

At your own pace: looking at short and longer-term outcomes for young people in AOD treatment service.

Authors:

Arezu Akbarian¹, Belinda Volkov²

^{1,2} *Sydney Drug Education & Counselling Centre, Sydney, Australia*

Presenter's email: rez@sdecc.org.au, belinda@sdecc.org.au

Introduction:

Historically treatments for substance use have been developed within adult populations. Supporting young people requires consideration of the developmental age and risk factors during this period. SDECC does not limit the length of treatment for young people and as such, this study examines the effectiveness of both short-term (<10 sessions) and longer-term (>10 sessions) counselling treatment for young people aged 12-25 who present with co-occurring alcohol and other drugs (AOD) and mental health (MH) concerns.

Methods:

Retrospective data were examined to measure outcomes that were conducted at intake and exit. The sample was drawn using NADAbase Outcome Data and included Severity of Dependence Scale (SDS), The Kessler Psychological Distress Scale (K10) and measuring Quality of Life (WHOQOL-8). Mean scores were calculated for the SDS, K10 and WHOQOL-8 at intake and exit, and a comparison analysis was undertaken. 65 young people completed outcome measures in 2023 (from 01/01/2023 to 31/12/2023) for short-term interventions and 12 young people completed outcome measures for longer-term treatment.

Results:

Decrease in SDS scores revealed that the mean score at intake was 9.1, and at exit 7.9, for sessions of <10 sessions. For longer-term treatment (>10 sessions), results showed a further decrease with the SDS mean score at exit, decreasing to 5.6. For K10 measurements, the scores showed that within 10 sessions, the mean score at intake was 28.6 and at exit 24.4, compared to longer-term mean scores, which showed exit score at 22.7. Similarly, with WHOQOL-8 scores, showing that within 10 sessions, the mean score at intake was 28.7 and at exit 24.4, whereas for longer-term sessions, exit mean score was 22.7.

Discussions and Conclusions:

The study found that both short-term and longer-term counselling treatments led to improvements in outcomes. However, longer-term counselling showed a greater improvement in decreasing the severity of dependence on AOD use, improving psychological well-being and quality of life.

Implications for Practice:

Young people who continue to engage in substance use, require treatment without time restriction and at their own pace. Recognising where a young person is in relation to change creates a greater opportunity for matching treatment and maintaining client engagement.

Disclosure of Interest Statement:

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