

What Is the Addiction World Like? Understanding the Lived
Experience of the Individuals' Illicit Drug Addiction in Taiwan: A Critical Appraisal

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Overview

One crucial skill of healthcare professionals is to appraise qualitative research to promote evidence-based practice (Gadoud, Taylor, & Hussain, 2013). The purpose of this paper is to critically appraise the nursing research article entitled "What Is the Addiction World Like? Understanding the Lived Experience of the Individuals' Illicit Drug Addiction in Taiwan" which was conducted by a group of nurses, namely Mei-Hui Hsieh, Shu-Ling Tsai, Chang-Hsiung Tsai, Yu-Chien Hsu, and Min-Tao Hsu, and was published on Perspectives in Psychiatric care in 2017. The researchers have acknowledged the fact that illicit drug use is a problem faced globally. However, healthcare workers' lack of understanding of what the drug users' go through still exists today which affects the care provided to addicted patients. With this, the researchers did a qualitative study with 10 participants from the Therapeutic Communities for Addicts website and had identified three significant themes of addiction, which are incorrigible conduct, inexcusable compromise, and inevitable corruption (Hsieh et al., 2017).

The researchers provided an explicit statement of the significance of the study, which is "to provide a better understanding of what the world is like for people struggling with addiction and to enhance the healthcare professionals' knowledge of the individual's experience of addiction." The acquired knowledge on the drug users' experiences is essential for clinicians to

use as a framework in the plan and implementation of appropriate treatment of patients with drug addiction (Hsieh et al., 2017, p. 47).

According to Prater, Zylstra, and Miller (2002), providing pain control for patients with substance abuse disorder of some type, which constitutes 5% to 17% of the U.S. population, is a unique challenge for primary care physicians. These individuals are less likely to receive adequate pain management than individuals in the general community. It is very apparent in the medical-surgical neurosurgery unit that I am currently practicing. Spinal surgery patients, who have a drug abuse history and who presents drug-seeking behaviors, are most of the time unsatisfied with the pain management planned by the medical providers for them. It results in aggressive actions of the patients, which leaves nurses in a great dilemma and sometimes even physical danger. Stereotyping against drug users is also a common issue I see on the floor. More often, the negative attitude of the healthcare providers against drug users rooted from an unpleasant experience with an addicted patient who has shown behavioral issues or has expressed rude demands for pain medications. Healthcare providers face the conflict of believing whether the patient's pain is real or unreal due to the patient's drug abuse history. When patients get admitted in the hospital, they rarely share their experiences and struggles about addiction. It is a challenge to find the right time to discuss the issue of drug addiction with the patient and be open-minded about it because the staff already knows the patient's drug history before or upon arrival in the unit; thus adverse judgment comes before even knowing the patients' real experience. Although I acknowledge that personal bias is inevitable, I believe that healthcare providers need a deeper understanding of how drug users fall into the unfortunate cycle of addiction, the struggle of getting away from it, and how it pulls the victim back to the pit again.

The study will help widen my acceptance of the issue, decrease bias, improve patient care, and render understanding that nobody wants to be in a seemingly intractable condition of drug addiction.

Problem Statement

Although it was not explicitly stated and enumerated, the problems of the study can be easily discerned by reading through the article, mostly in the introduction and discussion sections. The issues analyzed are the global problem of illicit drug use, the lack of understanding about the world of addiction and the negative attitudes of clinical care professionals towards drug users (Hsieh et al., 2017). The troubling conditions are also very apparent in the title of the article. Jeanfreau and Jack (2010) noted that the research title generally provides insight into the research problem or concept studied, the population, and the research design, which were all observed in the heading.

An ideological perspective is defined as "the theory by which a person or a group bases their moral judgment" (Reference.com, n.d.). The qualitative researchers conduct inquiries within an ideological framework to draw attention to social problems or the needs of the informants from the Therapeutic Communities for Addicts website and to affect change (Polit & Beck, 2017). Although there was no direct mention, the research reflects a critical theory since the researchers were concerned with envisioning new possibilities. The practical implications section cited the possibilities, which are to "reduce the bias and stigmatization of those suffering drug addiction," "help healthcare professionals to better appreciate the complex reality of the world of drug addiction," and "enhance the quality of healthcare services in Taiwan."

Furthermore, Prinja (2010) believes that ideology can affect each step of the research, which will lead to the generation until final publication, and dissemination of evidence. Throughout the study, the researchers believed that addiction from the drug users' perspective and experience is unique and essential to the understanding of the healthcare professionals; thus it was the focus of the whole study from data collection to analysis.

Purpose of the Study

According to Polit and Beck (2017), the statement of purpose communicates more than just the nature of the problem where the verb selection suggests how the researchers sought to solve the problem or the state of knowledge. The statement of purpose of the study was identified in the abstract, which states "this study focuses on the participants' lived experience of addiction" (Hsieh et al., 2017, p. 47). Additionally, the researchers also aimed to discover the salient themes from an individual's journey into addiction, which can facilitate the establishment of interventions by healthcare professionals (Hsieh et al., 2017).

Research Question(s)

The researchers clearly stated two research questions, which are "what is it like for a person to be addicted to drugs?" and "what are their lived experiences of addiction?" (Hsieh et al., 2017, p. 48). The questions aimed to know the process of addiction from the initial encounter, the struggles of fighting addiction, the cycle, the feeling that addiction offers, and the real story from the people who experience it.

The researchers specifically stated that narrative inquiry, a form of qualitative research, was employed in the study. Polit and Beck (2017) noted that the focus of narrative analysis is the "story" since the object of inquiry is to investigate how the study participants make sense of events in their lives. Moreover, Polit and Beck (2017) have emphasized that the constructivist paradigm emphasizes understanding of the human experience as it is lived by collecting and analyzing the subjective, narrative materials. The narrative analyses used in the study focused on the broad contours of the drug users' stories which are not fractured and dissected. With this, the research questions discussed previously are congruent with the qualitative methodology.

Support of Literature

The review of the literature in the introduction and discussion sections of the article was thorough enough to provide a foundation the need for the study. It included statistics, studies and reports on how rampant drug addiction is throughout the world; the chronic cycle of recovery and relapse; the mental, emotional, spiritual, and physical suffering of the users, their family and the society in general; the frequent encounters of drug abusers with the criminal justice system, the public concerns which are handed over to the next generation; the vague and conflicting views on drug addiction; the lack of spiritual treatment for the addicted individuals; the lack of deep understanding of healthcare workers in helping restore those with addiction to original health; and the negative attitudes harbored by healthcare professionals towards drug users (Hsieh et al., 2017). Moreover, the review of the literature was in agreement with the analyzed problems, the purpose of the study and the research questions, which supports the validity of the study. The published literatures have provided a rationale for conducting the investigation, the

unknown phenomena of addiction, and the reasons which have encouraged the researchers to ask the questions to initiate the study.

Qualitative Research

Qualitative research is usually associated with constructivist inquiry, describes the dimensions and meanings of phenomena, gathers narrative descriptions, uses inductive reasoning, and connects concepts by the patterns of association to enlighten the underlying sense and dimensionality of phenomena. Moreover, qualitative researchers are especially interested in the contexts of people's experiences, and they often start with a fairly broad question, which may be narrowed and clarified as they go along the interview based on self-reflection and discussion with the informants. In terms of the size of the participants, qualitative studies almost always use small, nonrandom samples (Polit & Beck, 2017).

The overall purpose of conducting the study is to understand the lived experience of addiction (Hsieh et al., 2017). The use of the qualitative research in this study is justified because the purpose of the research study is to seek descriptive, in-depth insights into a phenomenon, which is addiction, where little is known from the perspectives of the drug users and the methodology is appropriate for the research question (Jeanfreau & Jack, 2010). The researchers started with broad questions of "what is it like for a person to be addicted to drugs?" and "what are their lived experiences of addiction?" (Hsieh et al., 2017, p. 48) and ended with more specific, open-ended questions such as "tell me the story of your addiction," "talk about when you first started using drugs," "what was life like at the time?" and "what effects did you get from illicit drugs?" (p. 49).

Type of Qualitative Research Design

Narrative inquiry, a form of qualitative research, was used in the study (Hsieh et al., 2017). Ison, Cusick, & Bye (2014) discussed that narrative inquiry's premise is that listening to the stories of other people can make sense of their experience and understand how they establish meaning in a broader social context. Additionally, the data collection is usually through an interview which produces an individual story for each study participant. The purpose of a narrative inquiry is to reveal the interpretations of the individuals' experiences in opposition to objective, decontextualized truths (Wang & Geale, 2015).

Narrative inquiry facilitated the answering of the research questions because narrative research effectively makes sense of the informant's addiction world and communicate these meanings by constructing, reconstructing, and narrating stories (Polit & Beck, 2017). The narratives helped illuminate the intricacy of the phenomena, which is drug addiction, and the paradigms that shape the informants' experiences based on how they identify themselves. Furthermore, in narrative inquiry, the researcher asks questions to help them elucidate and gain insight into the world of the participant rather than try to explain or predict that world, which allowed the nurse researchers an "insider view" (Wang & Geale, 2015).

The sample for the Study

Polit & Beck (2017) stated that purposive sampling entails selecting participants who will most benefit the study while convenience sampling chooses participants who are most conveniently available. Both purposive and convenience sampling techniques were used in the

study (Hsieh et al., 2017) where the recruited participants were from the Therapeutic Communities for Addicts website. There were 10 participants, composed of seven males and three females. The authors also added the inclusion and exclusion criteria in the report. Moreover, to be included, the participant should be or used to be addicted to illicit drugs and were either in recovery or had already recovered. On the other hand, illegal substance users, who are not in recovery, were excluded since the primary consideration of recruitment is the stability of the participant's condition.

I believe that the sampling plan was identified clearly and guided by the needs of the study. The study aimed to understand the lived experiences of people with a drug addiction problem and the best way to reach this goal is to interview participants who are suffering from illicit drug use, were in recovery and who are willing to share their experiences. Although sampling by convenience is both easy and efficient, it is not the preferred sampling approach in the opinion of Polit & Beck (2017) as it may not provide the most information-rich sources. However, I think that the topic of drug addiction is a sensitive issue and convenience sampling have helped the researchers address the difficulty of recruiting participants.

Sampling Technique

Before the beginning of the study, a formal ethical approval from the research institution's ethics committee of Institutional Review Board of Chung Shan Medical University Hospital. The recruited participants from the Therapeutic Communities for Addicts website, which was established by Taiwan's Ministry of Justice as part of the Refrain from Drugs anti-drugs campaign. The interviewers explained the study purpose to the organization to get the support

and the interviewees' verbal permission, but the mode of explanation, whether individually or as a group or whether through letters, email or phone, was not stated. The illicit drug addiction sufferers who consented to be key informants of the study were in recovery and were willing to share their experiences (Hsieh et al., 2017). The achievement of data saturation was indicated by the researchers, with a total of fifteen in-depth interviews with seven men and three women. All of them were recruited through both purposeful and nominated sampling techniques (Hsieh et al., 2017). The guiding principle of data saturation is "sampling to the point at which no new information is obtained, and redundancy is achieved" (Polit & Beck, 2017, p. 914).

In my opinion, the small sample size of 10 study participants with seven men and three women reflect the qualitative tradition of phenomenological study. The basis is the discussion of sampling in phenomenological studies by Polit & Beck (2017, p. 917). It states that phenomenologists are prone to relying on small samples which is often 10 or fewer participants and are guided by one principle in sample selection which is "all participants must have experienced the phenomenon and must be able to articulate what it is like to have lived that experience."

Key Characteristics of the Study Population

Polit & Beck (2017) noted that it is often useful to provide a table summarizing participants' key characteristics despite having a small sample size. It is true for this study as researchers presented the participants' background in table 1 where it shows the critical characteristics of age, gender, years of illicit drug use, and years in recovery (Hsieh et al., 2017).

The method section should provide a good description of the research setting so that readers can assess the transferability of findings.

Transferability or the case-to-case translation involves judgments about whether findings from an inquiry may be extrapolated to a different setting or group of people. However, thick description, which refers to "richly thorough depictions of research settings and the sample of study participants" is needed in qualitative reports to reinforce transferability. Only half of the six ideal descriptions of qualitative reports to facilitate transferability as suggested by Polit & Beck (2017) were met, including the type of sampling approach used, eligibility criteria for inclusion in the study, and the number of participants with a rationale for the sample size. The other three details were either lacking or missing, including the nature of the setting or community, the main characteristics of participants, and the period of data collection. Although the researchers listed some key characteristics and it clearly stated that the participants were recruited from a committee of drug users, the type of the drug the participants used was not clarified (Polit & Beck, 2017). According to the National Institute of Drug Abuse (2018), due to the complexity and pervasive consequences of drug addiction, its treatment typically must involve many components which focus directly on the individual's drug use. Therefore, in the context provided about the participants, it did not allow for an assessment of the transferability of the study's findings.

Data Collection Procedures

Although the descriptions of the data collection procedures given in the article were enough for the process to be understood, I believe it is not sufficient and more details could have

been added to make some gray areas clearer. In-depth interviews, observation of the participants, and field notes were the multiple sources of data collection. The researchers described that the first author conducted all the interviews and it was recorded then later transcribed, but did not specify if the interviews were done personally, by video or by telephone. Open-ended questions were raised, and interview duration was unlimited as it was "within the constraints of the interviewee's free time and willingness to talk" (Hsieh et al., 2017, p. 49). The researchers have also stated that research ethics was observed by gathering ethical approval from the committee, the participants involved in the study and the Institutional Review Board of Chung Shan Medical University Hospital. However, the data collection did not specify when the interviews were done, the venue of the interviews, how the researchers communicated with the interviewees to set up the interview schedules, who prepared the questions and how it was prepared, and if incentives were utilized. Polit & Beck (2017) argued that because the collection of qualitative data do not use formal instruments, discussion about data collection methods is less.

Data Collection Instrument

Based on the explanation by Polit & Beck (2017) that researchers in semistructured interviews prepare a list of areas or questions to be covered with each participant, it can be analyzed that the researchers used this type of interview instrument. However, it would have been helpful to the readers if the proper type of interview was stated to avoid false conclusion on the appraisal. Even though a direct statement from the researchers in the usage of a guided or semistructured interview is lacking, it was mentioned that open-ended questions were used and examples of specific questions were also given in the article. Some of the questions raised were

"tell me the story of your addiction," "talk about when you first started using drugs," "what was life like at the time?" and "what effects did you get from illicit drugs?" (Hsieh et al., 2017, p. 49). The questions were appropriate and comprehensive enough to draw out response as seen on the verbalizations of the informants which are shared in the article. Although only a few of the guided questions were listed by the researchers, the wording of the sample questions does not lead the informants to suggest an answer thus the risk of bias was minimized. Moreover, the examples of the questions used did not require one- or two-word responses, thus giving the informants the opportunity to impart rich, detailed information about the phenomenon under study (Polit & Beck, 2017). The researchers stated that the interviews were not time-limited to encourage the participants to talk freely about all the topics and to tell stories in their own words. Polit & Beck (2017) recognized this positive technique which will gather all the essential information and gives the informants the freedom to share as many illustrations and explanations as they wish.

Data Collection

There was no clear statement as to the modality of obtaining the data. Despite the information given that the interview was recorded and transcribed, the researchers did not clarify whether the interview was done face-to-face, via video calls, or by telephone. With this regard, it is difficult to fully assess whether the modality was appropriate for the qualitative research method. However, the reviewers also admitted having used participant observation and field notes as part of the data collection process. According to Polit & Beck (2017), participant observation is an appropriate method if the key research objective is to learn how a group's interactions and activities could give meaning to human behaviors and experiences; therefore this

is the not right type of unstructured observation for the study. Regarding the field notes, Polit & Beck (2017) emphasized that the importance of field notes are not only limited to studies involving participant observation but also to many different study types, therefore, it is crucial in this study because they are more extensive, more analytic, and more interpretive than a simple listing of occurrences. Additionally, no information was provided in the article about timeframes for the researcher to complete fieldwork or collect the research data.

Recording of Data

The researchers have noted that each of the interviews was recorded by the interviewer and then later transcribed (Hsieh et al., 2017). However, if it was not specified how the transcription was done, either manually by a person or through an automatic software transcription; and who completed the transcription. Additionally, it was not clear whether the audio was from a plain audio-recording or a video-recording for there was no detail of how the interview was done or how the type of recording performed. The appraisal of data recording for this study is difficult as there was no substantial data provided by the researchers on the process of recording and transcribing the data gathered. In another note, Polit & Beck (2017) have strongly recommended that qualitative interviews be recorded and subsequently transcribed rather than just relying on interviewer notes to ensure that interview data are the actual verbatim responses of the participants. In this light, while recording was done, it was not detailed whether transcription was done subsequently as the terms "later transcribed" can denote vagueness of the exact flow of events.

Observational Data and Field Notes

No direct statement was found to denote that observational data and field notes were recorded. This sentence "this research is based on the data gathered from multiple sources, including the in-depth interviews, participant observation, and field notes" (Hsieh et al., 2017, p. 48) only indicates that participant observation and field notes were part of the data collection process. It can affect the readers' confidence in the study's data as Polit and Beck (2009) considers the complete and vivid recording of information as essential. Additionally, when researchers share decision trail information in the report, it helps the readers to evaluate the soundness of decisions better and draw conclusions on the trustworthiness of the findings.

Data Analysis

The researchers have adopted and modified Agar and Hsu's statement of data analysis, which was presented in the report through an illustration labeled as Figure 1. Data Analysis Process of Study. Adequately describing the data analysis procedure is difficult and may create bias because there was no written description of the illustration in the report. Illustrations could be taken subjectively by the readers or could be understood differently by those who are not familiar with the models of Agar and Hsu. Polit and Beck (2017) explained that the particularly challenging enterprise of qualitative data analysis is due to the lack of universal rules. The absence of standard procedures makes it complicated to explain how the analysis should be done as well as cause difficulty for researchers to describe the analysis procedure in the report.

As a further matter, although the researchers stated that they have independently reviewed and analyzed the interview transcripts to examine themes of the experiences of addiction, the technique, either manual or by use of a computer program, in indexing and

organizing the data was not stated in the report. Additionally, it was distinctly pointed out in the report that two of the researchers did the initial analysis, then subsequently reflected and discussed each of their analyses in a meeting, but there was no information about the following analysis and the total number of people who were involved with it. Regarding assuring the accuracy and completeness of the data, the authors reported having reduced bias through observing reflection, intersubjectivity, and coherence during the process of study (Hsieh et al., 2017).

Specific Findings of the Study

The presentation of the findings was done through thick descriptions with the judicious inclusion of rich verbatim quotes from study participants. The researchers have analyzed three central category scheme of addiction, referred as "themes" in the report, which are incorrigible conduct, inexcusable compromise, and inevitable corruption. Each of the themes was expanded in subsections where further accurate explanation. The themes were able to capture the meaning of the narratives because the researchers adequately interpreted the data and conceptualized the themes. There were clear descriptions of each theme. First, incorrigible conduct is the stubborn adherence to the substance which is the first phase of the addictive life. Second, inexcusable compromise is the trapped life of drug users where the trap cycle of using or love and stopping or hate. Third, inevitable corruption is the tragic descent where an "endless emotional tug of war between love and hate" occurs (Hsieh et al., 2017). The lucid and textured descriptions and the interpretive writing of the authors brought a meaningful and insightful picture of the addiction, which is the phenomena under study. The relevant excerpts provided in the report were used in

an evidential fashion to support or illustrate the researchers' interpretations and thematic construction (Polit & Beck, 2017).

Furthermore, the inclusion of direct quotes illustrated the intended essential points of the findings in which Polit and Beck (2017) reckoned to be necessary as it emphasizes the voices, actions, and experiences of participants, so the readers will be able to gain an appreciation of their lives and their worlds. The diagram of the data analysis procedure was openly displayed to communicate the process; however, it is not sufficient on its own as there was no detailed explanation of the figure given thus creating possible confusion and bias. About the findings, as part of the illustration provided, data reduction was made before categorization which leads the outcome of thick descriptions and interpretive writings reflecting the research questions. Overall, the presentation of the research findings showed logic, consistency, and coherence. The format of the three subsections was similar in each theme, the explanations were relevant to the topic in focus, and the reasons provided were easy to follow with each supported by verbatim of the key informants.

Understanding the Topic

The concise and straightforward writing has promoted an adequate understanding. Although the overall structure is relatively standard, the organization within sections and subsections were given proper attention by the authors, which are one of the qualities of a well-written report according to (Polit & Beck, 2017). Besides, the writing sequence was in orderly progression with appropriate transitions.

Upon reading the article, especially the findings, the writing was very effective as it was able to imaginatively draw the reader to the world of addiction as perceived by the drug users. The experience of the participant was laid out using words that vividly described each of the significant themes of addiction. The reader was able to grasp an understanding of the unknown phenomenon of addiction through the clear, concise, and rich thick descriptions and verbatim in the report. The context of addiction was adequately described in the report through the elaborate discussion of each of the three major themes of addictions as well as the inclusion of the quotes from the informants themselves. According to Wang and Geale (2015), a narrative inquiry is not merely storytelling, but a strategy of investigation that utilizes storytelling to uncover nuance.

Moreover, as a reader, the report has provided a clear picture of the social and emotional world of the study participants through narrative inquiry. Understanding the addiction experience through narrative inquiry allowed the researchers an "insider view" which have arisen a deeper understanding of the participant's perspective. The "insider view" revealed subjective truths for the participants within their social context (Wang & Geale, 2015). All these including the emotions of the participants about their problem of addiction was conveyed efficiently by the authors in the report. The narrative inquiry presented in the report reflected John Dewey's, a philosopher of experience and an educational theorist, three-dimensional space narrative structure approach of interaction (personal and social), continuity (past, present, future) and situation (place) (Wang & Geale, 2015).

Implications for the Study

Practice implications were included in the article. The researchers noted that a deeper understanding of world drug addiction and the drug user's experiences, learning is an understatement. The study will bring change to the healthcare professionals' beliefs which will facilitate better communication, greater empathy, and improved delivery of healthcare interventions. Moreover, learning and appreciating the drug user's life has reduced bias and stigmatization of drug addiction sufferers. The authors envisioned that the study would help increase the appreciation of healthcare professionals towards the complex reality of the world of drug addiction. Other than that, the researchers have also implied that through the study's findings of holistic account on the lived experiences of the participants' journey of addiction, the quality of healthcare services in Taiwan will be enhanced (Hsieh, et al., 2017).

Given that the study participants are from a committee of drug users with unclear information of each individuals' settings, the transferability of the results is questionable. However, in the context of understanding the world of addiction in general, the findings have relevance to other people who are also suffering from addiction. Concerning relevance to a specific situation such as the type of illicit drugs, the connection is vague as there was no categorization under the background of the participants.

The application of the results to clinical practice refers to the relevance of the findings to a specific clinical setting which means the "best practice evidence can most readily be applied to an individual patient in your care if he or she is similar to people in the study or studies under review" (Polit & Beck, 2017, p. 87). The study participants were either at the recovery phase or over the recovery phase and are addicted to illicit drugs, as part of the inclusion criteria. It shows

that the results apply to patients who have recovered from addiction or currently fighting the issue. However, even though the researchers defined illicit drug use as "substance abuse" where substances are either alcohol or drugs, they did not categorize the participants according to the abused substance, thus the relevance of the findings to patients who are addicted to a specific type of substance cannot be fully realized. The Addiction Center (2018) has identified ten different most common form of illicit substance which gives different effects and experience to the user, including cocaine, marijuana, and meth, to name a few.

The Addiction Center (2018) referred to the beginning of an illicit substance abuse disorder with a noticeable physical dependence which is recognized by "tolerance to and withdrawal symptoms from the drug of abuse." The second part of the abuse disorder is the psychological dependence on the substance characterized by "a desire to stop using the drug, as well as prioritization of its use over social and familial responsibilities." In my clinical practice, drug addiction is based on the patient's' history and honest statement of the problem. There is no standard practice by the medical providers to diagnose a patient of drug abuse disorder. Therefore, the direct application of the findings with the consideration of the specificity of the type of illicit drug and state of addiction is vague. However, since the results were able to communicate a better understanding of the world of addiction, the deemed drugs users in my clinical practice will benefit from a more open-minded approach to care delivery in general.

References

- Addiction Center. (2018). *Understanding Illicit Drugs*. Retrieved from <https://www.addictioncenter.com/drugs/illicit-drugs/>
- Gadoud, A., Taylor, P. & Hussain, J. (2013). *How to appraise a qualitative study*. *British journal of hospital medicine*, 74, 271-4. doi: 10.12968/hmed.2013.74.5.271
- Hsieh, M., Tsai, S., Tsai, C., Hsu, Y., & Hsu, M. (2017). What Is the Addiction World Like? Understanding the Lived Experience of the Individuals' Illicit Drug Addiction in Taiwan. *Perspect Psychiatr Care*, 53, 47-54. doi: [10.1111/ppc.12136](https://doi.org/10.1111/ppc.12136)
- Ison, N., Cusick, A., & Bye, R. A. (2014). *Techniques to tell the real story: narrative inquiry in health services research*. *BMC Health Services Research*, 14(2), 22. doi:10.1186/1472-6963-14-S2-P22
- Jeanfreau, S. G., & Jack, L. (2010). Appraising qualitative research in health education: guidelines for public health educators. *Health promotion practice*, 11(5), 612-7.
- NIDA. (2018). *Principles of Drug Addiction Treatment: A Research-Based Guide (Third Edition)*. Retrieved from <https://www.drugabuse.gov/publications/principles-drug-addiction-treatment-research-based-guide-third-edition>
- Polit, D. F., & Beck, C. T. (2009). *Essentials of nursing research: Appraising evidence for nursing practice* (7th edition.). Philadelphia: Wolters Kluwer.
- Polit, D. F., & Beck, C. T. (2017). *Essentials of nursing research: Appraising evidence for nursing practice* (10th edition.). Philadelphia: Wolters Kluwer.

- Prater, C. D., Zylstra, R. G., & Miller, K. E. (2002). Successful Pain Management for the Recovering Addicted Patient. *Primary care companion to the Journal of clinical psychiatry*, 4(4), 125-131.
- Prinja, S. (2010). Role of ideas and ideologies in evidence-based health policy. *Iranian journal of public health*, 39(1), 64-9.
- Reference.com. (n.d.). *What Is Ideological Perspective?*. Retrieved from <https://www.reference.com/world-view/ideological-perspective-2d403b3704660f59>
- Wang, C. C. & Geale, S. K. (2015). *The power of story: Narrative inquiry as a methodology in nursing research*. *International Journal of Nursing Sciences*, 2(2), 195-198. doi: 10.1016/j.ijnss.2015.04.014.