

Review of the CADS group programme

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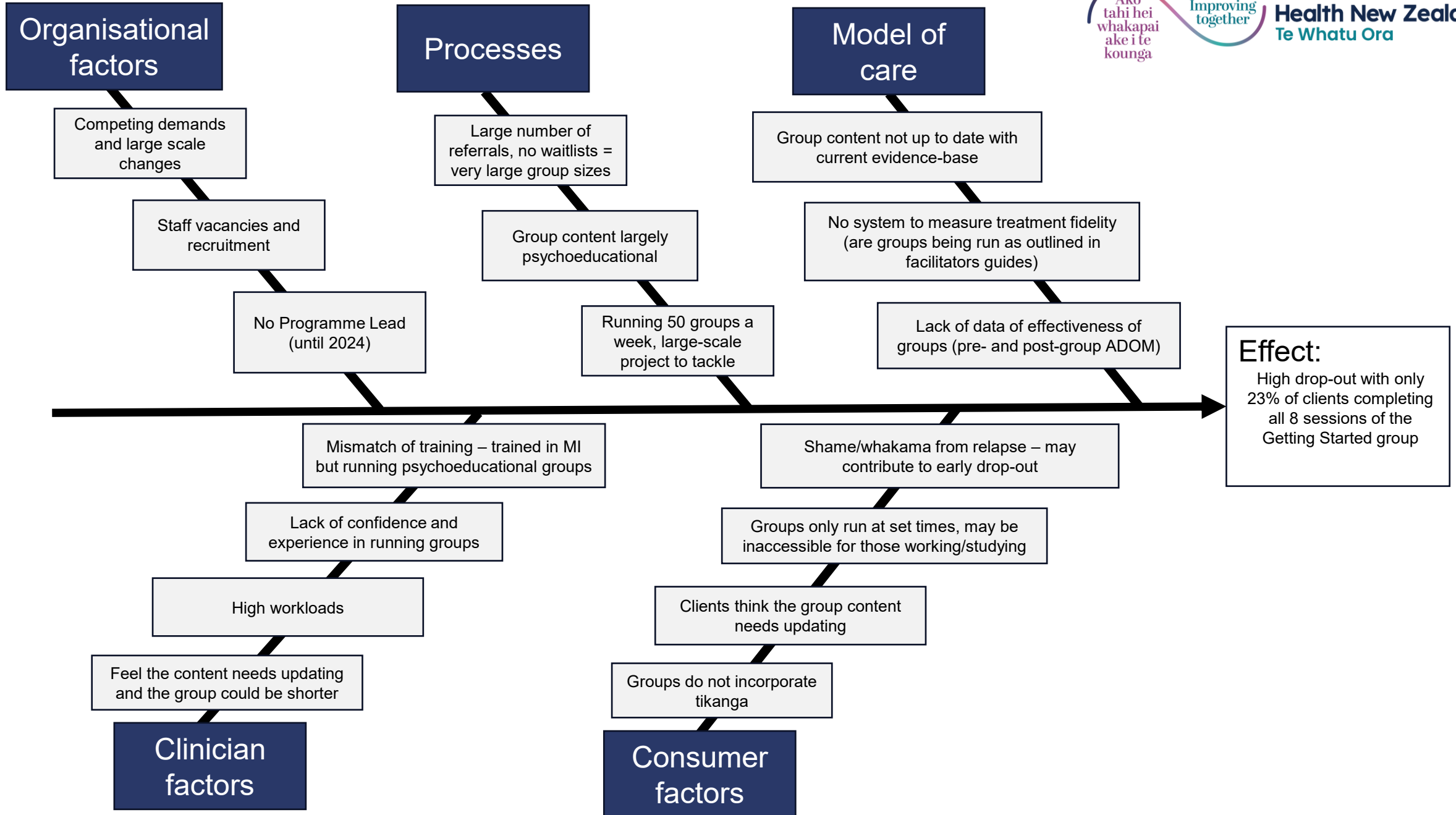


Introduction

- CADS (Community Alcohol & Drug Services) aims to provide evidence-based, accessible, and equitable treatment that supports clients to reduce the harms of substance use
- Since 2004 we have run a three-stage therapeutic group programme, which was last reviewed in 2016
 - Getting Started > Taking Action > Maintaining Change
 - Around 50 client treatment groups a week across a broad geographical area
- A review of our main group programme was undertaken in 2024, which revealed some opportunities for improvement

Baseline measurement

- Data obtained in the 2024 review
 - 23% of clients complete all 8 sessions of Getting Started
 - 45% of clients were able to complete at least 5 sessions
 - Completion rates were around the same for Māori (23%), Pacific people (23%) and NZ European (22%) clients, but slightly higher for Asian (32%) and 'other' (30%)
 - As well as roughly the same for under 25s vs over 25s (23% vs. 24%)
 - Approximately 36% of clients who complete Getting Started go on to start the next group in the programme (Taking Action)



Organisational factors

Processes

Model of care

Clinician factors

Consumer factors

Effect:
 High drop-out with only 23% of clients completing all 8 sessions of the Getting Started group

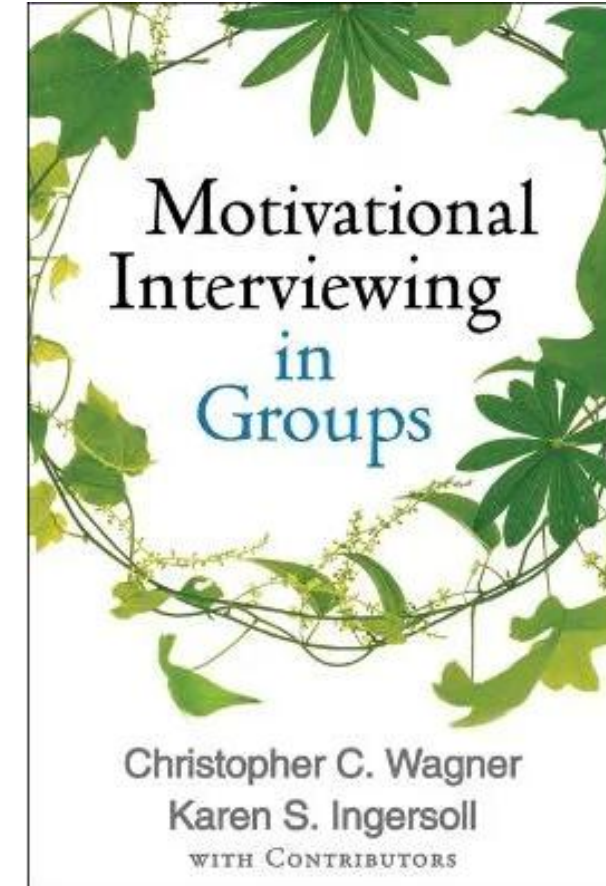
Possible reasons for drop-out

Response option	Endorsed (part of reason)	Primary reason
Hard to attend appointments	32%	9%
Not happy with the service	9%	-
Uncomfortable to talk about problems	5%	-
Problem improved	77%	55%
Lost interest in attending the service	5%	-
Service did not meet needs	14%	4%
Other reason	46%	32%

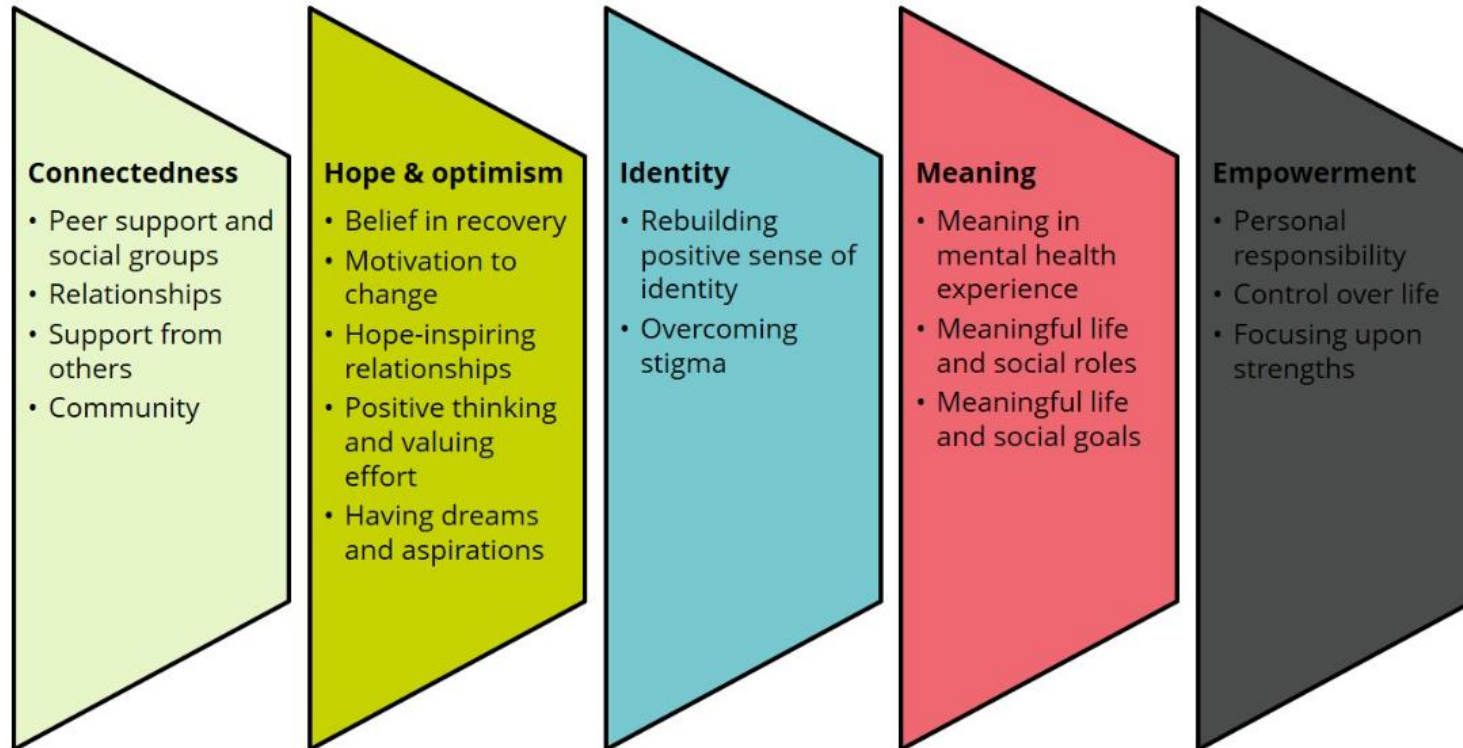
Small study of 100 clients who had left the service after fewer than four appointments (Pulford 2004).

Introducing CHIME group

- A change in the *process* of *how* we run groups (as much as the content), with much more of a focus on engagement, connection and motivational conversations
- Each session also based on the stages of MI for groups
 1. **Engaging** – introductions, warm-up
 2. **Exploring perspectives** – check in around substance use
 3. **Broadening perspectives** – activity designed to deepen conversation
 4. **Moving into action** – closing round



The CHIME framework for personal recovery



Five session group, each with an activity based around a theme from CHIME – aiming to generate a conversation

Leamy, M., Bird, V., Le Boutillier, C., Williams, J., & Slade, M. (2011). Conceptual framework for personal recovery in mental health: systematic review and narrative synthesis. *The British journal of psychiatry*, 199(6), 445-452.

Pilot group & data collection



Pilot group was an opportunity to collect qualitative and quantitative feedback from clinicians and clients to inform the development of the group

Data collection

- % clients who complete group – outcome measure
- ADOM (Alcohol & Drug Outcome Measure) pre and post group – outcome measure
- AMIGOS (Assessment of MI in groups observer scale) – process measure
- Number of referrals to next group in the programme – balancing measure

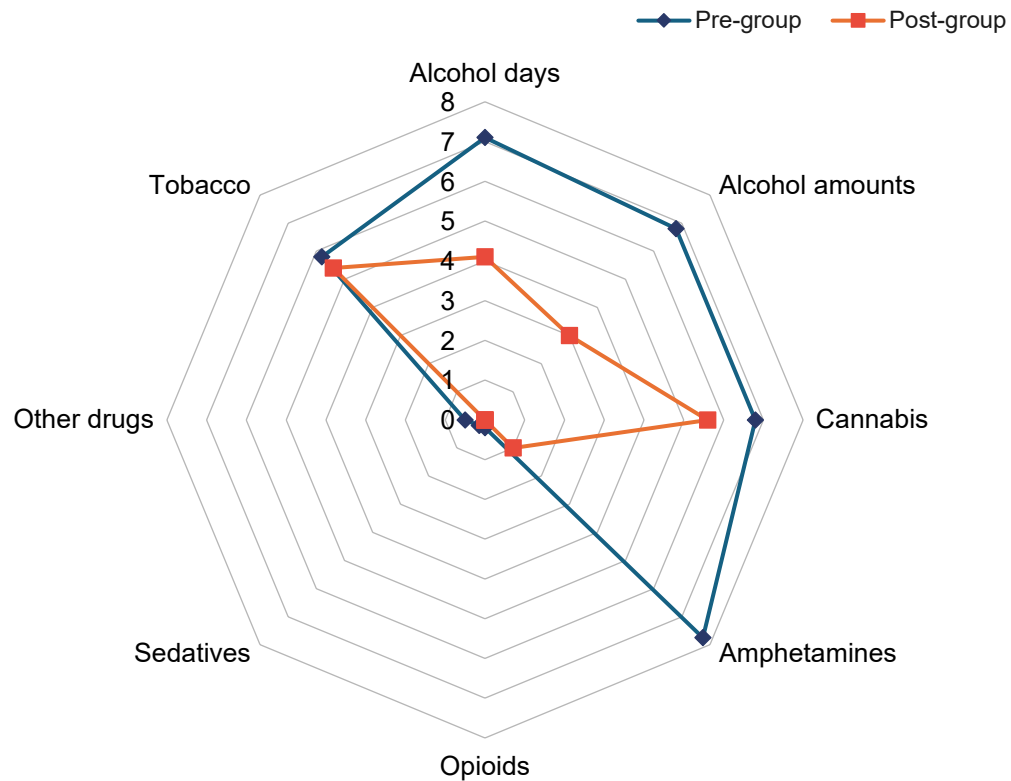
Completion rates

# clients who participated in the pilot (three cycles)	# clients graduated	# clients dropped out (missed two groups or more)	# still in progress	Percentage completion rate (removing clients still in progress)
52	26	9	17	74.3%

- Two clients continued to attend more than five sessions
- One client moved on to another group but asked to come back
- One “waited” until the next cycle to complete the letter he had missed!
- Four moved on to Taking Action

Alcohol & Other Drug Measure

ADOM data - substance use



Most clients in the group were seeking support with alcohol use. There is a decrease in the number of days and amount of alcohol being consumed pre- and post-group.

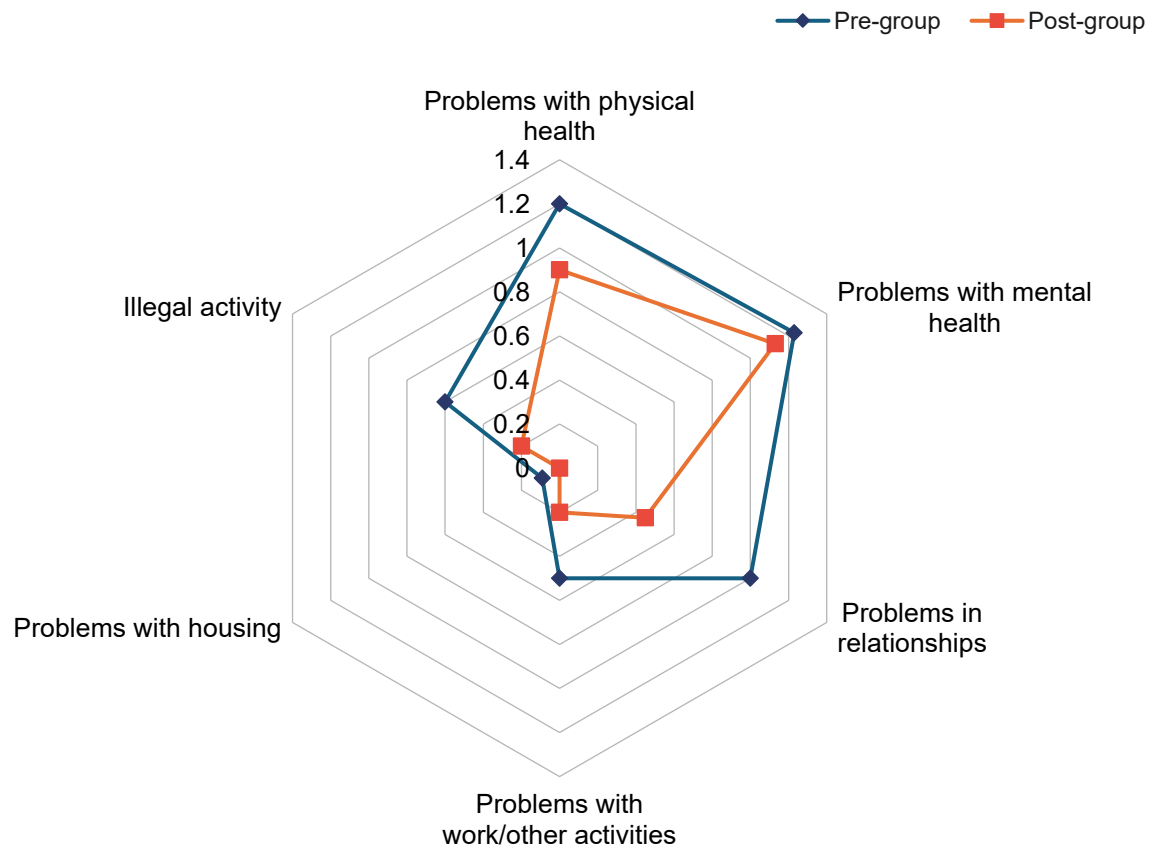
Cannabis use showed a smaller decrease (but not necessarily a goal).

Two clients using amphetamines had stopped.

Numbers of clients using other substances were smaller but showed a decrease also.

Alcohol & Other Drug Measure

ADOM data - lifestyle and wellbeing



Problems with physical health, relationships, work (and other activities like parenting) and illegal activity all reduced from pre-group measures.

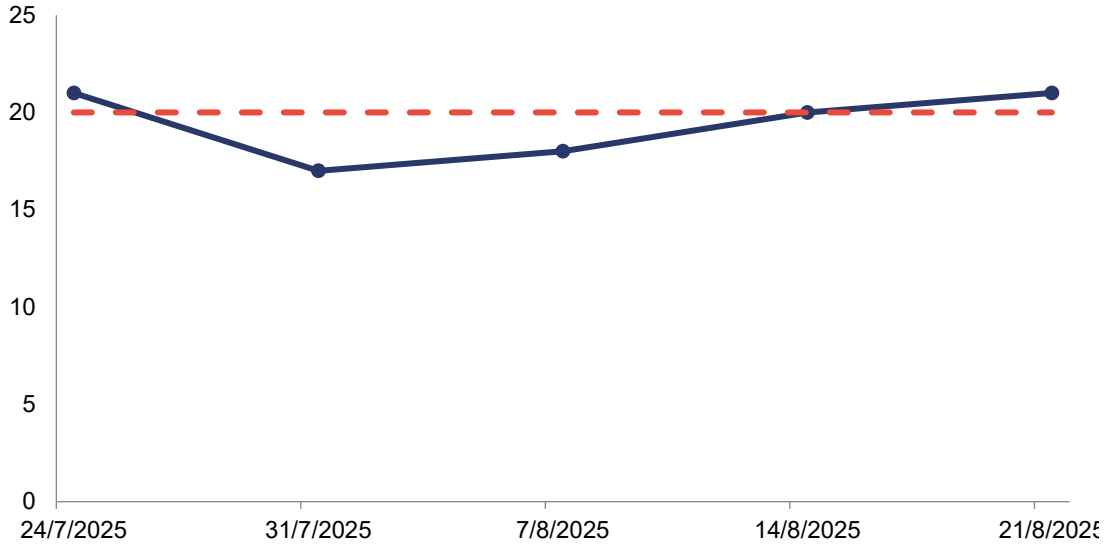
Problems with mental health decreased, but only slightly - makes sense as alcohol/drugs often a means of coping, this group not teaching other coping skills (other groups attend to this).

Alcohol & Other Drug Measure

Recovery questions	Overall, how close are you to where you want to be in your recovery? (scale of 1-10, 10 is best possible)	How satisfied are you with your progress towards achieving your recovery goals?
Pre-group average	5.6	1.7 (slightly to moderately)
Post-group average	7.5	3.6 (considerably to extremely)

There was a good increase in recovery scores pre- and post-group, indicating clients are feeling closer to where they want to be in their recovery, and more satisfied with their progress in getting there.

AMIGOS - Group Engagement

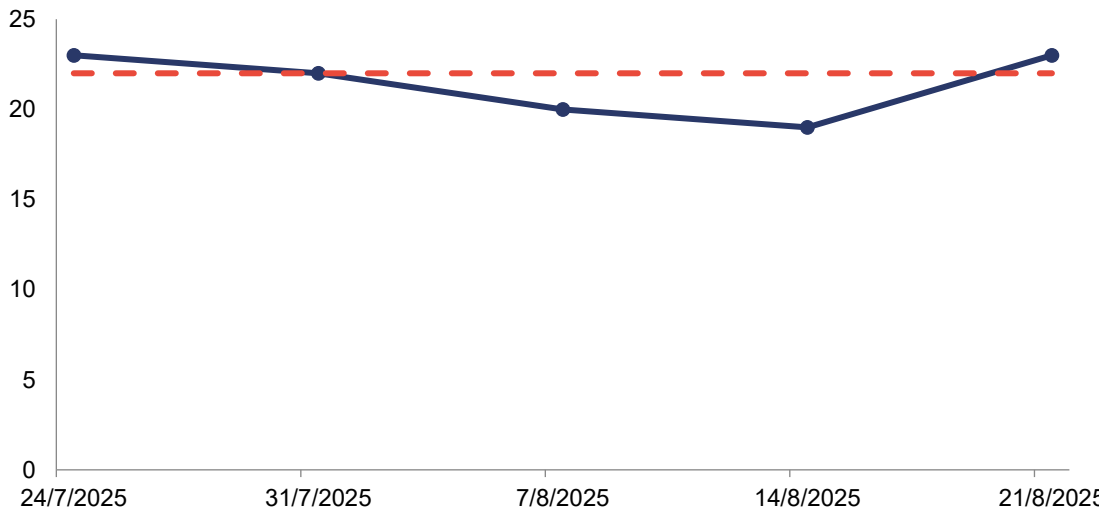


The AMIGOS measures three dimensions of fidelity to the MI for groups model – group engagement, client-centered style and MI change focus. Scores were over 18 in each area each week, indicating good fidelity to the model.

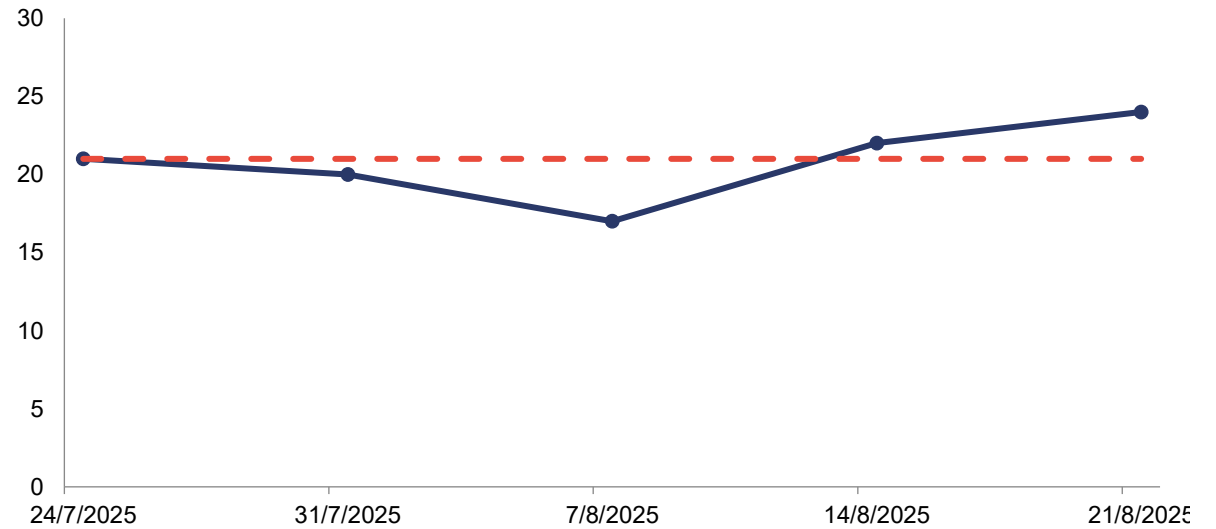
Scores dipped around week 2-4, likely due to an influx of new referrals and increase in the group size.

The MI change focus seems to be increasing over time as facilitators build skill with the new content and style.

AMIGOS - Client-centered style



AMIGOS - MI Change Focus



Client feedback

“I’m going to take more notice of life, around what I can and can’t control...it’s eye opening.”

“When I walked in [to the group] I had a closed mind but with each week I took away the learning and I’m not the same person that I was at the start, in a good way.”

“It was helpful to think about how I can use my strengths to overcome my alcohol addiction.”

“With my substance abuse it erodes all of these [values] and when I’m not drinking, they all come to the surface. I’m more disciplined and enjoying life more.”



CHIME Zoom Group

A brief case study on engagement, connection and accessible online treatment

Case vignette

Initial presentation

- Client joined the Zoom CHIME group appearing withdrawn and hesitant
- He was sitting in a dark room with his hat low over his face
- He spoke very little and did not seem ready to enter the group space
- At first glance, engagement appeared limited

A small visible change can mark a much bigger shift in readiness, connection and participation.

The shift during group



Turned on light



Smiled



Became visible



Contributed

As the session progressed, the client moved from distance toward participation. Clinically, this felt like a significant moment of group engagement and a shift toward a more client-centered and connected space.

Reading it through CHIME

C

Connection

Less alone, more able to relate to others in the group.

H

Hope

A sign that change may feel possible and safe enough to test.

I

Identity

Beginning to show up as himself rather than staying hidden.

M

Meaning

The discussion started to feel personally relevant.

E

Empowerment

Participation suggested increased confidence and agency.

Small moment, meaningful change

Client feedback overall from CHIME consistently suggests the more conversational group format around “what is important to you in life?” can shift perspectives, support engagement and lead to meaningful change around alcohol and/or drug use.

Next steps

- Staff have been trained and CHIME has now been rolled out across CADS (replacing Getting Started groups)
- Supervisors will be trained in AMIGOS coding to ensure fidelity ongoing
- Work has begun on reviewing the next two groups in our programme (Taking Action and Maintaining Change)