Short Communication

The "Motivation-Skill-Desensitization-Psychological Energy (MSDE)" Intervention Model is Promoted by Chinese Ministry of Justice as a New Method for Drug Addiction Treatment

Zengzhen Wang*

Department of Epidemiology and Health Statistics, School of Public Health, Tongji Medical College, Huazhong University of Science and Technology, China

*Corresponding author: Zengzhen Wang, School of Public Health, Tongji Medical College, Huazhong University of Science and Technology, Wuhan, 430030, China; Email:zzhwang@hust.edu.cn

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Drug dependence is defined as recurrent encephalopathy, which not only seriously harms the individual's physical and mental health, quality of life, reputation, academics and career, but also deeply hurts relatives and society. The high relapse rate after detoxification has been plaguing the patients, families and society. A large amount of data shows that there are many factors leading to relapse.

Based on literature review and our in-depth interview and survey, the main risk factors for relapse were summarized as follows: (1) Drug patients were lack of detoxification confidence and motivation. Some addicts thought that they couldn't stop. Regarding to rehabilitation, some addicts said that they wanted to get rid of drug in the centers, but after they were discharged, they would have different ideas about it; some patients were willing to continue to use drug. (2) They were lack of coping skills. When the patients had excuses and cravings, they believed that they couldn't get past, so they immediately looked for drugs; when they encountered temptation, many patients didn't refuse or didn't know how to refuse. Some patients didn't know how to arrange their time reasonably, or even had no time concept. Some patients felt empty and took drugs again. If they had financial sources, they wanted to suck again. They didn't know how to manage money. When they had stress and troubles, wanted to take drug, especially felt negation, misunderstanding, distrusting from family, the first thing that came to mind was taking drug to evade reality. They didn't know how to manage stress and emotions. Synthetic drug patients reported that they didn't want to communicate with their families after taking drugs. A lot of patients were lack of communication, problem solving, stress management and emotional adjustment skills; (3) They were sensitive to drug use clues. The patients couldn't forget the experience and feelings of drug taking, and they would have excuses and cravings for drug when they encounter the clues; (4) Their positive psychological energy was insufficient. Many patients wanted to give up if they felt inferiority and hopeless. Therefore, it is undoubtedly necessary to construct integrated intervention strategies and measures to prevent relapse.

Based on the main factors of relapse, our extensive study of psychotherapy theory and technology and intervention experience among the addicts we developed a "Motivation-Skill-Desensitization-Psychological Energy (MSDE)" intervention mode, which included four elements: to promote rehabilitation motivation, coping skills, positive psychological energy for facing the predicament, and decrease the sensitivity to drug clues.

After testing MSDE in heroin patients in 2010-2011 and confirming the effects in three years of follow-up, we also tested MSDE among methamphetamine and ketamine patients, forced detoxification patients and voluntary detoxification patients. It was confirmed that MSDE could improve patients' mood, motivation and skills of rehabilitation and reduce the memory intensity of drug use. Our book named "Operational guide and case of psychotherapy for addiction" based on MSDE was published by People's Health Publishing House in 2012 in Beijing.

Since 2014, 28 MSDE training workshops were hold by China Drug Abuse Prevention Association, Hubei Provincial association of Drug Treatment and Correction, Beijing Prison and Detoxification Bureau, Wuhan Sino-German Psychological Research Institute and Guangdong Lianzhong Social Service Center. The trainees included consultants, social workers and male police officers and police women, they were all satisfied with the MSDE intervention model, especially the trainees in 14 workshops in Beijing. The trainees believed that MSDE training could help them to improve their skills, confidence, enthusiasm, interest and responsibility for relapse prevention intervention.

Interventions based on MSDE training have being conducted by trainees in many hospitals, rehabilitation centers and communities, especially in 8 drug rehabilitation centers in Beijing. The trainees feel that the MSDE intervention model is helpful for patients' rehabilitation, and it is highly operable and relatively stable. At the request of Chinese Ministry of Justice for new methods and techniques for drug patients rehabilitation, they reported the MSDE to the Ministry. After reviewing by the Judicial Administrative Drug Treatment Expert Advisory Committee, the Ministry of Justice released the first batch of new methods and technology for drug addict's treatment in 2018. MSDE was included in it. From that time, MSDE is formally promoted by Chinese Ministry of Justice.