

DO PERCEPTIONS OF AN ABSTINENCE-BASED TREATMENT PREDICT MOTIVATION, TREATMENT ATTENDANCE AND ALCOHOL OUTCOMES AMONG MARGINALIZED INDIVIDUALS WITH SEVERE ALCOHOL USE DISORDERS?

1. ABSTRACT

Background: For decades, abstinence-based approaches have dominated treatment of alcohol-use disorders. More severely affected and vulnerable groups, however, do not typically show long-term benefits of these efforts, and studies have shown relatively poor treatment outcomes for this population (Gordon et al., 2006). Chronically homeless individuals, for example, often experience continued heavy alcohol use and related problems despite multiple abstinence-based treatment attempts (Larimer et al., 2009; Collins et al., 2012). On the other hand, the literature shows that a positive perception of abstinence-based treatment facilitates treatment entry (Wild & Wolfe, 2009) and is associated with greater treatment attendance and better alcohol outcomes among these individuals (Erickson, Stevens, McKnight, & Figueredo, 1996). It is therefore important to understand the associations between attitudes regarding abstinence-based treatment, interest in treatment, motivation to change and alcohol outcomes.

Aims: There are two primary aims of this study. The first aim is to qualitatively describe the content and valence (i.e., positive, neutral or negative) of perceptions of an abstinence-based program (i.e., Alcoholics Anonymous) among these individuals. The second aim is to test whether perception of this abstinence-based program is associated with abstinence-based substance abuse treatment attendance, perception of treatment importance, motivation to change and alcohol outcomes.

Hypothesis: It is hypothesized that a positive perception of an abstinence-based program will be associated with more treatment attendance and will predict greater motivation to change than negative and neutral perceptions. Further, participants with a positive perception will report that seeking treatment is more important to them than participants with neutral and negative perceptions. Finally, participants with a positive perception will evince greater decreases in alcohol use and related problems than people with negative and neutral perceptions.

Methods: This study will be conducted as a secondary analysis of a larger two-year evaluation (Larimer et al., 2009; Collins et al., 2012). Participants (N=95) are chronically homeless individuals with alcohol use disorders who received a project-based Housing-First intervention. Content and valence of perception of abstinence-based treatment (i.e., positive, negative, neutral) will be coded from participants' answers to an open-ended question about their perception of an abstinence-based program (i.e., AA). Treatment attendance and importance of treatment will be measured with single items from the Addiction Severity Index (McLellan, Kushner, & Metzger, 1992), and motivation for treatment/change will be measured using the SOCRATES (Miller, 1996). Alcohol outcomes will include alcohol quantity, problems and dependence. A content analysis method will be used to extract common themes and valences of participants' perceptions of abstinence-based treatment. Then, population-averaged generalized estimating equations will be used to test the quantitative hypotheses (Zeger & Liang, 1986).

Expected value: We expect this study will add to a better understanding of how to develop more flexible and suitable alcohol treatments that fit better with the needs and expectations of these underserved and vulnerable individuals.