



## Proof of impact

With RAPt's Island Day Programme recording positive outcomes from its first three years, chief executive **Mike Trace** challenges other community services to contribute experiences to an evidence base that could help judge the effectiveness of this model of treatment

When RAPt set up a structured 12-step day programme in Tower Hamlets in 2006, it was to some extent an experiment. We were seeking to demonstrate that clients could succeed in taking on the challenges of a demanding abstinence-based programme, while living in the community where their drug problems had developed (*DDN*, 27 February 2006, page 10). We were also aware that we would need to engage the South Asian communities in the area in this form of treatment, and to direct them to the self-help structures of the various fellowships. While the road to successful recovery has by no means been easy, we are proud of the results achieved by our Island Day Programme (IDP) team, and the many inspiring stories from programme participants.

Despite the fact that structured day programmes have been an integral part of the menu of services promoted by the National Treatment Agency (NTA) since its inception, we have been struck by how few DATs have specifically commissioned services that have a clear programme structure, and a clear treatment objective of achieving and maintaining abstinence. Most day centre services seem to have broad intake criteria, a flexible programme, and a range of outcome objectives covering health, social and reintegration domains.

Flexibility in services to meet client needs is obviously a good thing, but there is a difference between what is essentially a tier 2/3 advice and support service, and an intensive and structured programme that has abstinence as the primary objective. There have been very few of the latter type of day programmes developed in recent years, making it difficult to develop an evidence base of their impact and effectiveness. We have therefore been grateful to the Tower Hamlets Drug Action

Team for its willingness to commission a new service to meet the demand for 12-step abstinence based treatment among the local communities, and have worked with the officials there to gain an understanding of the impact of the service on the participants, their families, and the community as a whole.

The RAPt Island Day Programme is an abstinence based structured programme for men and women aged 18 or over who live in the London borough of Tower Hamlets, and it is based on the principles of the 12-step fellowships of Narcotics Anonymous and Alcoholics Anonymous. Clients need to be 24 hours free from drugs and alcohol on arrival, they are expected to commit to daily attendance from 9.30 am to 4.30pm Monday to Friday, and their abstinence is assessed through urine, saliva and breath testing. The programme is intensive and looks at a fundamental change in attitude and behaviour, so the treatment has to tackle the contributory factors to participants' dependent drug and/or alcohol use. It is delivered by trained counsellors, social workers and drug workers.

There are three phases to the programme. The first phase looks at enhancing motivation, preparation for treatment and induction, and takes up to eight weeks.

Next is the primary phase, which is group work – apart from the individual counselling sessions – lasting at least 12 weeks. Sixteen facilitated groups a week include group therapy, working through steps one to three, lectures, workshops, health education, and activities.

Phase three is aftercare – a part-time support group for up to 12 months which covers relapse prevention, recovery based workshops, and housing and ETE (education, training, employment) support. IDP also facilitates meetings for clients who wish to invite and involve their family members or significant others in their recovery programme.

Since its inception, the IDP has admitted over 200 participants, 49 per cent of whom have been from ethnic minority communities. Consistent with the diversity of the Tower Hamlets population, we have a particular concentration of clients of Bangladeshi origin, who make up 25 per cent of the total. We have found that clients from all communities have engaged with the programme equally well, with retention and completion rates slightly higher for Bangladeshi than for white British clients.

Over the three full years for which statistics are available, the programme completion rates (ie the percentage of those on the structured programme who graduated) have been as follows: 31 per cent in 2006/7; 34 per cent in 2007/8; and 45 per cent in 2008/9.

Viewed from the perspective of a structured abstinence based programme, delivered to a high-need client group in a day centre setting, we consider these completion rates to be a great achievement. In terms of the key measure by which the DAAT is assessed, we retain 86 per cent of our clients in treatment for at least 12 weeks.

As at the end of April 2009, the Island Day Programme had produced a total of 78 graduates – individuals with a long history of drug dependence who had made a commitment to remaining abstinent, had achieved a prolonged period of abstinence through a very challenging period, and who had made solid connections with the relevant fellowship support networks to maximise their chances of maintaining good progress.

We have not yet conducted a full follow up study on the graduates of the Island Day Programme, but there are promising indications that a high proportion of them are staying drug and crime free.

Currently we have three clients from the aftercare phase of the programme who are working as volunteers with RAPt's 'Lighthouse' prison exit team, which meets released prisoners and escorts them to community service appointments. Another eight graduates have become IDP peer supporters, who pass on the recovery message to others in the community. Many other IDP graduates are doing voluntary work with other organisations like hostels and advice services.

We particularly encourage graduates of our programmes to get the necessary qualifications to build a career – eight are currently studying for, and a further two have completed, NVQ level 3 in health and social care with St Giles Trust. One graduate now has a paid job in Tower Hamlets council.

While the evidence on the effectiveness of this particular attempt by RAPt to deliver high quality abstinence treatment in a community setting is still in development, we have proved that this model of treatment can be effectively delivered, and can deliver strong outcomes for participants from all communities, with a history of high levels of dependence. We call on all other providers of this modality of treatment to share their experiences and outcomes, so that the NTA and NICE can develop a view on the strength of the evidence, and be more robust in supporting the delivery of abstinence based treatment within day centre settings.

## Case studies

### From drug dealer to treatment mentor

Robert\* is a 34-year-old man of mixed race, who was brought up in East London in an area where there are huge drug problems. He started using drugs at the age of 13, quickly became a poly drug user, and it became problematic, affecting his education and getting him involved in gangs and other crimes.

'I used to take anything and everything,' he said, looking back to a time when he was selling drugs, robbing drug dealers, getting involved in fights and was stabbed, chopped and shot – behaviour that continued for 15 years. He went to court, was put on a Drug Rehabilitation Requirement (DRR) and was offered residential treatment, which he accepted and completed.

After completing treatment Robert was scared to come back to the same community where he was actively using and did not feel confident about remaining abstinent. At this time he heard about Island Day Programme, got himself referred in December 2007 and completed and graduated treatment in February 2008. He is proud to have been drug and alcohol free over two years now – he is back living with his family, has sorted out his accommodation, got married early this year and succeeded in removing his children from the child protection register.

Six months into his recovery he started volunteering for RAPt and became a peer supporter for IDP in September 2008. In November 2008, he started studying for NVQ level 3 in advice and guidance. He successfully completed his placement at IDP and other detox units in Tower Hamlets, is still working for IDP as a peer supporter, and would like to gain more qualifications to work in the drug field 'to give something back to the community'. He wants to pass on the message that if he can overcome his addiction then anyone can do it, should they want to.

### From out of control to independent

Nadia\* is 31-year-old Bangladeshi woman, a poly drug substance user who lived in East London. She suffered abuse as a child and felt drugs helped her deal with the emotions. She started using cannabis at 13, progressing to various other drugs, and was dependent on heroin by the age of 23. She had been able to hold down various jobs, but in the last year this had become more difficult because of her substance use, and she had to stop working. She then heard about Island Day Programme from people she met at a 12-step self-help meeting, some of whom had attended the programme and remained abstinent.

Nadia found abstinence difficult at first. She reported that she needed outside things 'like boyfriends and drugs' in order to deal with life, and found it difficult to address years of this behaviour. She relapsed once while she was on the programme, but with support and specific work to address these issues, she was able to complete the primary programme. She also said that she had difficulties with family members, but this had improved since her abstinence, and she had become much more aware of her behaviour and how this had contributed to her drug use.

Nadia graduated in June 2008 and engaged in aftercare for three months. She seems to be making changes in her behaviour and taking responsibility for her recovery and life. She still attends 12-step fellowship meetings, has built up a good support network in her community and is now established and stable in her own accommodation. This is a significant achievement for Nadia as she is experiencing independence and stability for the first time in her life. She feels IDP was responsible for the foundation of her recovery.

*\*Names in these case studies have been changed.*