

Change sensitivity and correlates of change on a measure of recovery following discharge from residential rehabilitation

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Introduction: The Substance Use Recovery Evaluator (SURE), a measure of alcohol and other drug recovery, has good psychometric properties in most treatment settings, but few studies have examined its psychometric properties when used in residential rehabilitation (RR) populations. A previous validation study among RR clients post-discharge found binary rescoring enables all 21 SURE items to be included with the original five-factor structure. This study extends this work, by examining reliability, concurrent validity, and sensitivity to change over time of the SURE. Predictors of change are also examined.

Methods: Participants (N=247) were interviewed before treatment exit, and at 14- and 26-weeks post RR discharge between 2018 and 2020. Internal consistency and correlations between SURE and psychological distress (Kessler-10), quality of life (Eurohis Quality of Life-8), abstinence (Timeline Follow-Back), and craving (Desires for Alcohol Questionnaire-6) were examined. Change sensitivity was assessed using smallest detectable difference, standardized response means, and Wilcoxon signed rank tests. A multinomial logistic regression was conducted using reliable change indicators for recovery to explore correlates of deterioration and improvement.

Results: Internal consistency for total SURE ($\alpha=.91$) was excellent. Higher recovery was significantly associated with higher quality of life ($p=.74$), drug-taking confidence ($p=.25$) and abstinence ($p=.56$), and lower psychological distress ($p=-.58$) and craving ($p=-.30$) at 26 weeks. The total SURE score was sensitive to change (SRM=0.67, $z=-8.04$, $r=.40$, SDD=4.27). Compared to people who did not change in recovery, improvement was associated with abstinence, higher quality of life and non-attendance at employment services at 26 weeks. Deterioration was associated with reporting stimulants as primary substance of concern.

Discussions and Conclusions: These findings provide further evidence that the SURE is a reliable and valid measure of recovery in RR populations. It is also a sensitive measure of change in the six months following discharge.

Implications for Practice or Policy: The period following discharge is a critical time in recovery where risk of relapse is high. The SURE is beneficial for tracking changes in recovery to generate awareness needed for ongoing maintenance and early intervention based on specific client needs and personally meaningful domains.

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