

EXAMINING OUTCOMES OF INDIVIDUALS ENTERING RESIDENTIAL TREATMENT FOR METHAMPHETAMINE PROBLEMS VERSUS OTHER DRUG AND ALCOHOL PROBLEMS

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Introduction and Aims: Recent research indicates individuals with methamphetamine problems in Australia demonstrate improved outcomes following alcohol and other drug (AOD) treatment compared to those with other AOD problems, including following residential treatment. The reasons for this are not well understood. Given evidence that treatment retention does not vary by primary AOD problem, non-treatment factors may play a role. This study examines the extent to which: 1) individuals with primary methamphetamine problems have better residential AOD treatment outcomes than those with other AOD problems; 2) established outcome predictors are associated with treatment outcomes.

Design and Methods: Data were drawn from a multi-site prospective cohort study of 307 individuals entering one of five residential treatment services across Eastern Australia. Participants completed a structured interview 2-4 weeks following admission to treatment and were followed up at 12 months.

Results: No significant differences were observed between people with methamphetamine problems and those with other AOD problems across key treatment outcome measures including wellbeing and AOD use, despite differences observed at baseline across established outcome predictors (including age, AOD history, social factors). Across the sample, significant reductions in AOD use were detected at follow-up. Social support and connectedness post-treatment and stages of treatment completed were associated with AOD use and wellbeing at follow-up.

Discussion and Conclusions: Findings indicate that individuals with methamphetamine problems are equally likely to do well following residential treatment as those with other AOD problems. Characteristics at admission such as primary AOD problem and social factors may be poor prognostic indicators. Treatment factors and social support post admission are more likely to have an impact on residential treatment outcomes.

Implications for Practice or Policy: Findings reiterate the value of residential AOD treatment, and cultivating treatment engagement, social support and connectedness.

Implications for Translational Research: Further research is needed to inform strategies to maximise treatment engagement and social support.

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