EFFECTIVENESS OF SCHEMA THERAPY ON THE TEMPTING THOUGHTS OF ADDICTS TREATED WITH METHADONE

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ABSTRACT
The aim of this research was to evaluate the effectiveness of schema therapy on the craving beliefs and the amount of methadone drug used by addicts treated with methadone. To this aim, from among the addicts treated with methadone in the drug abuse treatment centers in Sanandaj in 1394, 20 people were selected via convenience sampling method and then randomly were placed into two groups of 10 patients in the experimental group and the control group and then based on schema therapy protocol was followed by 10 sessions of 45 minutes were conducted on experimental groups. In this research, a Craving Beliefs Questionnaire (CBQ) measures the related beliefs to the temptation of drugs. The results of the analysis showed that schema therapy has a significant impact on craving beliefs and methadone use. Thus, according to this finding, the intervention in the early maladaptive schema can influence the reduction of the craving beliefs and methadone use.

Keywords: Schema Therapy, Craving Beliefs, Addiction, drugs, Methadone Maintenance Treatment (MMT)

INTRODUCTION
The drug addiction is especially new phenomenon of and modern life since if there was the drug use in the past; it was not recognized as an addiction or diversion. But with the development of modern culture, values and modern norms these practices spread and behaviors like drug addiction was considered incompatible with the norms and the science of sociology that also has the task of understanding and the impacts of norms, explores and investigates the social deviations to explain the causes and consequences of deviations (Babapour, 1390).

It seems that craving need to use the drug are controlled by cognitive – emotional processes, automatically or non-automatically, as such that carving theories generally verify that craving urges in individuals are related to activation of emotions and impulses in the search for drugs (36).

The approach developed about the problem of drug addiction in the world in recent years that is one of the most successful theoretical approaches in this field, is the "drug addiction as a brain disease" approach. The World Health Organization and the American Psychiatric Association defined addiction as a chronic disease with a tendency to drug abuse and its related problems. Research developments indicate the physiological background for clinical problems to appear in patients suffering from chronic drug abuse.

Drug abuse treatment has been associated with many challenges. Methadone Maintenance Treatment (MMT) was one of the most important achievements of the scientists in the field of addiction treatment. This method was first used at the Rockefeller University in 1964. In 2002, approximately 215,600 patients were treated in America. The program started in 2004.47 country and 500,000 patients around the world under this treatment participated in it (Joseph et al., 2000).

Etiology of mental disorders and addiction issues separately explains the two disorders as such that mental disorders increase the risk of drug addiction and drug use can also increase the risk of mental illness (23 and 34). Schemes consist of people’s way of thinking about their needs, ideas, and their assumption about people, events and the environment. They are fundamental beliefs that form the individual's point of view about themselves, the world around and others. Schemas are the product of experience and interactions in the early life (Gharedaghi, 1388).
Early maladaptive schemas that are basically the implicit and unconscious themes that are maintained by individuals as a model applied for subsequent experience processing and therefore extends throughout life and sets the behavior, thoughts, feelings and relationships with other people (Simos, 2002).

With regard to the cases cited, this research seeks to answer the question if the schema therapy is effective on craving beliefs of the amount of methadone drug use of the addicts treated with methadone?

MATERIALS AND METHODS

Research Methodology

The Survey Method: This research method is quasi-experimental considering the practical purpose in conduction and is of the pretest-posttest type with control group. And so was conducted that after placing the individuals randomly in two experimental and control groups with regard to the therapy scheme, 10 sessions (two sessions per week, each session 45 minutes) was conducted on the experimental until finally to determine if the schema therapy is effective in reducing the impact of craving beliefs or not. The research design diagram is shown below. The diagram of the project is shown as follows:

Diagram of the Research Project:

<table>
<thead>
<tr>
<th>GE</th>
<th>T1</th>
<th>X</th>
<th>T2</th>
</tr>
</thead>
<tbody>
<tr>
<td>GC</td>
<td>T1</td>
<td></td>
<td>T2</td>
</tr>
</tbody>
</table>

The population of this study: The current study consisted of all addicts treated with methadone in treatment centers for drug abuse in Sanandaj in the late 93.

Sampling and volume of research: In this study, using a convenience sampling method 20 voluntary people who are eligible to enter the study were selected and were placed into two groups: control (n = 10) and experimental (n = 10).

Method of Study: After selecting the subject and the population sample determining the sample size, treatment by methadone maintenance was carried out for the drug addicted men. Since this study was conducted among male patients with addiction, so there is no gender differentiation but to be able to keep the random sampling, it is tried to select regionally maintenance therapy centers in the city of Sanandaj which includes the entire population.

The Research Instruments

Craving Beliefs Questionnaire CBQ): This questionnaire is one of the most important tools to assess the indices that are also used in several studies. This questionnaire is a self-report scale that measures the beliefs associated with the temptation of drugs.

Validity and Reliability: Rahmaniyan, Mir Jafari and Hassani evaluated this questionnaire by using it to assess the reliability and validity in a group of 30 having the dependence criteria for opioid materials. The reliability and validity of the questionnaire has been reported. To evaluate the validity of the questionnaire given to the studies done on the relationship between craving and bias toward stimuli, coefficient 2 related to drugs, Pearson correlation has been reported (-28/ 0). To evaluate the reliability, the method of internal consistency in accord with the Cronbach's alpha coefficient (0.84) and split-half (81/0) was used. The reliability of this scale in Mohamadkhani research, Sadeghi and Farzad using Cronbach's alpha was 77/0.

RESULTS AND DISCUSSION

Findings

First question: Is the schema therapy effective on craving beliefs of the addicts treated with methadone?

To analyze the data related to the hypothesis, the analysis of covariance (ANCOVA) was used. In this analysis, the mean after the post-test analysis in the experimental group was compared with the control group mean and the pretest scores were used as covariates.
Table 4-8: The results of a multivariate analysis of covariance to evaluate the differences in the experimental group and control craving beliefs

<table>
<thead>
<tr>
<th>Source Indices</th>
<th>SS</th>
<th>Df</th>
<th>MS</th>
<th>F</th>
<th>sig</th>
<th>Squared Eta</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tempting thoughts</td>
<td>376,584</td>
<td>1</td>
<td>376,584</td>
<td>5,698</td>
<td>.029</td>
<td>.251</td>
</tr>
<tr>
<td>Group</td>
<td>2358,062</td>
<td>1</td>
<td>2358,062</td>
<td>35,650</td>
<td>.000</td>
<td>6770</td>
</tr>
<tr>
<td>Error</td>
<td>1123,516</td>
<td>17</td>
<td>66,089</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Total</td>
<td>107225,000</td>
<td>20</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
</tbody>
</table>

As it is shown in Table (4-8), it is observed that after adjustment of scores for craving beliefs pretest, there is a significant difference between the experimental and control groups (sig =0/000 and F (1and7) =35/ 650). Therefore, the null hypothesis of no difference between the two groups is rejected and it was concluded that schema therapy is effective on craving beliefs.

Meanwhile, the mean and adjusted standard deviation of craving beliefs for both experimental and control groups is shown in the table (4-9).

Table (4-9): The mean and adjusted standard error of the experimental and control groups craving beliefs

<table>
<thead>
<tr>
<th>Group</th>
<th>The pretest M</th>
<th>SE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Experiment</td>
<td>60,433</td>
<td>2,614</td>
</tr>
<tr>
<td>Control</td>
<td>82,864</td>
<td>2,614</td>
</tr>
</tbody>
</table>

As shown in Table (4-9), it is observed that there is a significant difference between the two groups between the mean of the pre-test grades of craving beliefs.

Second question: Is the schema therapy effective on the use of methadone amount for the addicts treated with methadone?

To analyze the data related to the question, the analysis of covariance (ANCOVA) was used. In this analysis, the mean of the post-test in experimental group was compared with the mean of the control group and pretest scores were used as covariates.

Table 4-10: The results of a univariate analysis of covariance to test differences in methadone use in the experimental and control groups

<table>
<thead>
<tr>
<th>Source indices</th>
<th>SS</th>
<th>Df</th>
<th>MS</th>
<th>F</th>
<th>sig</th>
<th>Squared Eta</th>
</tr>
</thead>
<tbody>
<tr>
<td>The methadone</td>
<td>795,372</td>
<td>1</td>
<td>795,372</td>
<td>206,343</td>
<td>.000</td>
<td>.924</td>
</tr>
<tr>
<td>Group</td>
<td>25,731</td>
<td>1</td>
<td>25,731</td>
<td>6,675</td>
<td>.019</td>
<td>.282</td>
</tr>
<tr>
<td>Error</td>
<td>65,828</td>
<td>17</td>
<td>3,855</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Total</td>
<td>4009,000</td>
<td>20</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
</tbody>
</table>

As shown in Table (4-12), it is observed after the adjustment of the pretest scores there is a significant difference between the amount of methadone use in both control and experimental groups (sig =0/019 and F (1 and 17) = 675/6). Therefore, the null hypothesis saying there is no difference between the two groups is rejected and it was concluded that schema therapy is effective on the amount of methadone use so that the amount of methadone in the experimental group was significantly reduced.

Meanwhile, the mean and adjusted standard deviation of methadone use in both experimental and control groups is shown in Table (4-13).
Table (4-13): The mean and adjusted standard error of the amount of methadone use in the experimental and control groups

<table>
<thead>
<tr>
<th>Group</th>
<th>Posttest</th>
<th>M</th>
<th>SE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Experiment</td>
<td></td>
<td>11,313</td>
<td>.622</td>
</tr>
<tr>
<td>Control</td>
<td></td>
<td>13,587</td>
<td>622</td>
</tr>
</tbody>
</table>

As shown in Table (4-13), it is observed that there is a significant difference between the mean of methadone use after schema therapy between the two groups.

Discussion and Conclusion

According to the results obtained in the table (4-8), there is a statistically significant difference the "Schema Therapy" and "craving beliefs of the addicts treated with methadone and ordinary people". The results for this hypothesis are consistent with researches of Decouvelaere et al., (2002), Brotchie et al., (2004), as well as Roper et al., (2010).

According to the results obtained in the table (4-12), there is a statistically significant difference between the "Schema therapy" and the "methadone use of the drug addicts in methadone maintenance treatment with methadone and ordinary people."

The results obtained for this hypothesis are consistent with the earlier research work. In explaining the above findings, we can say that Beck describes the schemas as cognitive structures for selection, encryption and evaluation of incentives that affect the organisms. Schemas grow during childhood experiences and act as a model for processing of life. Since the schemas are relatively constant and are factors of their own stability, are constantly searched for as confirming information and they can make an individual more vulnerable to psychological distress (see McGinn and Young, 1996). It is believed that drug abuse is one of the individual coping strategies to be used to avoid the negative impact of activated maladaptive schemas. The goal of schema therapy is to adjust one's maladaptive schemas in this way to help people to accommodate with new experiences that do not support the original scheme and cause more adaptive coping behaviors. Many interventions based on the recognition, and treatment of psychological problems are both focused on automatic maladaptive thoughts and cognitive processes and structures related as potential factors the mechanisms for explanation. One of the experiences of dependence on drug is the craving (Killen and Fortmann, 1997) that has become (Drummond, 2000) as a key concept in continuation of dependence of drug abuse and contributes to its relapse (Drummond, 2000; Everitt, 1997; Franken, 2008; Killen and Fortmann, 1997; McKey, 1999) Obsession means asking and is known as impulses, desires, need or compulsion to consume. Temptation is the conscious experience is the desire to use drugs. World Health Organization considers the temptation as a foundation for starting drug dependence, loss of control and recurrence. Some studies have shown in the 1970s and 1980s that the temptation is not the introduction of relapse and does not necessarily result in recurrence (Franken, 2008; Tiffany, 1990). However, these studies do not negate the relevance of temptation to treat drug dependence.

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REFERENCES


Drummond DC (2000). What Does Cue-Reactivity Have to Offer Clinical Research? Addiction 95(Suppl. 2) 129-144.


