Treatment Retention in Methadone Maintenance Programs in Indonesia: towards Evidence-Informed Drug Policy

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Abstract

Indonesia has been implementing methadone maintenance treatment (MMT) since January 2003 as a strategy to minimize HIV transmission among injecting drug users (IDU). Previous studies have shown the effectiveness of the program and also showed that the program had attracted many IDU to participate. However, the dropout rate, particularly in Jakarta clinics, was relatively high. The first aim of this study was to investigate the MMT retention rate and its predictive variables. The second aim was to examine the effects of remaining in the program on treatment outcomes. A six-month longitudinal prospective cohort study was conducted at the client level and a cross-sectional survey was carried out at the clinic level. Information from this study provides significant inputs for developing drug treatment policy and improving its quality of service in Indonesia. It also contributes to a better understanding of the substitution treatment implementation in Indonesia.

The average 3-month treatment retention rate was 74.2 percent and the 6-month retention rate was 61.3 percent. There was no significant difference in retention rates between clinics. Significant predictors of treatment retention in MMT in Indonesia were size of dose, the interaction between take-home dose and clinic experience, age of participant, participant’s belief towards the program and perceived accessibility, while a variable representing perceived peer support unexpectedly predicted an increased likelihood of prematurely leaving the treatment.

This study showed a marked reduction in the use of heroin and depression status and a significant improvement of self-efficacy at the follow up times among participants who continued in treatment. There were no significant differences in criminal involvement and physical health status between those who remained in treatment and the treatment dropouts in both follow-up interviews. Nevertheless, there was a significant improvement in physical health from baseline to follow-up in both groups.

The study concluded that retention rates of MMT in Indonesia were comparable to those of similar programs in other countries. As previously reported in other settings, dose was the primary predictor of treatment retention in Indonesia. A policy of providing take-home doses, prescribed in experienced clinics, was also found to be a significant predictor of remaining in treatment. Further research, however, is still needed to explain some of the unexpected observations.

Key words: methadone maintenance treatment, treatment retention, predictive variable
Thesis Declaration

This work contains no material which has been accepted for the award of any other degree or diploma in any university or other tertiary institution and, to the best of my knowledge and belief, contains no material previously published or written by another person, except where due reference has been made in the text.

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..the place where I learned a lot about substance related disorder
..the events when I had chances to develop my skills
..the people with whom I shared knowledge and feeling
The best mind-altering drug is truth

- Lily Tomlin (b.1939)