

PSYCHOLOGICAL PREVENTION OF DRUG ADDICTION IN THE ARMED FORCES OF THE REPUBLIC OF CROATIA

Biserka Koren, Anto Zelić

Ministry of Defence of the Republic of Croatia

ABSTRACT

Dependence problem is becoming increasingly present in Croatian society too. The military is but a segment of it, recruiting civilians, who bring with themselves their habits and attitudes related to drinking and taking stimulants. Dependence prevention in the Armed Forces of the Republic of Croatia includes measures of primary and secondary prevention of excessive drinking and alcoholism and prevention of drug abuse and dependence.

Psychological programme of dependence prevention is based on three areas:

- 1. working with young servicemen*
- 2. working with active military personnel responsible for young servicemen*
- 3. working with active military personnel and civilian employees in the military*

Working with young servicemen is directed towards primary and secondary prevention of drug and alcohol addiction. Primary prevention involves efforts to avert the "healthy", unaffected population from starting taking drugs and alcohol.

Secondary prevention aims at minimizing the risk of onset of addiction with young servicemen who have engaged into experimental use or display symptoms of alcohol abuse but have not developed addiction.

The program for young servicemen is conducted during their basic, specialist and final training, that is throughout their service term.

The program for active personnel responsible for young servicemen is conducted at two levels, the first involving modification of their own attitudes towards alcohol abuse, alcoholism and drug abuse, whereas the second is about training in timely recognition of young servicemen with alcohol and drug problems and in reacting appropriately.

With active military personnel and civilian employees primary and secondary prevention is applied as described, complemented with a special instruction for commanders on drinking and addiction problems.

The prevention programme is in general a continuous one, and it also includes training of military psychologists in institutions in Croatia specialized for dependence and alcoholism treatment.

INTRODUCTION:

The worldwide problem of drug dependence is present in Croatia too, and is growing more and more serious. The World Health Organisation data place alcoholism third on the list of fatal illnesses, preceded only by coronary diseases and malign tumors. Epidemiological situation is as follows: 15% adult male population affected with alcoholism, another 15% manifest excessive drinking (Hudolin, 1989). Studies revealed drug abuse in 5% urban adolescent population, and 20% population over 16 have tried drugs (Sakoman, 1995).

The situation is scarcely different in the Armed Forces, recruited as they are from civilians, some among whom will bring their drinking and substance use habits to the military. With regard to the alcoholism and other dependence problems, military population can be categorised as follows: young servicemen and active duty personnel. Young servicemen are expectedly more likely to manifest maladaptive behaviour, including alcohol and substance abuse and addiction.

Active duty personnel, on the other hand, displays a wide range of demographic characteristics, which implies different problem distribution as a function of age and customs relating to substance use.

While working on its own Prevention Programme, the Department of Military Psychology sought reference in methodological guidelines, respective reference, and in the National Program for Prevention of Substance Abuse (by Croatian Government Board for Prevention of Substance Abuse, 1955). Substance prevention is guided by the fact that the extent of dependence (number of addicts) is a function of the supply and the interest in taking substance. Therefore, the Prevention Programme by the Department of Military Psychology addresses the demand for substances, and thus the factors of interest in taking them, by means of primary and secondary prevention measures.

Primary prevention of drug and alcohol dependence: conducted to prevent healthy, non-affected population from starting to take substance and excessive drinking. Primary prevention measures shouldn't employ sensationalist approach, but rather

- * encourage and support healthy behaviour and life styles, attaining social skills and healthy problem coping strategies

- * dispel attitudes and perceptions on addict behaviour as positive and anti-authority and also the non-harmful perception of drugs and alcohol

- * provide intimidation-free training containing objective information on hazards and effects of substance and alcohol use on health and on social functioning

- *the training should always address hazards of alcohol, substance and nicotine use side by side with the consequences

- *undertake intensive campaigns following the instances of drug use and excessive alcohol among young servicemen

Secondary prevention is focused on minimizing the risk of development of addiction in new, curiosity-driven and regular users, as well as those manifesting symptoms of alcohol abuse, through appropriate intervention and continuous psychological counselling.

**PSYCHOLOGICAL PROGRAMME OF PREVENTION OF DEPENDENCE IN THE
ARMED FORCES OF THE REPUBLIC OF CROATIA**

Psychological prevention programme is based on 3 subprograms; one comprising prevention with young servicemen, and the other two intended for active duty personnel, those interacting with young servicemen, and the general active personnel

Psychological prevention program for young servicemen	Psychological prevention program for active duty personnel	Psychological prevention program for active duty personnel
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PSYCHOLOGICAL PREVENTION PROGRAM FOR YOUNG SERVICEMEN

By the time they join the military young servicemen have already built an attitude relating to substance abuse. The 10-month service period, as expected, allows little time for solving the abuse and dependence problem. Psychological prevention programmes for young servicemen address the healthy population, susceptible at this particular age and open to attitude change. The objective of primary and secondary prevention with young servicemen are healthy attitudes on substance and psychoactive drugs healthy and resistant either to persuasion by peers who occasionally take substances, or to ill-conducted prevention programs.

Prevention programme for young servicemen is conducted on several training levels (basic and specialist training) by military psychologists. It involves counselling platoon commanders on watching for risk factors of maladjustment and substance and alcohol abuse symptoms in young servicemen, and also instruction of servicemen on the dependence issue (in compliance with the primary prevention of dependence), and psychological counselling of servicemen manifesting maladaptive behaviour. Organisation of substance-proving tests, when necessary, is a co-work of military psychologists and physicians.

**PSYCHOLOGICAL PREVENTION PROGRAM FOR ACTIVE DUTY PERSONNEL
INTERACTING WITH YOUNG SERVICEMEN**

Prevention of dependence intended for young servicemen comprises specific measures (instruction of young servicemen, attitude altering and psychological counselling of individuals with alcohol or substance abuse problem. Of equal importance are non-specific prevention measures, including improving the relationships and communication among commanders at different levels, the young servicemen-commanders communication, free time organisation, psychological counselling for servicemen manifesting problem or maladaptive behaviour other than substance abuse.

Commanders interacting with young servicemen make a significant factor in prevention of dependence in this population, hence the importance of quality instruction of commanders on effective communication, adolescence, maladaptive behaviour and dependence.

Instruction of commanders on the dependence issue by military psychologists takes place at 2 levels:

level 1: altering the commanders' attitudes on alcohol abuse and alcoholism, substance "experimenting" and abuse, complemented with promotion of healthy life styles and problem coping styles, and at the same time their attitudes on such behaviours among themselves or among young servicemen

level 2: instruction directed at timely perception of servicemen with alcohol and substance problems, and at appropriate responding to such instances (inappropriate "over-responding", namely, can only aggravate the problem, for instance result in labelling somebody "a hero" and hence an identification model, whereas "under-responding" can encourage others to try substances.

Evaluation of the training on dependence is carried out by means of the questionnaires "Attitudes on dependence" and "Dependence information" administered at the beginning and upon completion of the 1-year training cycle.

In addition, suggestions are provided to commanders on how to deal with servicemen manifesting dependence-related symptoms.

PSYCHOLOGICAL PROGRAMME OF PREVENTION OF DEPENDENCE FOR ACTIVE DUTY PERSONNEL

Active duty and civilian personnel is made up mostly of men aged 20-60, and in the dependence regard much reflects the civilian population. which implies the alcohol problem present side by side with the substance problem. The problem is manifested differently across units as a function of age and regional features in this regard, and other factors affecting supply and demand of substances.

Individuals with problem behaviour related to alcohol and other types of dependence that loose soldier efficiency are responsible for increased number of incidents and undermine system safety. The dependence problem thus grows from the individual problem into a public, reflecting on safety, psychological combat readiness and also on the public perception of the Armed Forces.

This population can be approached through specific and non-specific measures of the aforedescribed frame of primary and secondary prevention. Military psychologists will provide semiannual instruction on alcoholism and dependence problem, underlining the hazards and the consequences involved, and promoting healthy life styles and coping strategies.

Commanders should in addition be counselled on specific topics related to treatment of maladaptive individuals manifesting alcohol or substance use. The counselling should convey a clear and convincing message of non-tollerability of alcohol and substance abuse, and - at worst - dependence.

Following the incidents due to alcohol or substance abuse (dependence), military psychologists conduct individual psychological counselling and observation of the problem individual. They are not commissioned to treat addicts, but to provide counselling within the frame of secondary prevention of dependence, and in a mutual effort with the unit commander and physician to get addicts to treatment.

PROGRAMME EVALUATION

Psychological Programme of Prevention of Dependence is evaluated annually by the Department of Military Psychology, based on reports by military psychologists on activities executed of the Prevention Program, on the results of evaluation questionnaires and on evaluation meetings, if necessary.

CONCLUSION

The critical fact of dependence prevention in the military is that the problem is a general society problem too, and that military programs should follow the national strategy of dependence prevention tailored to the specific military population. Prevention should be conducted by experts trained in the issue, which is why military psychologists in Croatian Armed Forces attend additional training programs presented by experts of the National Centre of Dependence. The Psychological Prevention Program is a result of various incident prevention activities developed by unit psychologists and reflects the commitment to deal more effectively with the alcohol and substance dependence problem. The Program needs continuous evaluation and modification to maintain and improve efficiency.

REFERENCE:

1. Hudolin, V: *Alkohološki priručnik*, (Manual of Alcoholism) 1991, Medicinska naklada, Zagreb
2. Hudolin, V. *Alkoholizam - stil života alkoholičara*, (Alcoholism - lifestyle of alcohol-dependents) 1987, Školska knjiga, Zagreb
3. Schwebe. R., *Reći ne nije dovoljno* ("Saying no is not enough") 1995, SysPrint, Zagreb
4. Sakoman, S. , *Doktor, je li istina da trava čisti pluća*, ("Doctor, is it true that grass cleans the lungs") 1996, SysPrint, Zagreb
5. Kušević, V., *Zloupotreba droga*, (Substance abuse) 1987 Grafički zavod Hrvatske, Zagreb
6. Sakoman, S., Power R., Mimica J., *Nacionalni program za suzbijanje zlouporabe droga u Republici Hrvatskoj*, (National Programme of Suppression of Substance Abuse in the Republic of Croatia) 1995, Komisija za suzbijanje zlouporabe droga Vlade RH
7. ur: E. Klain, *Ratna psihologija i psihijatrija*, (War Psychology and Psychiatry) 1992, Glavni sanitetski stožer RH, Zagreb