

**THE EFFECTS OF A "ZEN MEDITATION – BEHAVIORAL
SELF-MANAGEMENT" TRAINING PACKAGE IN
TREATING METHADONE ADDICTION :
A FORMATIVE STUDY**

**Deane H. Shapiro, Jr., Ph.D.
Stanford University, 1973**

**Reprinted from
DISSERTATION ABSTRACTS INTERNATIONAL**

Volume XXXIV, Number 6, 1973

THE EFFECTS OF A "ZEN MEDITATION - BEHAVIORAL SELF-MANAGEMENT" TRAINING PACKAGE IN TREATING METHADONE ADDICTION: A FORMATIVE STUDY

Deane H. SHAPIRO, JR., Ph.D.
Stanford University, 1973

Statement of the Problem: Since heroin left the ghetto and the poor, there has been increased concern over the widespread use of addictive drugs. Methadone maintenance is the most recent program for treating heroin addiction, and is considered by many to be the most promising. However, there are problems with methadone: 1) substitution of one addictive drug for another; 2) selling of methadone on the street to non-addicts; 3) difficulties of methadone detoxification; and 4) difficulties in remaining drug free once detoxed.

A crucial question therefore, concerns the development of non-chemical alternatives and methods which would address the above problems.

Procedures - Methods: A training package derived from both the behavioral self-management literature (self-observation of internal and external environment, covert behavior modification, covert imagery, relaxation training) and the literature dealing with eastern religious techniques (physiology and psychology of meditation) is proposed.

An intensive design format is employed with two subjects who were volunteers from a methadone maintenance clinic. Each S was instructed in formal Zen meditation and was instructed to practice fifteen minutes two times a day for one month. Ss were also taught to recognize certain internal and external cues (e.g., anxiety, tension) which were antecedent to drug-taking behavior. Subjects were instructed to make these cues discriminative stimuli for engaging in responses incompatible to drug taking - i.e., contingent informal meditation and behavioral self-management skills. A semantic differential was administered before intervention, after the first training session, and at a one month follow-up.

Results: Subject number one's dosage dropped from thirty milligrams (two weeks prior to intervention) to five milligrams (follow-up two months later). Marijuana usage decreased and hard liquor and other drug use (LSD, amphetamines, barbituates) was absent. Self-perception on the semantic differential dimension of "nervous, tense, anxious - calm, relaxed" revealed high scores the week before the intervention, and reductions in anxiety during and after treatment.

Subject number two's dosage had been stabilized at 40 milligrams for 11 weeks prior to intervention. He was "rather unconfident" about his ability to succeed in detoxifying from methadone. However, after three weeks of formal meditation he decided he wanted to begin lowering his dosage, and stated he was "fairly confident" about his ability to succeed. His dosage dropped from 40 milligrams to fifteen milligrams (two days prior to follow-up), but was raised to 30 mg the day of

follow-up because of heroin usage. Valium dosage decreased. No LSD, amphetamines, hard liquor, or barbituates were used. Marijuana usage dropped from an average of four times a week before the intervention to 0. Semantic differential self-perception revealed improvement during treatment, but decreased slightly on the follow-up.

Discussion: While S number one was detoxing before the intervention began, the treatment intervention seemed to have some effect in helping him continue to lower his methadone dosage: e.g., teaching him a) awareness of internal tension and how to relax it; b) use of covert imagery to overcome feelings of apathy and to counter the "hot-cold" flashes which he suffered as a result of his dosage dropping below 30 mg.

Although subject number two subsequently increased his methadone dosage because of heroin use, anecdotal data revealed several possibilities and prospects for the use of meditation - behavioral self-management techniques. The techniques seemed to 1) help give him the "confidence" he needed to begin to lower his methadone dosage. 2) relax him so that he could decrease the number of valium he took and 3) give him greater awareness of his current problems and internal feelings, allowing him to both face those feelings and express them to others.

The acquisition of meditative behavior and techniques of behavioral self-management was easily achieved. Difficulties arose in attempting to maintain those behaviors in Ss' natural environment. The study further suggests how performance of meditative behavior might be facilitated in Ss' natural environment, and concludes with suggestions and guidelines for further research.

Order No. 73-30,474, 201 pages.

A microfilm or xerographic copy of the complete manuscript is available from the publisher, University Microfilms, -Ann Arbor, Michigan, at the standard prices: any microfilm copy at \$4.00, and any xerographic copy at \$10.00 plus shipping and handling and any applicable taxes.