

Alcohol and Other Drugs Therapeutic Intervention Overview

1. AOD TREATMENT SERVICE DELIVERY FRAMEWORK

The framework provides a state-wide approach to working with AOD clients. A significant aspect of AOD services are the endorsed therapeutic interventions that are actively practised across the state.

These approaches have been shown to be the **most efficacious therapeutic interventions and are widely practiced throughout Queensland AOD services.**

AOD services are best understood in terms of a combination of biological, psychological and social factors. Some biological (medical) AOD services.



2. The right tool at the right time

AOD services recognise the importance of **providing treatment and counselling approaches that match the individual needs and circumstances identified by each client.**

Different client characteristics or needs, drug types and circumstances significantly impact the decision of a service provider to use specific therapeutic approaches.

Contextual information

- » Client needs
- » Drug types
- » Circumstances/environment

AOD services endorse the most evidence-based therapeutic interventions in this area so that **the right therapeutic approach can be provided to each client at the right time.**

When considering the best therapeutic intervention for clients, service providers ask:

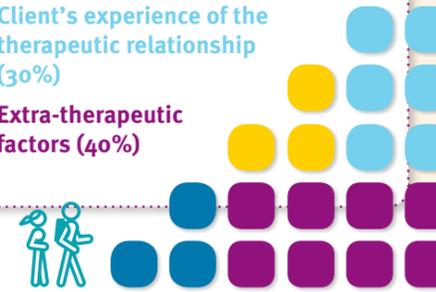
- » What is the client's current goal?
- » What therapeutic approaches have they tried before?
- » What about the approach helped/didn't help?
- » Do they have a preference for how they want to engage in the therapy/treatment?
- » Is the client informed of the range of treatment options available?
- » What does the evidence recommend for the client's presentation?

3. The common factor

- The quality and strength of the collaborative relationship between client and therapist (the therapeutic alliance) is the strongest predictor of positive therapeutic outcomes. (Fife et al., 2014; Lambert, 1992)
- **A significant factor that contributes to the development of the therapeutic alliance is matching the appropriate therapy to the client.** This is because each psychotherapeutic intervention works in different ways with individual factors most likely influencing the suitability of different therapies (project match).

The common factors that benefit clients

- **Therapist's techniques and skills (15%)**
- **Client's sense of hope (15%)**
- **Client's experience of the therapeutic relationship (30%)**
- **Extra-therapeutic factors (40%)**



5. AOD sector endorsed psychotherapeutic interventions

In addition to medical services, AODs have explored and recognised the efficacy of **a range of different therapies that have been demonstrated to benefit clients and support them in their recovery.** These therapies range from foundational therapies like Contingency Management and Cognitive Behavioural Therapy (each of which have been applied beneficially for more than 50 years) through to more recently developed therapeutic approaches like Acceptance and Commitment Therapy. **Services that recruit, train and maintain skills of clinicians in delivering these therapies are equipped with a diverse set of tools that can meet and support clients in a range of circumstances and with a range of needs.**

Less commonly practiced AOD treatments

The following approaches, whilst not commonly practised in AOD treatment settings across Queensland, are recognised as valid and appropriate for use in certain contexts:

- » Dialectical Behavioural Therapy (DBT)
- » Art/Music Therapy
- » Exercise and Healthy Lifestyle Programs

Substances

- C Cocaine
- O Opioids
- Al Alcohol
- T Tobacco
- H Hallucinogens
- A Amphetamines
- Ca Cannabis
- PS Polysubstance use

Contingency Management
Contingency management provides incentives for behavioural change and is effective at teaching people that they are able to change their behaviour when sufficiently motivated.

Evidence to support its use for the treatment of:

C	A	H	T
O	Ca	Al	PS

Cognitive Behavioural Therapy (CBT)
The objective of CBT is to provide the client with skills that involve identifying distorted thinking, modifying beliefs, relating to others in different ways, and changing behaviours.

Evidence to support its use for the treatment of:

C	A	H	T
O	Ca	Al	PS

Narrative Therapy
Narrative therapy focuses on developing richer narratives that allow clients to consider their relationships with problems.

Evidence to support its use for the treatment of:

C	A	H	T
O	Ca	Al	PS

Mindfulness
The core aim of Mindfulness or Mindfulness-Based Cognitive Therapy (MBCT) is to increase psychological health and a reduction of relapse incidents by increasing mindfulness, which can be characterised by the following skills: (1) acceptance of thoughts and feelings without judgement; and, (2) focusing fully on the present moment.

Evidence to support its use for the treatment of:

C	A	H	T
O	Ca	Al	PS

Motivational Enhancement/Interviewing
Motivational Interviewing is an approach that attempts to increase the client's awareness of the potential problems caused, consequences experienced and risks faced as a result of the behaviour in question.

Evidence to support its use for the treatment of:

C	A	H	T
O	Ca	Al	PS

Solution Focused Therapy (SFBT)
SFBT focuses on the client's goals through exploring the history and origins of their problems.

Evidence to support its use for the treatment of:

C	A	H	T
O	Ca	Al	PS

Emotional Regulation Therapy (ERT)
ERT focuses on the training of a number of regulatory skills including attentional flexibility, acceptance, cognitive distancing and cognitive reframing as well as experiential exposure to contexts of perceived reward and risk.

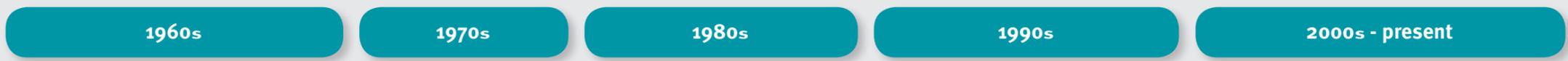
Evidence to support its use for the treatment of:

C	A	H	T
O	M	Al	PS

Acceptance and Commitment Therapy (ACT)
The objective of ACT is not the elimination of difficult feelings; rather, it is to be present with what life brings the client and to move toward valued behaviour.

Evidence to support its use for the treatment of:

C	A	H	T
O	Ca	Al	PS



*The use of the psychotherapeutic interventions for each reported substance in this document reflects the current research available at the time of publication