

THE EFFECT OF COGNITIVE BEHAVIOR THERAPY APPLYING BUDDHISM TWELVE STEP FACILITATION PROGRAM ON PREVENTION RELAPSE BEHAVIORS OF PATIENTS COMPULSORY DRUG ADDICT

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Abstract

Objective: To investigate the impact of a cognitive behavior therapy applying Buddhism twelve step facilitation program for prevention relapse behaviors and compare the mean score after finishing and 1-month follow up, of the efficacy to relapse prevention of the experimental group after participating in the cognitive behavior therapy applying Buddhism twelve step facilitation program.

Methods: This study was a quasi-experimental research samples were 44 patients compulsory drug addict in Suansaranrom Psychiatric Hospital who met the criteria. The experimental and control groups were simply randomized, 22 subjects each group. Data were conducted three periods consisting of pre-test, post-test and one month after finishing the program. The experimental group participated in the cognitive behavior therapy applying Buddhism twelve step facilitation program while the control group received regular caring activities. Research instruments were as follows: 1) A personal data questionnaire; 2) The efficacy to relapse prevention questionnaire. The program and questionnaires were validated by 3 professional experts. Cronbach alpha coefficient reliability of the efficacy to relapse prevention was .92. Data were analyzed by descriptive statistics, dependent t-test, independent t-test and repeated measures ANOVA.

Results: 1) After finishing and 1-month follow up, the mean score of the efficacy to relapse prevention of the experimental group after participating in the cognitive behavior therapy applying Buddhism twelve step facilitation Program was 146.22 (SD = 14.07) and 149.50 (SD = 14.56) respectively. The mean score at the completed program was significantly higher than the score before participating in the program (mean = 78.40, SD = 27.53) ($p < .05$). 2). The mean scores of the efficacy to relapse prevention of the experimental group and control group in pre-participating in the cognitive behavior therapy applying Buddhism twelve step facilitation program were not different. The mean scores after participating in the program and 1-month follow up were significantly different, .05.

Conclusion: Cognitive behavior therapy applying Buddhism twelve step facilitation program can enhance the efficient to relapse prevention and extend the duration of non-relapse.

Keywords: cognitive behavior therapy program, Buddhism twelve step, prevention relapse behaviors, patient's compulsory drug addict

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