Mental Health Services

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Relapse Prevention in the Treatment of Alcohol Dependence

Are we doing enough to encourage attendance to the structured aftercare treatment sessions on Relapse Prevention?

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Aims

The aim of this project was to evaluate and improve the quality of the aftercare services we provide for alcohol dependence. This presentation discusses the patient satisfaction of the Relapse Prevention Group.

Background

Relapse Prevention is one of the vital components of treatment for alcohol dependency, and specifically in maintaining abstinence.

Relapse Prevention is a process which begins immediately after treatment for alcohol use and continues even if a lapse should occur. There are several models based on socio-cognitive or behavioural theories for understanding and treating addictive behaviours. Relapse Prevention interventions based on Cognitive Behaviour Therapy (CBT), are proved to be the most effective interventions in the treatment of alcohol dependence (1).

These interventions put emphasis on regaining control over the decision-making process involved in resisting or lapsing into alcohol use (2, 3).

Key components include identifying high risk situations, reducing positive expectancies and developing negative expectancies from drinking, developing self-efficacy and coping skills, and finally, developing overall lifestyle changes compatible with an abstinent way of living (4,5). Empirical evidence, though, suggests that less that 60% of people attend aftercare interventions (6), implying that more could be done to encourage patients to attend to maximise their recovery prospects.

References

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Methods

All clients, who attended the programme from 1st of July 2013 to 31st May 2014 were recruited. The feedback form was designed in consultation with the multidisciplinary team and 8 standard questions were agreed. The responses were rated on a scale of 1 to 5, with 1 being “poor” and 5 being “excellent”.

Results

36 attended during this period. We received 33 responses, from which 5 were anonymous. On global rating, 60% rated the groups as ‘excellent’ and 21% as ‘very good’.
90% of the people found all the sessions very useful and about 72% of the clients felt that the groups helped them in recovery.
About 18% of the responses liked the session on high risk situations.
All the responses were extremely positive about the session co-ordinators and delivery skills.
We noted that the clients expect to know more about ‘life style balance’ and plans are in place to incorporate this. We noted some practical issues raised affecting attendance such as travel and childcare.

Conclusions

The overall view of clients who attended the relapse prevention programme with our team was positive. Clients felt their views were valued and that the programme had assisted them in developing the skills and knowledge to maintain abstinence from alcohol. In particular, the session on identifying and managing high-risk situations was found more beneficial for the clients from this cohort.

It may be useful to consider how we can include those with work or family commitments who are unable to attend evening groups. Initiating a day-time Relapse Prevention Group may result in more clients being able to attend more regularly and engage full with the groups.

We could assume then that the effects of relapse prevention work will become more apparent as clients acquire additional practice. We may therefore suggest increasing the support given to clients in maintaining abstinence from alcohol in the initial period post-detox as well as to consider combining this psychological approach with other psychosocial interventions such as peer support groups (AA/SMART/Women’s group) alongside pharmacological treatments (1).

We conclude that ongoing monitoring of the patient satisfaction and addressing the issues as and when they emerge will increase the attendance and further help people to maintain abstinence from alcohol.