

Leeds Addiction Unit

Social Behaviour and Network Therapy

Dr Gillian Tober
Leeds Addiction Unit
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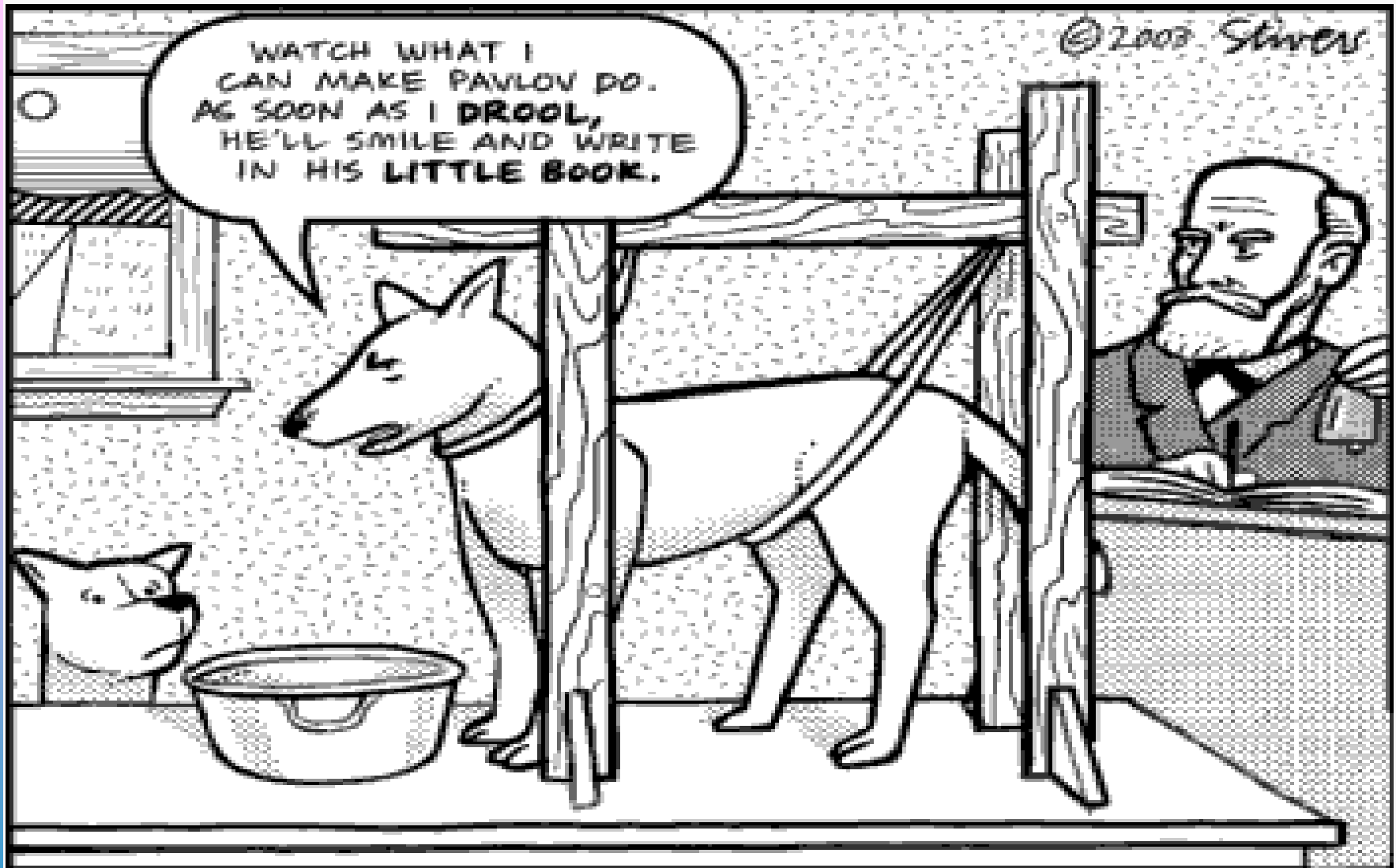
Presentation Summary

The importance of working with significant others and network

- What is it?
- Origins of SBNT
- Rationale and evidence
- SBNT and its developments and adaptations
- Training and supervision
- Assessment and outcome evaluation

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Social Behaviour and Network Therapy



Social behaviour is a two way learning process...





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Barbara S McCrady (2004) To have but one true friend: implications for practice of research on alcohol use disorders and social networks *Psychology of Addictive Behaviors*, 18,113-121.

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Social networks

This is what they are:

Best viewed as dynamic systems with members of the network acting on each other and in turn being influenced by each other.

Implications for treatment:

- 1 effective family members remain involved, direct about encouraging abstinence and discouraging drinking, minimise hostile and critical attitudes and behaviour
- 2 Assessment of network contact: frequency and quality
- 3 Maximise positive support and minimise support for drinking

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Extensive literature on social
support

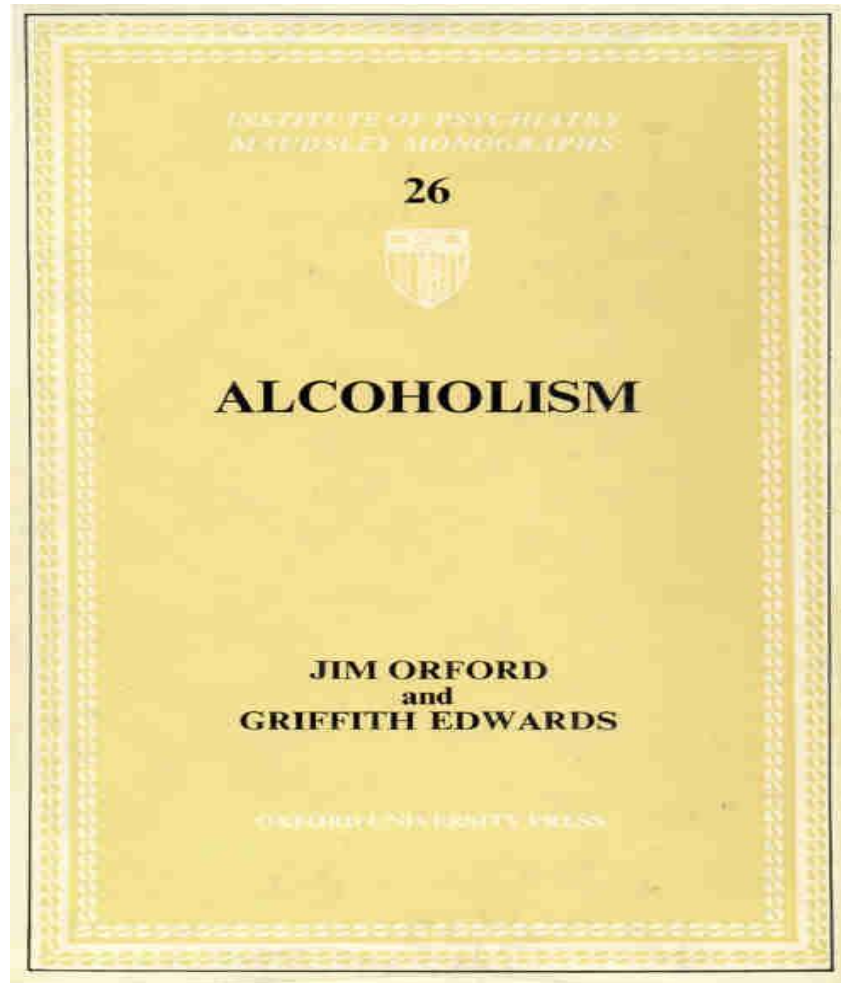
eg Vaillant, Orford, Longabaugh

Much practice retains an
individual focus

George Vaillant 1973,1983,1995

Achieving long-term sobriety usually involves (1) a less harmful, substitute dependency; (2) new relationships; (3) sources of inspiration and hope; and (4) experiencing negative consequences of drinking. [\[3\]](#)

Treatment and Advice



Longabaugh R, Wirtz PW,
Zweben A & Stout RL. (1998).

Network support for drinking, Alcoholics
Anonymous and long-term matching
effects. *Addiction* 93(9), 1313-1333.

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Relevant history

Community Reinforcement Approach

Project MATCH: 3 individually based treatments including 12 step facilitation

UKATT: individual compared to social treatment

VOLUME **1**

National Institute on Alcohol Abuse and Alcoholism

TWELVE STEP FACILITATION THERAPY MANUAL

A Clinical Research Guide for
Therapists Treating Individuals With
Alcohol Abuse and Dependence

PROJECT
MATCH
MONOGRAPH
SERIES

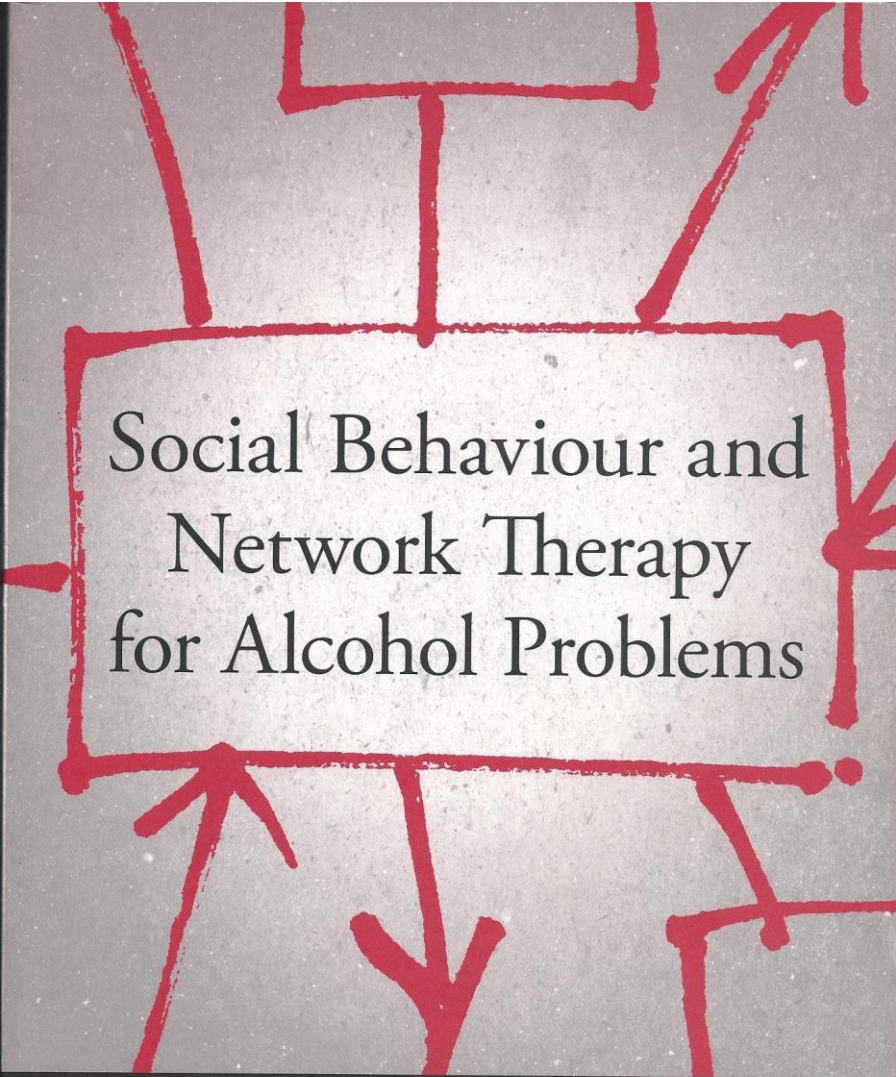


U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
Public Health Service
National Institutes of Health

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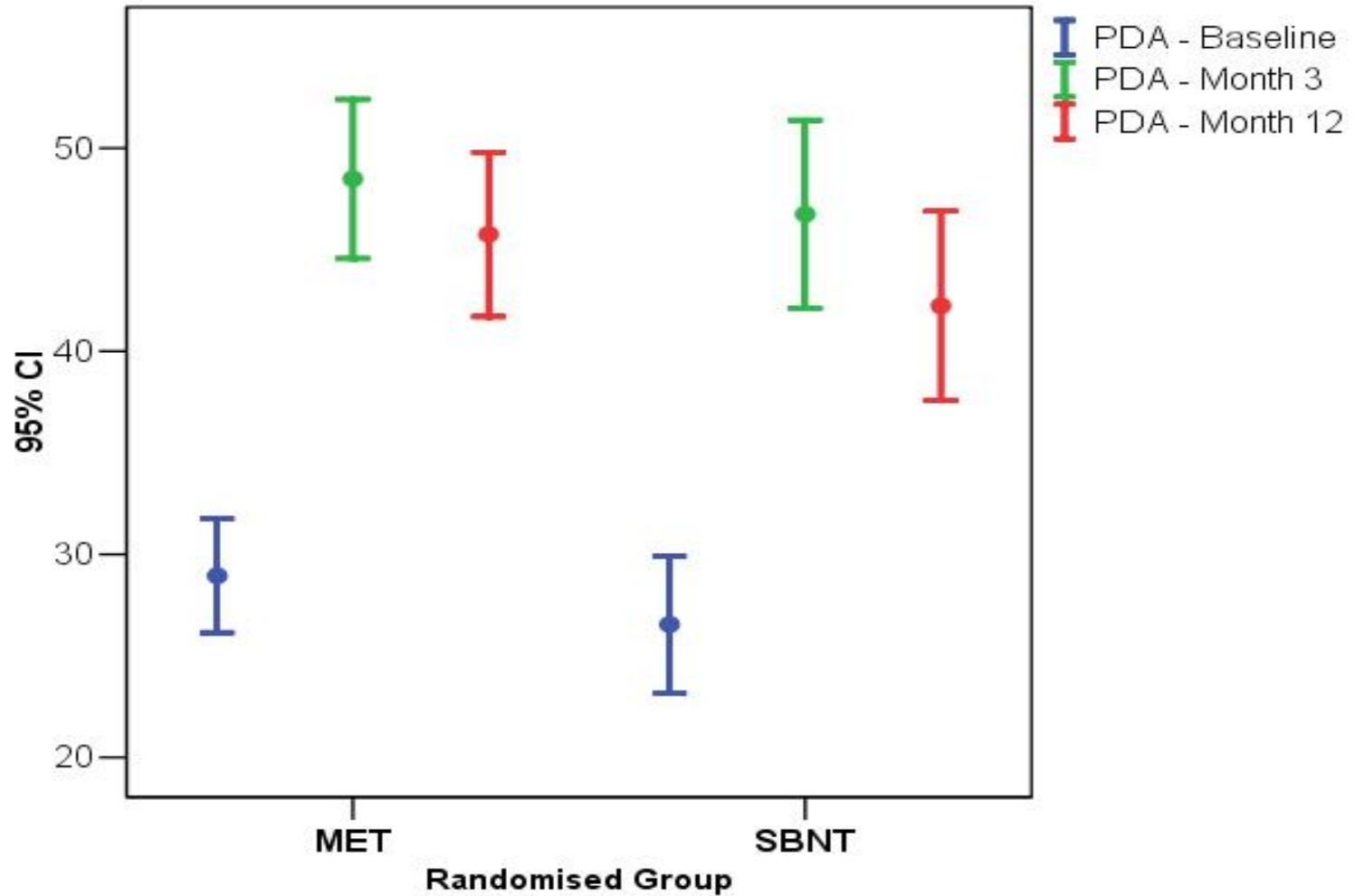
Attention to the network
Part of assessment
Mutually supportive
Make plans together
Access to therapist



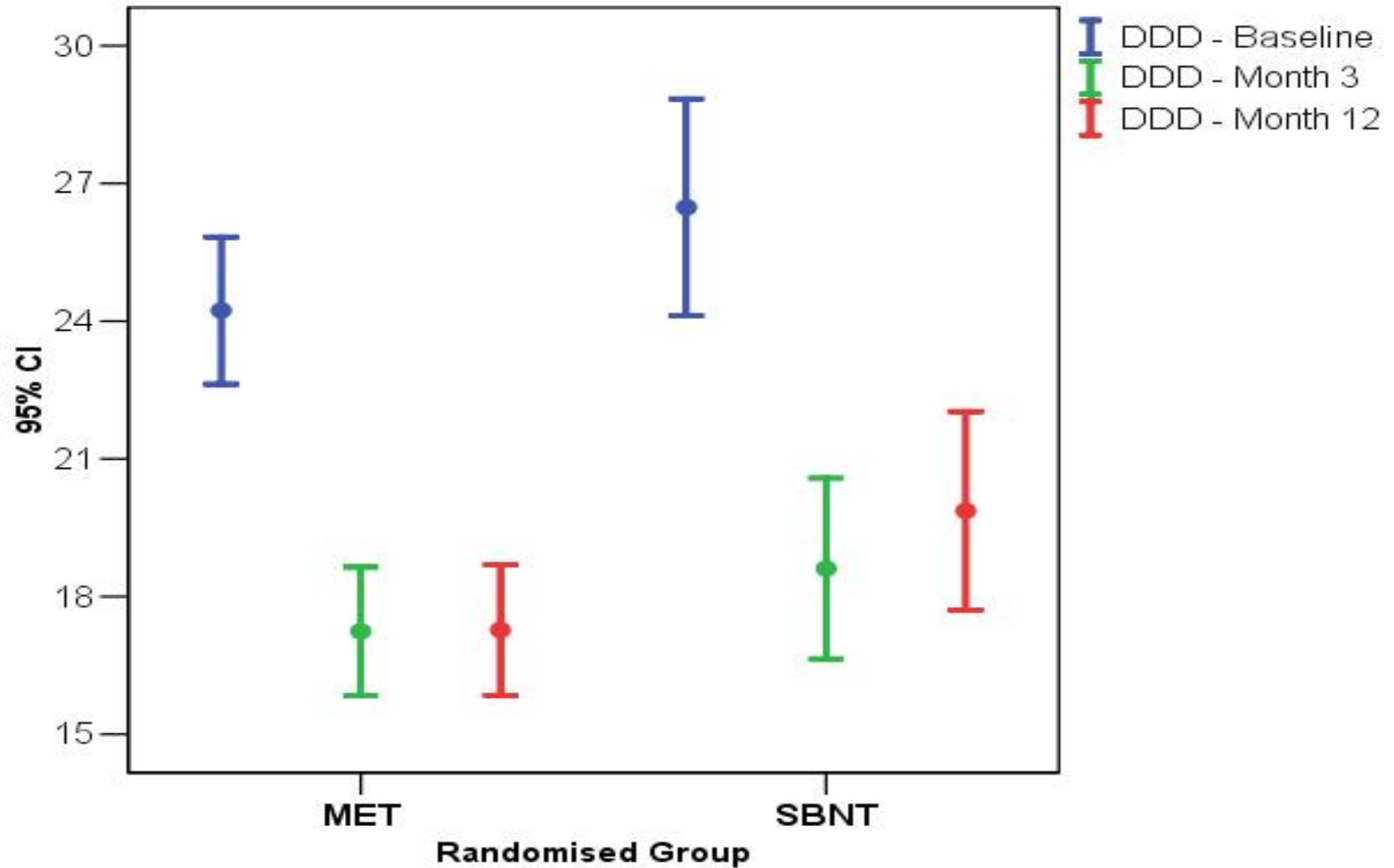
Social Behaviour and
Network Therapy
for Alcohol Problems

ALEX COPELLO, JIM ORFORD,
RAY HODGSON AND GILLIAN TOBER

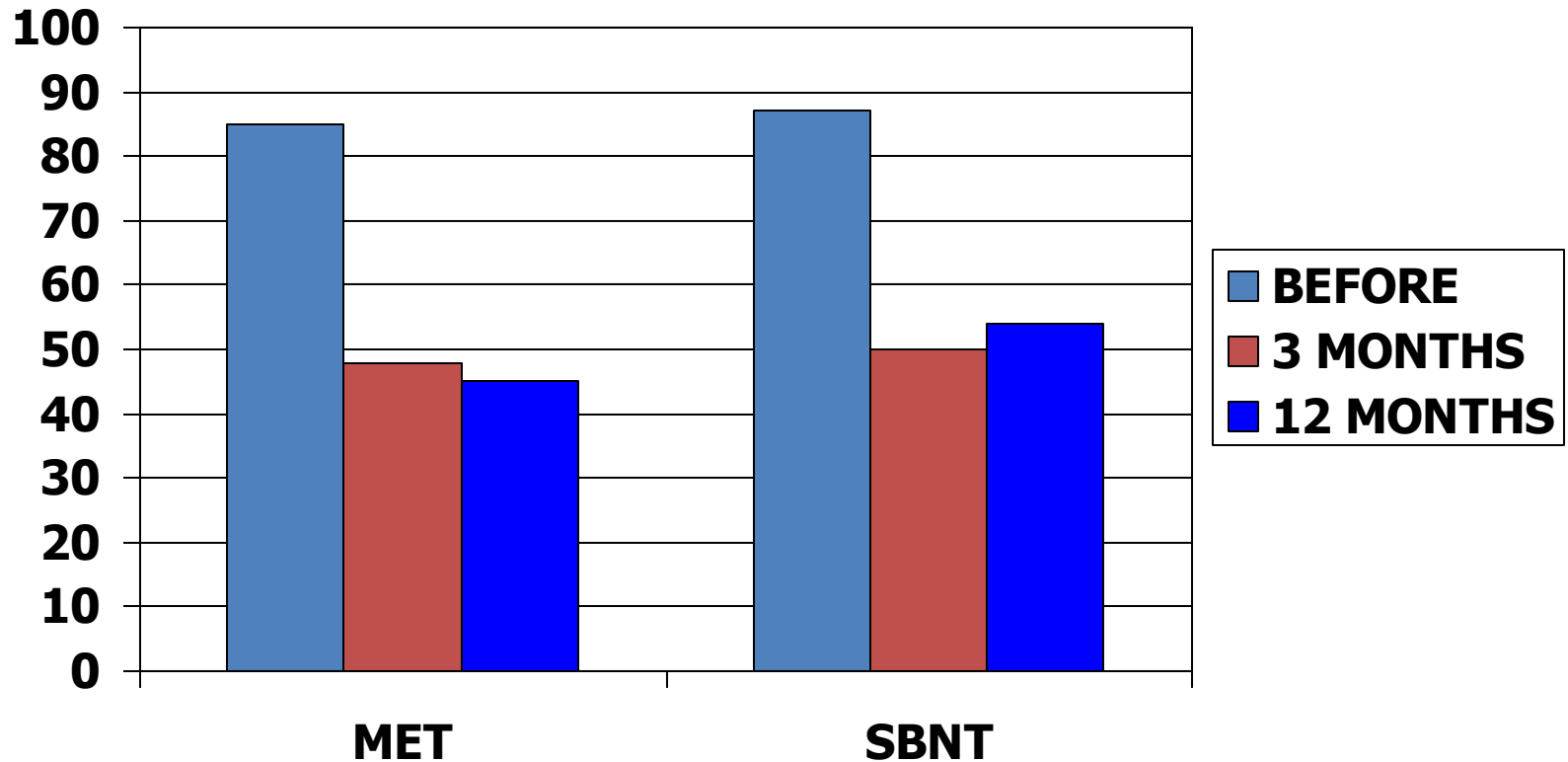
Percent Days abstinent



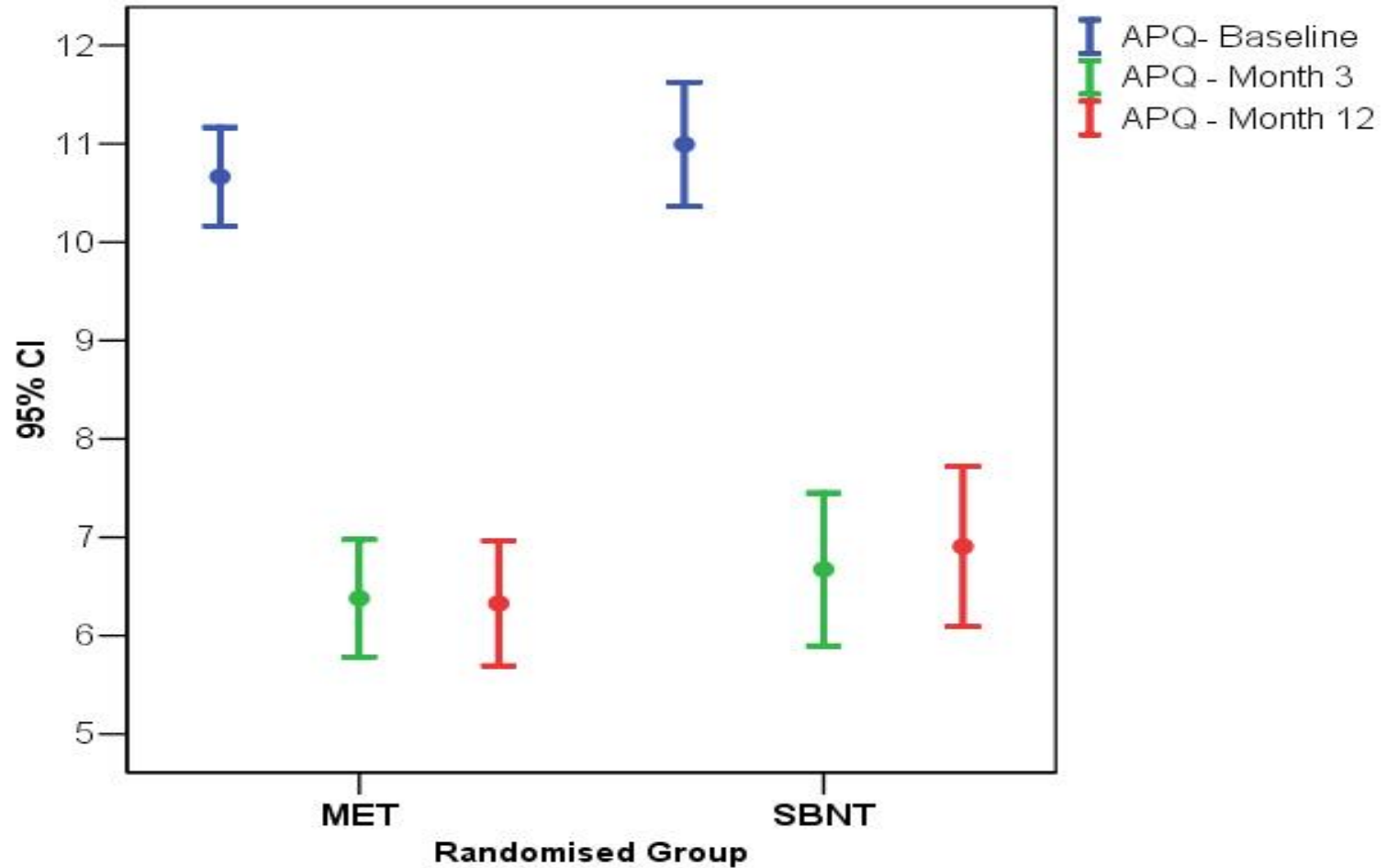
Drinks per drinking day



Percent of harmful or high risk drinkers



Number of alcohol problems



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UKATT: Orford et al. 2009

What was useful about that session?

Alcohol and Alcoholism

- Involvement of others
- Alternative social activities
- Communication

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UKATT: Orford et al 2009

To what factors do clients attribute change?

3 and 12 month follow up interviews

Journal of Substance Abuse Treatment

Social factors:

- Involvement of other people
- Developing alternative activities including work
- Communicating better, more openly

Motivational factors

- Awareness of consequences of drinking
- Feedback assessment results
- Thinking about what is important in life

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What did service users value?

- **Structure**: specific components of both treatment protocols eg feedback
- **Alliance**: feeling understood, reporting back
- **Goal setting and decision making**

Source: Orford et al. 2009

Also found in Jones 2009, Moos 1997, 2007, Lovejoy 1995,

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Subsequent adaptations:

- **Drug misuse: unchanged protocol**
- **Hospital in reach (non help seekers): abbreviated protocol**
- **Young people: YSBNT new study**

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ADAPTA

516 screened

– 79.1% ineligible (49% treatment elsewhere, 41% unwilling to consent).

86 randomised to treatment

- 43 in each arm

.

25 returned follow up questionnaire at 6 months

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ADAPTA

26% completed all 4 treatment sessions
35% Healthy Living Intervention
21% Alcohol focussed intervention

90 appointments made but not attended

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ADAPTA

Dependence decreased at 6 months in both groups
More in alcohol focussed group

Social satisfaction increased in the alcohol focussed intervention

Psychological functioning improved in both groups

33% reported abstinence over the 6 months in both arms

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Y-SBNT pilot study Copello et al.

- 5 weekly sessions
- social network identification, motivational techniques, improving communication and coping mechanisms, developing a network-based relapse management plan.
- client-focussed elective areas, for example, educational requirements.

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The way forward

1. *assess* client positive and negative social network
2. *train* new staff to practise network recruitment
3. *share* practice in supervision
4. *rate* practice for consistency and maintenance
5. *evaluate* outcomes for client and network

What happens in treatment as usual?

Session management

Agency	A	B	C	D	E	F	G
Agendaf	1.6	0	0	0.4	0	0	0.17
Agendaq	1.8	0	0	0.2	0	0	0.17
Philsof	1.0	0	0	0	0	0.2	0
Philsoq	1.6	0	0	0	0	0	0
Reviewf	1.6	0.2	0	0	0.4	0.8	0.67
Reviewq	2.0	0	0	0	0.4	0	0.5
Goalf	1.8	1.0	0.4	0.8	0.2	0.6	0.67
Goalq	1.8	1.0	0.4	0.4	0	0.2	0.33
Planf	1.6	0	0	0	0	0.2	0.5
Planq	2.0	0	0	0	0	0.2	0
Socfuncf	2.0	0.6	0.6	0.2	0.4	0	0.67
Socfuncq	2.0	0.2	0.2	0	0.6	0	0.67

What happens in treatment as usual?

Session content

Agency	A	B	C	D	E	F	G
Homeworkf	0.2	0.2	0	0	0.2	0	0
Homeworkq	0.4	0.2	0	0	0.2	0	0
Alterf	1.2	0.6	0	0	0.2	0	0.17
Alterq	1.2	0.8	0	0	0	0	0
Idsupportf	2.4	0.2	0	0	0.2	0.2	0.17
Idsupportq	2.0	0.2	0	0	0.2	0	0.17
Skillstrainf	1.2	0	0	0	0	0.2	0
Skillstrainq	1.4	0	0	0	0	0	0
Assusef	1.6	1.0	1.6	1.2	0.6	0	1.0
Assuseq	2.0	0	0.6	0.6	0.6	0	0.5

What happens in treatment as usual?

Practitioner style

Agency	A	B	C	D	E	F	G
Taskorf	2.2	0.2	0	0	0	0.2	0.17
Taskorq	1.8	0.4	0	0	0	0.2	0.17
Reflectf	2.6	0.4	0	0	1.0	0.2	0.5
Reflectq	2.0	0.4	0	0	0.6	0.2	0.5
Empathyf	2.8	0.6	0	0	0.4	0.2	0.5
Empathyq	2.2	0.4	0	0	0.2	0.2	0.5
Openqf	3.0	1.6	0.6	0.8	2.0	1.2	1.0
Openqq	2.0	1.2	0.2	0.6	0.8	0.6	0.67
Motintstyf	3.0	0.4	0	0	0	0	0.5
Motintstyq	2.0	0.2	0	0	0	0	0.33
Frustration	0	0	0	0	1.4	0	0

UKATT Therapist training

	MET n=22	SBNT n=29
Number of clients ¹	19 (2-41)	11 (2-41)
Training Cases ²	4.4 (2-8)	3.0 (1-6)
Supervision sessions ²	9.5 (5-19)	14.3 (7-24)
Duration of training	8.1 mths (2.1-13.5)	6.6 mths (2.7-18.6)

¹ p<.005 ² p<.001

Ukatt – United Kingdom Alcohol Treatment
Trial

Source: Tober *et al.* 2005

Training completion and duration

	Completed	Duration
Field experience	ns	ns
Profession	significant	ns
Educational level	significant	ns
Treatment type	ns	significant
Treatment site	significant	significant

Training completed by educational level and professional group

	Training completed	
	No (%)	Yes (%)
<i>Educational level</i> ¹		
< 1 st degree	13 (43)	17 (56)
1 st degree +	7 (17)	35 (83)
<i>Professional Group</i> ²		
Medical practitioner	0	12 (100)
Nurse	13 (37)	22 (63)
Other professional	7 (28)	18 (72)
Total	20 (28)	52 (72)

1 Chi-squared with 1 degree of freedom = 6.2 (p = 0.013)

2 Chi-squared with 2 degrees of freedom = 6.1 (p = 0.048)

Training completed by service and treatment assigned

	Service ¹					Treatment ²		Total
	1	2	3	4	5	MET	SBNT	
Trainees	17	8	21	6	20	31	41	72
Completed	10 (59%)	7 (88%)	13 (62%)	4 (67%)	18 (90%)	22 (71%)	30 (73%)	52 (72%)

1 Chi-squared with 4 degrees of freedom = 6.8 (p = 0.15)

2 Chi-squared with 1 degree of freedom = 0.04 (p = 0.90)

The Dodo Bird Verdict



“everybody has won and all must have prizes”

Conclusion



all treatments are equal
but some treatments are more equal than others

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Thank you. Any questions?