



RESEARCH SNAPSHOT:

An Integrated Relapse Prevention Program for Women with Alcohol Use Disorder

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What is this research about?

Many women in Canada drink alcohol. Compared to men, women who drink have a higher risk of alcohol-related problems and face more barriers to accessing appropriate treatment and supports— including medications that help reduce cravings for alcohol. In response to these challenges, the Jean Tweed Centre tested whether a program that combines trauma-informed relapse prevention counselling with anti-craving medication is helpful to clients and feasible to implement.

What did the researchers do?

Adult women accessing services at the Jean Tweed Centre for alcohol use disorder were invited to participate.

Relapse Prevention Counselling

Participants received individualized counselling sessions twice a month. Counselling focused on coping strategies and skills to avoid, tolerate, and mitigate triggers for alcohol use. Services were trauma-informed, and as applicable, focused on the ways that alcohol is used to cope with past traumatic experiences.

Anti-Craving Medication

Participants completed an assessment with a nurse practitioner and were then prescribed an anti-craving medication (e.g., Naltrexone, Acamprosate). The nurse practitioner met with participants every two weeks to monitor their progress. If participants wanted to continue the medications at the end of the program, the nurse practitioner was available to help transition participants to community based primary care services.

Measuring program impact and experiences

Participants completed questionnaires at the beginning, about half-way through, at the end, and two-weeks post-program. These questionnaires measured how often participants used alcohol, their cravings for alcohol, and their confidence to abstain from drinking. They were also asked about their overall satisfaction with the program and perceived impacts.

What did the research find?

The study was done during the early stages of the COVID-19 pandemic, which made it difficult to recruit participants. Of the four participants enrolled, three participants completed the program.

Only one participant reported drinking during the study period and her pattern of use decreased over time. In general, all clients reported that their craving for alcohol lessened over the study period and their confidence to abstain from drinking increased. Participants valued the opportunity for one-on-one supports and shared that the regular check-ins with their counsellor and nurse practitioner helped them to stay focused and on track with respect to their alcohol use goals.

Only one participant reported still using the anti-craving medication at the follow up period. Of the two that did not continue, one participant stopped because the medication caused drowsiness and the other could not afford the cost of the medication.

Overall, participants were very satisfied with the program and felt that it was consistent with principles of trauma-informed practice.

Limitations of the research

Only a small number of women were enrolled in the study and their results were not compared to a group of women with similar concerns who did not participate. Because of these limitations, it is not possible to conclude that the positive impacts reported by the participants would generalize to other women with alcohol concerns.

What is recommended?

Explore future opportunities to extend and expand on this pilot study – for example, by engaging more and diverse women to better understand the benefits; and by exploring a peer-facilitated component that can enhance sustainability in the context of limited resources.

Advocate for increased access to anti-craving medications in primary health care and mental health and substance use treatment services.