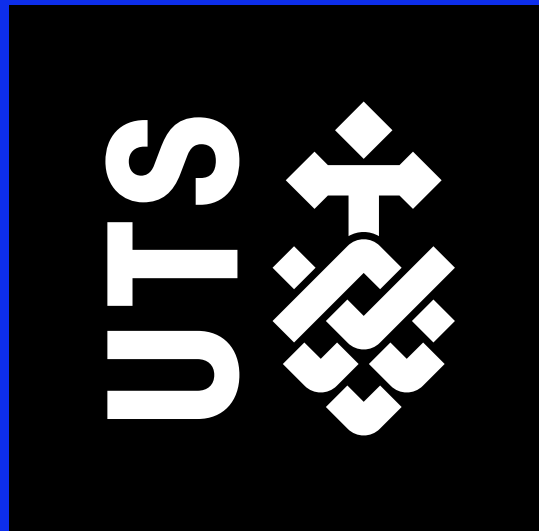


Are residential rehabilitation clients representative of Australians who engage in problematic Alcohol and Other Drug use?



Rosemaree K. Miller¹, Carmen Iancu², Julie Babineau² and Toby Newton-John¹
¹Graduate School of Health, University of Technology Sydney, Australia
²Odyssey House NSW, Australia

AIM

To examine whether clients entering residential rehabilitation at Odyssey House NSW are representative of Australians who receive treatment for problematic Alcohol or Other Drug (AoD) use.

BACKGROUND

Problematic use of AoDs is a health issue worldwide. In Australia, substance use and other mental health disorders are estimated to be the leading cause of non-fatal disease burden¹. In the Australian context, residential rehabilitation based on the Therapeutic Community (TC) model of treatment is one way in which problematic AoD use and comorbid issues have been addressed. Clients with complex needs may benefit from the TC approach due to the holistic approach towards harm reduction, mental health, and social functioning often taken by these types of residential programs². TC programs targeted at problematic AoD use may be especially effective at addressing the sociocultural factors that accompany severe substance abuse, such as declines in relationship skills and maintaining a regular daily routine.

THE THERAPEUTIC COMMUNITY

Odyssey House NSW is a not-for-profit organisation that provides rehabilitation services for individuals with problematic AoD use. The TC component of the Odyssey House NSW residential program has been in operation for more than 40 years.

METHOD

- Participants were a convenience sample of residential clients who entered the TC between 1st September, 2017 and 31st August, 2018.
- Demographic and drug use data were collected from 117 participants (78 males); X (X%) declined to participate in this study.
- These data were compared to 2016-17 national AoD statistics reported by the Australian Institute of Health and Welfare (AIHW) in their most recent report³ and data-sets⁴ on AoD treatment services in Australia.

References

¹ Ciobanu, L. G., Ferrari, A. J., Erskine, H. E., Santomauro, D. F., Charlson, F. J., Leung, J., Amare, A. T., Olagunju, A. T., Whiteford, H. A. & Baune, B. T. (2018) The prevalence and burden of mental and substance use disorders in Australia: Findings from the Global Burden of Disease Study 2015. *Australian & New Zealand Journal of Psychiatry*, 52(5): 483–490. doi: 10.1177/0004867417751641

² Magor-Blatch, L., Bhullar, N., Thomson, B. & Thorsteinsson, E. (2014) A systematic review of studies examining effectiveness of therapeutic communities. *Therapeutic Communities: The International Journal of Therapeutic Communities*, 35(4): 168–184. doi: 10.1108/TC-07-2013-0024

³ Australian Institute of Health and Welfare (2018). *Alcohol and other drug treatment services in Australia 2016–17*. (Drug Treatment series, no. 31) Cat. no. HSE 207. Canberra: AIHW.

⁴ Australian Institute of Health and Welfare (last update 5/06/2018, v3.0). *Alcohol and other drug treatment services in Australia 2016–17: Data*. Retrieved from <https://www.aihw.gov.au/reports/alcohol-other-drug-treatment-services/aodts-2016-17/>

RESULTS

Demographic information

- Percentages from the AIHW were calculated based on 2016-17 data provided for clients receiving treatment for their own AoD use⁴ (N=193,031),
- The percentage of male clients in our sample (66.7%) was on par with the 2016-17 averages for own AoD use clients (65.3%).
- Most participants were Australia-born (n=100, 85.5%), another finding consistent with the AIHW findings (87.5% of sample).
- The median age of clients (Med=32 years, IQR=25-38 years) was equivalent to the 2016-17 national median³ age (Med=32 years).
- The age of most participants fell within the 20-39 year age range (n=90, 76.9%). This proportion was higher compare to the 2016-17 average⁴ (56.6% of sample).

Drug use

	N = 117	AIHW 2016-17 ³
Alcohol	n = 27 (23.1%)	32.3%
Amphetamine-type stimulants (ATS)	n = 65 (55.6%)	25.7%
Cannabis	n = 8 (6.8%)	21.7%
Heroin	n = 11 (9.4%)	5.2%
Other opioid	n = 3 (2.6%)	3.3%
Cocaine	n = 3 (2.6%)	0.4%

Table 1. Proportion of clients who reported alcohol, ATSs, cannabis, heroin, cocaine and other opioids as their primary substance of concern. Percentages shown for the AIHW are for clients receiving treatment for AoD use (N= 193,031).

- A primary concern about ATS use was substantially higher in the TC clients compared to the national AIHW percentage (Table 1).
- This finding, along with other discrepancies in the substance of primary concern, may be due to 69.2% of our sample reporting more than one substance of concern.
- This latter percentage is substantially higher than the proportion of clients who reported more than one substance of concern in the 2016-17 period (n=85,744, 44.4%).

DISCUSSION AND CONCLUSIONS

Our sample was representative of Australians who receive treatment for problematic AoD use in terms of their sex, country of birth and age. However, the present findings also suggest the presenting profile of Odyssey House NSW clients differs from the broader AoD client population in relation to reported drug use. In particular, the percentage of clients reporting ATSs as a primary substance of concern was substantially higher than indicated by the AIHW data for 2016-17 (55.6% vs. 25.7%). These findings may indicate that residential TCs, such as Odyssey House NSW, are uniquely suited to address the complex needs of clients with problematic polydrug use. Further research to establish the beneficial aspects of residential TCs on this client population is one way in which the efficacy of interventions for AoD use and related health and social functioning issues could be improved¹.

Acknowledgments

The present findings are taken from the baseline data of an ongoing outcomes Evaluation of the Odyssey House NSW residential program, funded by NSW Health. We would like to thank the staff and clients of Odyssey House NSW, both past and present, for their continuing support of the Evaluation research. We are especially grateful to the 117 former and present clients who agreed to participate in the Evaluation. Without you, this important and timely research would not be possible.