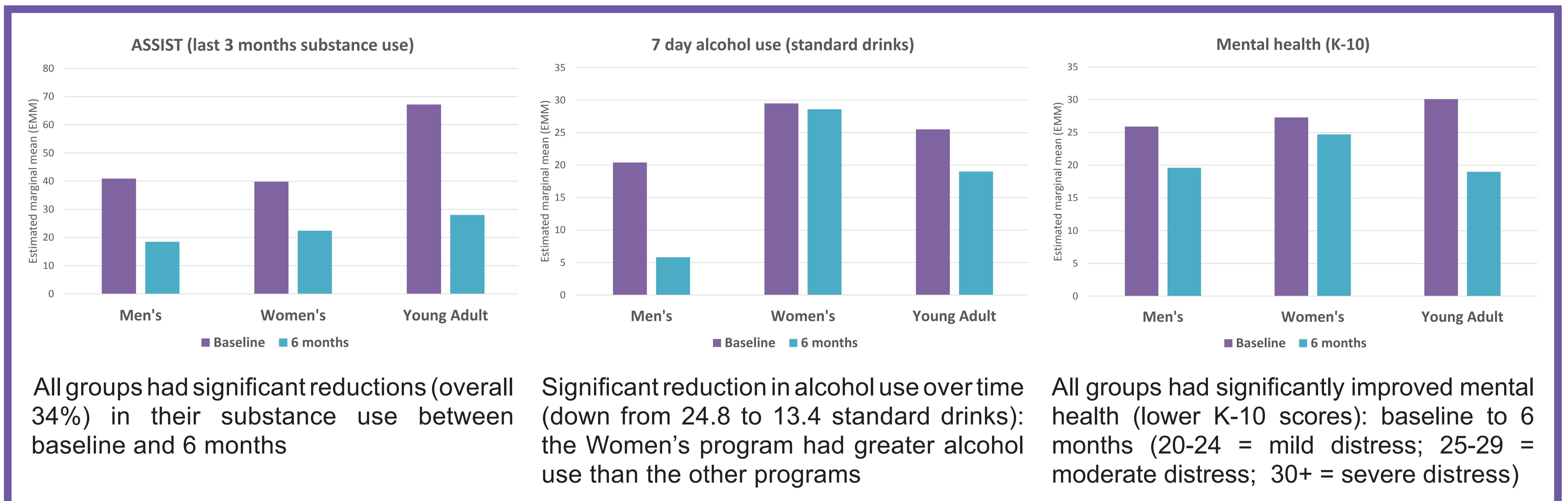


EVALUATION OF HOLYOAKE GROUP PROGRAMS FOR PEOPLE PRESENTING WITH ALCOHOL AND OTHER DRUG USE

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- 136 clients (Men's program=84; Women's program=34; Young Adults program=18)
- Age: median 34 years (IQR 28-41): 71% ♂
- Primary drug of concern: alcohol (41%); methamphetamine (27%); cannabis (15%)
- Treatment: median of 4 sessions (IQR 1-9)
- Follow-up: 61 (45%) at six months

Significant baseline to 6 months improvements: *Reference value* (estimated marginal means)

- Wellbeing (55 to 70.2) *Australian normative range 73.4 – 76.4*
- Social networks (14.1 to 17.3) *<12 = social isolation*
- Self-esteem (2.9 to 3.8) *mean 3.8*
- Days out of role due to substance use (3.5 to 1.6) *mean 3.2 days*

Introduction and Aims

Treatment services are required to record the progress by clients at each session, but long-term treatment outcomes are not routinely collected.

The aim of the evaluation was to assess outcomes at six months in terms of:

- 1) substance use, and
- 2) psychosocial outcomes.

Measures

At baseline and six months we collected the following information:

- ASSIST (substance use)
- 7 day alcohol use
- Mental health (K-10)
- Wellbeing Index
- Lubben Social Networks
- Self-esteem scale
- Days out of role.

Method

Counsellors recruited clients. Researchers independent of the service collected six-month outcomes by telephone. Psychotherapy involved individual and/or group counselling.

Analysis: Generalized estimating equations (GEE) controlling for number of treatment sessions.

“
I love Holyoake – it is the best thing ever. It's fantastic – excellent service.

I love 'em. I can't speak highly enough of them. I'd recommend them to everyone.

It's a great service, helped me control my urges. It's extremely helpful – I recommend it.



Discussion and Implications for Practice

Improvements were evident in terms of reduced alcohol and other drug use. In addition, improvements on a range of psychosocial outcome measures occurred, including wellbeing and mental health. Of particular note were the clinically important improvements in mental health and an overall one-third reduction in substance use.

However, the difficulty in retaining participants, especially young adults, means that these findings should be interpreted with caution.

The finding that participants attend relatively few sessions (median 4) highlights the tension between providing a comprehensive structured program and addressing critical issues and skills in the initial treatment sessions. Assertive follow-up should be considered to improve engagement and ease re-entry into programs.

Note: Funding for the project was provided by Holyoake