

Treatment and Rehabilitation

Treatment and rehabilitation process aims to help drug addicts from taking drugs and be able to live in the society like ordinary people. This year the ONCB has focused on important concepts as follows:

- Develop the treatment and rehabilitation measures to be able to treat all kinds of drug addicts by emphasizing on the quality of service.
- Encourage and motivate the addicts to attend the treatment and rehabilitation center by using offensive strategies such as searching for addicts in communities, mobile services, etc.
- Cooperate with family institution and communities in prevention of drug addiction.
- Encourage the private and people organizations to actively participate in the treatment and rehabilitation.
- Speed up the treatment and rehabilitation according to the Narcotics Addict Rehabilitation Act B.E.2534 (1991).

According to the data received from 296 drug treatment centers, the number of drug addicts attended in the treatment centers had increased from 33,633 patients in 1998 to 38,044 patients in 1999. Among this group, male accounted for 37,103 patients while female accounted for 941 patients.

The data received from treatment centers also represents interesting features of drug addicts. These features are important for the planning of effective intervention program, since the pattern of drug use may change from time to time. Therefore, these characteristics must be followed closely. Interesting features from the latest data received are introduced as follows:

1. The age group of 20-24 was the largest group of the drug addicts who attended the treatment centers. This group accounted for 10,233 patients. For the

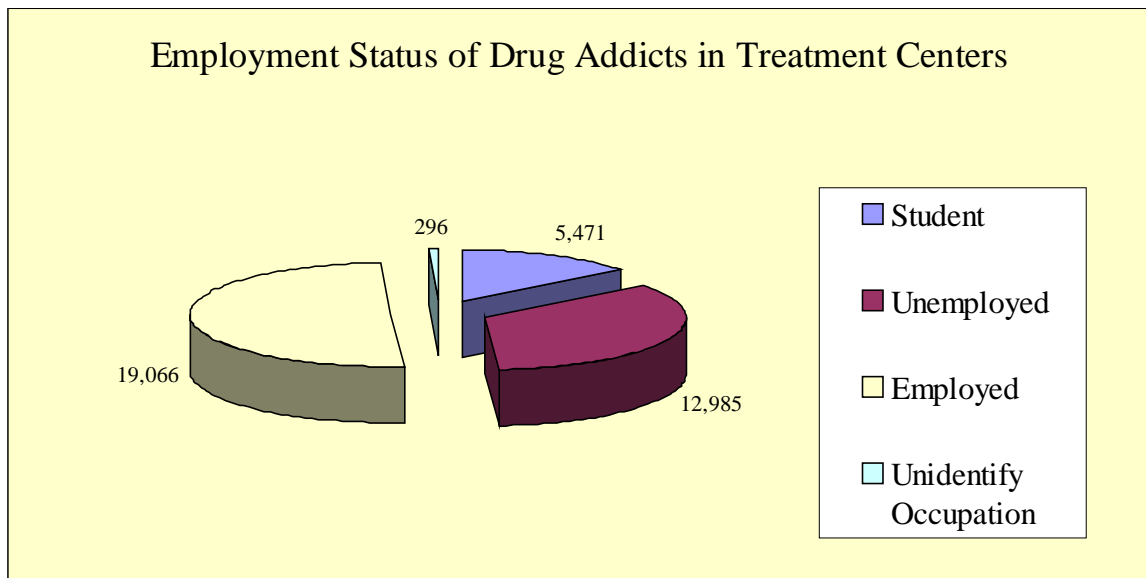
second largest group, age of 15-19 accounted for 6,912 patients.

Drug Addicts in Treatment Centers Classified by Age on Admission

Age Groups	Number of Addicts
Below 15	501
15-19	6,912
20-24	10,233
25-29	6,687
30-34	4,658
35-39	3,579
39 up	5,148

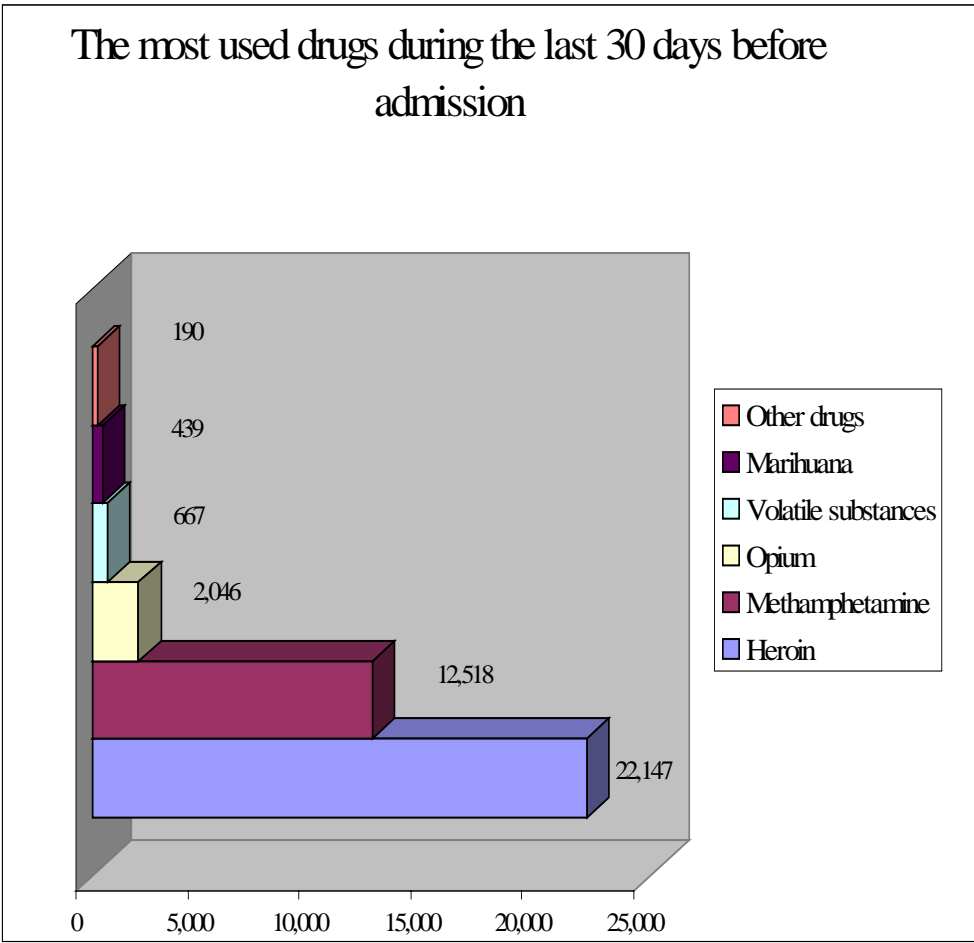
2. Most of the addicts were employed, which accounted for 19,066 patients while 12,985 patients were unemployed. The student group who attended in the

treatment centers accounted for 5,471 patients and the treatment centers did not identify the occupation of 286 patients.



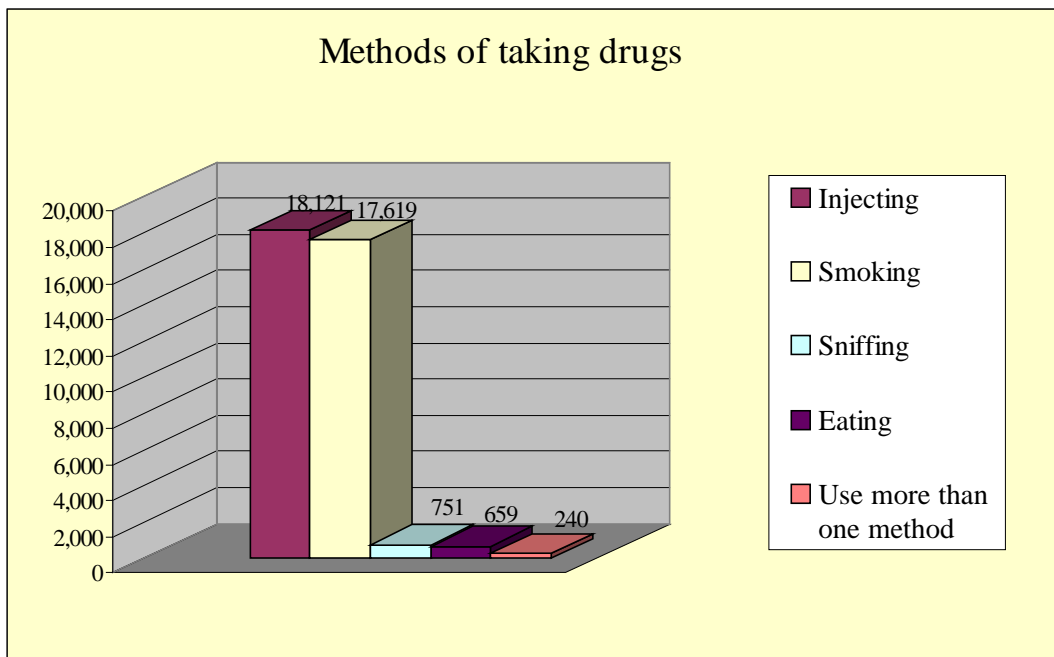
3. According to the data, heroin was the most used drugs during the last 30 days before admission to the treatment center (22,147 patients). Methamphetamine came

in second (12,518 patients), followed by opium (2,046 patients), volatile substances (667 patients), marihuana (439 patients) and other drugs (190 patients).



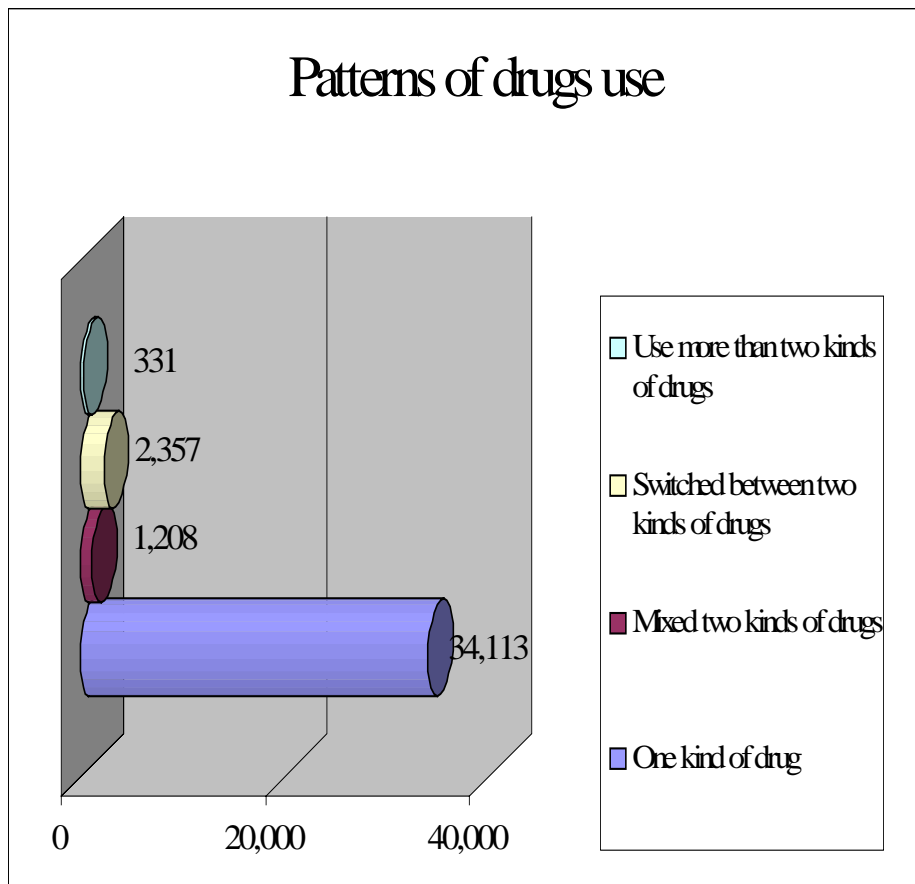
4. Most of the patients preferred to take drugs by injecting (18,121 patients) rather than smoking (17,619 patients), sniffing

(751 patients) and eating (659 patients). Additionally, there were 240 patients who used more than one method to take drugs.



5. Classifying by patterns of drug use, 34,113 patients used only one kind of drug. While 2,357 patients switched between two

drugs and 1,208 patients mixed two kinds of drugs together. Interestingly, 331 patients used more than two kinds of drugs.



Important Activities on Treatment and Rehabilitation in the Year 2000

Helping Drug Addicts in the Follow up and after Care Stage Project

The ONCB had organized a conference on the project during 30 May – 1 June 2000 at Amari Atrium Bangkok. It aims to enhance the knowledge of personnel who work on treatment and rehabilitation and makes them understand about the procedure of working with narcotics anonymous group. The conference has focused on the follow up and aftercare stages, because they are very important to the addicts. If they pass these

stages successfully, they tend to be able to live in the society like normal people and won't return to drugs again.

Family Therapy Project

In February 2000, the ONCB had organized a training course on family therapy. The training aims to create core personnel on treatment and rehabilitation and use family therapy strategy in solving narcotics in the communities and schools. The training also attempts to enhance the technique and efficiency of treatment and rehabilitation measures.