitations. First, the sample consisted only of male adolescents. Therefore, the findings may not be applicable to female adolescents. Second, all of the adolescents were Thais. Since not all cultures may have the same beliefs and expectations about drug abuse, application of the findings to other cultures may not be appropriate. Third, since some adolescents were still actively engaged in a treatment program, and some were in the required one-year, post-treatment, follow-up, not all of them were at the same place in regards to their recoveries. Therefore, their perceptions about drug abuse may have been influenced by this factor. Finally, all adolescents used methamphetamines and were in a drug treatment program. Their experiences may not have been the same as adolescents who used other drugs and/or were not in drug treatment programs.

Based upon the findings and limitations of this study, future research needs to: address the experiences of female adolescents engaged in drug abuse; use a longitudinal design to examine what contributes, after completion of a treatment program, to adolescents remaining drug free or relapsing; and, examine adolescents' accounts of what aspects of treatment programs prove to be the most beneficial. As the rate of adolescent drug abuse increases, it is equally important to conduct family studies that focus on parental and family member involvement in adolescents' transitions from drug dependence to being drug free.

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การเปลี่ยนผ่านจากผู้ติดมาเป็นผู้ปลอดจากสารเสพติดของวัยรุ่นชายไทย

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บทคัดย่อ: การศึกษาครั้งนี้มีวัตถุประสงค์เพื่อใช้ระเบียบวิธีวิจัยแบบปรากฏการณ์วิทยาของไฮเดกเกอร์ ในการทำความเข้าใจวัยรุ่นชายไทยในการเผชิญหน้ากับความท้าทายที่จะแปรเปลี่ยนตนเองจาก ผู้ติดสารเสพติดมาเป็นผู้ปลอดจากสารเสพติด กลุ่มตัวอย่างเป็นวัยรุ่นชายไทยจำนวน 12 คน จากการ คัดเลือกแบบเฉพาะเจาะจงตามเกณฑ์ที่กำหนด คือ อยู่ระหว่างการบำบัดรักษา และระยะติดตามหนึ่งปี หลังการบำบัดรักษา อายุระหว่าง 16-19 ปี ไม่มีอาการขาดยาเสพติด อาการพิษจากยาเสพติด หรือ อาการทางจิต และมีความเต็มใจที่จะเข้าร่วมในงานวิจัย เด็กวัยรุ่นแต่ละคนได้รับการสัมภาษณ์สองถึงสี่ครั้ง เพื่อทำความเข้าใจในเรื่อง 1) ประสบการณ์เกี่ยวกับการใช้สารเสพติด 2) การเรียนรู้จากประสบการณ์นั้น 3) การเผชิญปัญหาที่เกี่ยวกับการใช้สารเสพติด วิเคราะห์ข้อมูลส่วนบุคคลโดยใช้สถิติแบบบรรยาย ส่วนข้อมูลเชิงคุณภาพใช้ การวิเคราะห์ข้อมูลโดยการแปลความหมาย และการจัดกลุ่มประเด็นของข้อมูล

สามารถจัดข้อมูลออกเป็น 3 หมวดหมู่ 7 ประเด็น หมวดหมู่แรก คือ การเป็นผู้ใช้สารเสพติด มาจาก 3 ประเด็น คือ มันไม่ได้เป็นอย่างที่ผมคิด การดำรงอยู่อย่างไร้ความหมาย และการสูญเสียที่ยืน บนโลกใบนี้ หมวดหมู่ที่สอง คือ เรียนรู้จากการมองย้อนกลับไปอดีต ประกอบด้วย 2 ประเด็น คือ ความรักและครอบครัวทำให้ผมย้อนกลับมา และ การดิ้นรนเพื่อความขาวสะอาด หมวดหมู่ที่สาม คือ การสร้างโลกใบใหม่ ประกอบด้วย 2 ประเด็น คือ ดูซิ ผมเป็นคนใหม่แล้วนะ และนั่นคือชีวิตที่ผมต้องการ ผลการวิจัยครั้งนี้อาจจะเป็นแนวทางสำหรับพยาบาลและบุคลากรทางสุขภาพในการให้ความช่วยเหลือวัย รุ่นชายไทยในการแปรเปลี่ยนจากผู้ติดสารเสพติดมาเป็นผู้ปลอดจากยาเสพติด

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