

Web-based Cognitive Behavior Therapy for Substance Use Disorders: A Randomized Trial of *Going Forward*

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Today's Talk

- Overview the impact of substance abuse on the workplace
 - How Internet-based approaches can help
- *Going Forward*
 - Theoretical background
 - Components
 - RCT and findings

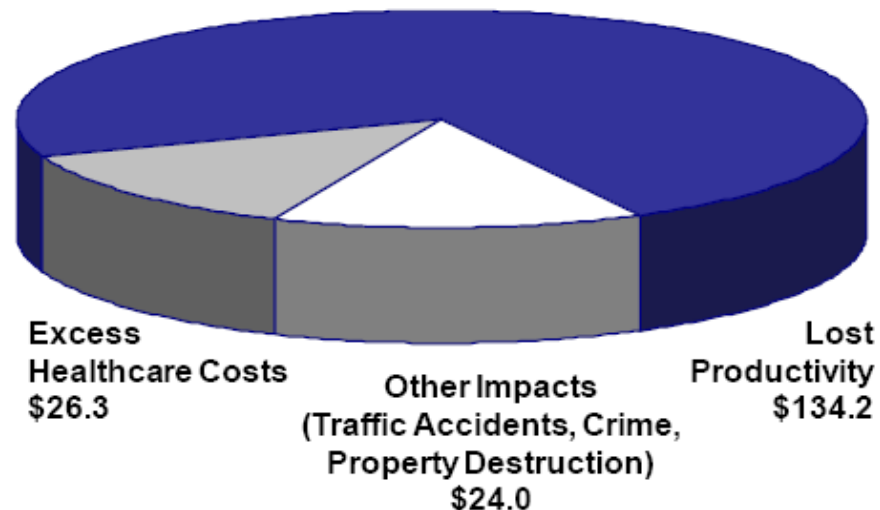
Employers: Why Us?

- Employers ask 4 essential questions:
 - What is the cost of the problem?
 - How much will it cost to fix it?
 - How disruptive will it be?
 - What is the value proposition?

Scope of the Problem

Health Problem	Indirect Cost	Year of Estimate
Alcohol Abuse & Dependence	\$134 Billion	1998
Drug Abuse & Dependence	\$129 Billion	2002
Mental Disorders	\$94 Billion	1992

**Cost of Alcohol Problems in the U.S., 1998
(in Billions)¹¹**



Why do Employers Bear Most Costs?

- 76 percent of people with drug or alcohol problems are employed
- These workers are also not getting treated
 - Only 2.4m, of the 23.2m needing treatment for drug or alcohol use, received it (National Survey of Drug Use and Health, 2007)

Breaking Down the Employer Costs: Reduced Productivity

- Absenteeism: Alcoholism is estimated to cost 500 million lost workdays annually
- Others suffer
 - 14% of employees had to re-do work within the preceding year
 - More than half of working family members report that their own ability to function at work was negatively impacted

The Workplace is the *Perfect* Place for Substance Abuse Interventions

Country	Cocaine	Cannabis	Tobacco	Alcohol
Colombia	4.0	10.8	48.1	94.3
Mexico	4.0	7.8	60.2	85.9
US	16.2	42.4	73.6	91.6
Belgium	1.5	10.4	49.0	91.1
France	1.5	19.0	48.3	91.3
Germany	1.9	17.5	51.9	95.3
Italy	1.0	6.6	48.0	73.5
Netherlands	1.9	19.8	58.0	93.3
Spain	4.1	15.9	53.1	86.4
Ukraine	0.1	6.4	60.6	97.0

- “The period of high risk for initiating use of the surveyed substances—previously late adolescence through the early 20s—now extends into the late 20s” (Degenhardt et al., 2008)

Solutions to Workforce Substance Abuse: Web-Based Approaches

- Can reach large numbers of users
- Perfect fidelity across time and place
- Flexibility in accessing
- Effective for addressing sensitive issues such as drug abuse
- Decreased costs

Going Forward: Guiding Principles I

- Based on NIDA manual “A Cognitive Behavioral Approach to Cocaine Addiction”
- Learning processes play a key role in drug abuse/dependence
 - Identify and recognize determinants of drug use
 - Intrapersonal (e.g., negative/positive emotions, reduce withdrawal symptoms)
 - Interpersonal (e.g., particular environmental cues)
 - Skills/resources in high-risk situations

Going Forward: Guiding Principles II

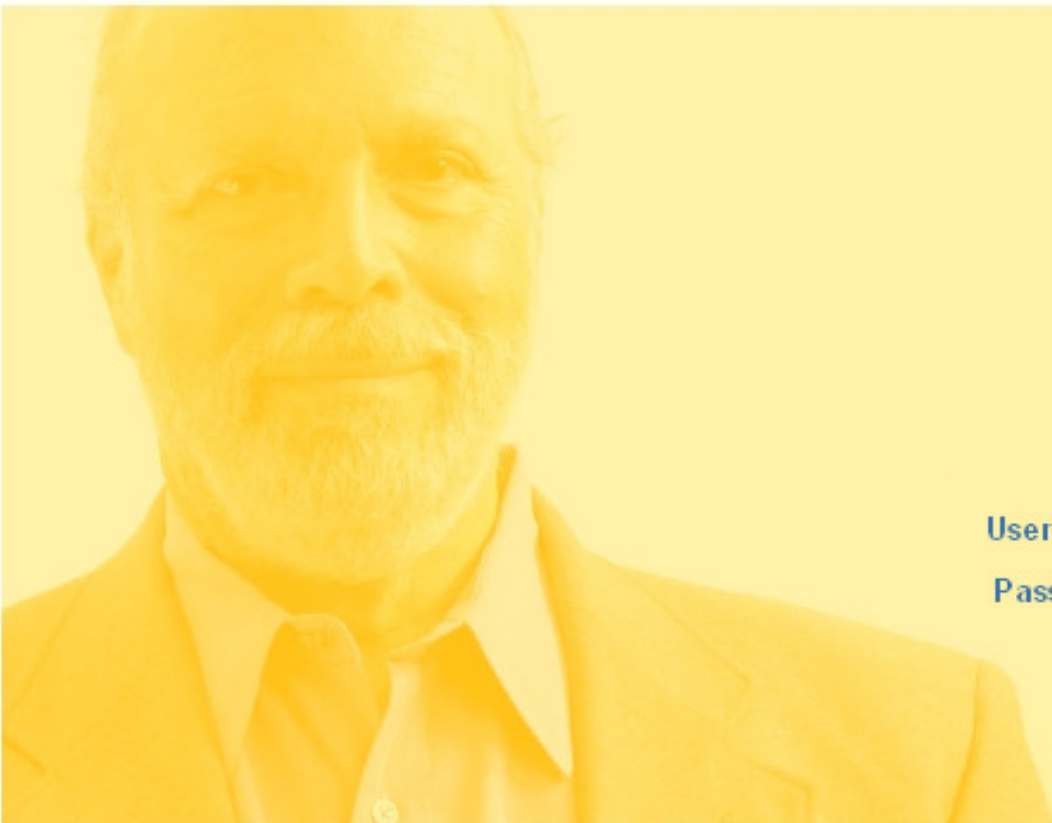

- Help patients recognize situations associated with drug use
 - Avoid those situations that can be avoided
 - For those that can't, coping skills are taught

Going Forward:

MultiMedia Health Education Principles

- Synchronize pictorial and verbal information
 - Avoid text-only screens
- Allow learners to control and manipulate
- Encourage active information processing
- Tailor to current situation

Going Forward: Personal Log-in



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Going Forward: Skills Acquired

www.goingforwardonline.org/coursepage.asp

Goingforward Hide Screen 





About this Program | What You'll Learn

- Introduction
- ✓ Opening
- About this Program**
- Understanding Substance Abuse
- Coping with Craving
- Clean, Drug-Free and Alive
- How to Say No
- Seemingly Irrelevant Decisions
- An All Purpose Plan
- If You Slip
- Discussion Forum
- Resources

How to **RECOGNIZE** high-risk situations

How to **AVOID** these situations

How to **COPE** with situations that can't be avoided

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Going Forward: Interactivity

www.goingforwardonline.org/coursepage.asp

Going forward Hide Screen

- Introduction
- Understanding Substance Abuse
- Coping with Craving
- Clean, Drug-Free and Alive
- How to Say No
- Seemingly Irrelevant Decisions
 - Introduction
 - Recognizing Decisions**
 - Making Smart Decisions
 - Wrap-up
- An All Purpose Plan
- If You Slip
- Discussion Forum
- Resources

Recognizing Decisions | Joe's Story: First Decision Point

Please click on Joe's first seemingly irrelevant decision that put him in a high risk situation.

When his wife was out of town...

- Joe drove home from work alone.
- Joe felt a little bored so he decided to take the long way home.
- Joe drove past his favorite bar where he had used before.

back ▶ ↺ 00:25 / 00:25 next ▶

Going Forward: Recruitment

- Partnered with United Behavioral Health's EAP
 - Receives approximately 2000 calls per day
 - Approximately 4% are substance use related (i.e., 80 calls)
- UBH identified all members receiving intensive outpatient treatment for any type of substance use disorder within the last 6 months
 - Randomly selected 1,000 members

Going Forward: Procedures

- Inclusion criteria
 - At least 18 years of age
 - Currently receiving, or completed within the last 6 months, treatment for any type of substance use disorder
 - Not currently using illegal drugs
- 153 participants completed baseline
 - Randomly assigned to *Going Forward* or TAU
 - 10 weeks
 - Immediate follow-up
 - 3 months follow-up

Going Forward: Baseline Demographics

	Experimental	Control
Age	M = 38.8 (9.6)	M = 37.3 (11.1)
Gender		
Male	35 (44.9%)	33 (44.0%)
Female	43 (55.1%)	42 (56.0%)
Education		
< High school	2 (2.6%)	4 (5.3%)
High school	26 (33.3%)	14 (18.7%)
Vocational	5 (6.4%)	8 (10.7%)
Some college	24 (30.8%)	40 (53.3%)
4 year college	16 (20.5%)	7 (9.3%)
>4 year degree	5 (6.4%)	2 (2.7%)
Drugs past 30 days		
Yes	20 (26.7%)	13 (17.8%)
No	55 (73.3%)	60 (82.2%)

Going Forward: Outcomes

■ Primary

– Lapse

- Yes/no item of drug use in the past 30 days

– WHO Health and Workplace Performance

- Absenteeism

- Presenteeism (ratio of own performance to average worker's performance)

■ Secondary

– Knowledge of relapse prevention skills

– Self-Efficacy

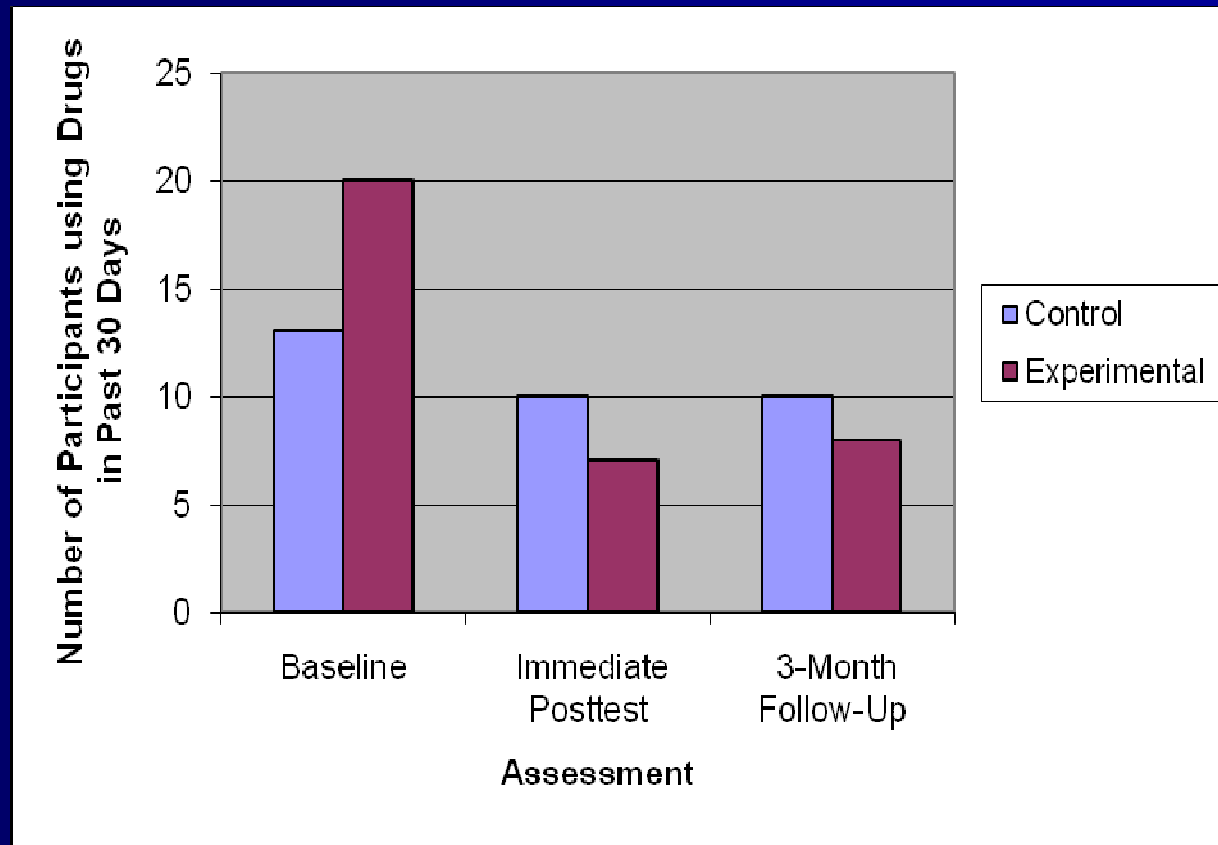
- Negative affect
- Positive social situations
- Craving
- Physical concerns

Going Forward: Utilization and Model

- Of the 78 people who were randomized into the experimental condition
 - 57 (73%) viewed at least one module
 - 33 (42%) viewed the entire program
- Growth curve modeling
 - Estimated each participant's growth trajectory
 - Examined if the amount of variance in that trajectory could be accounted by condition
 - Examined if amount of program utilization could account for growth trajectories

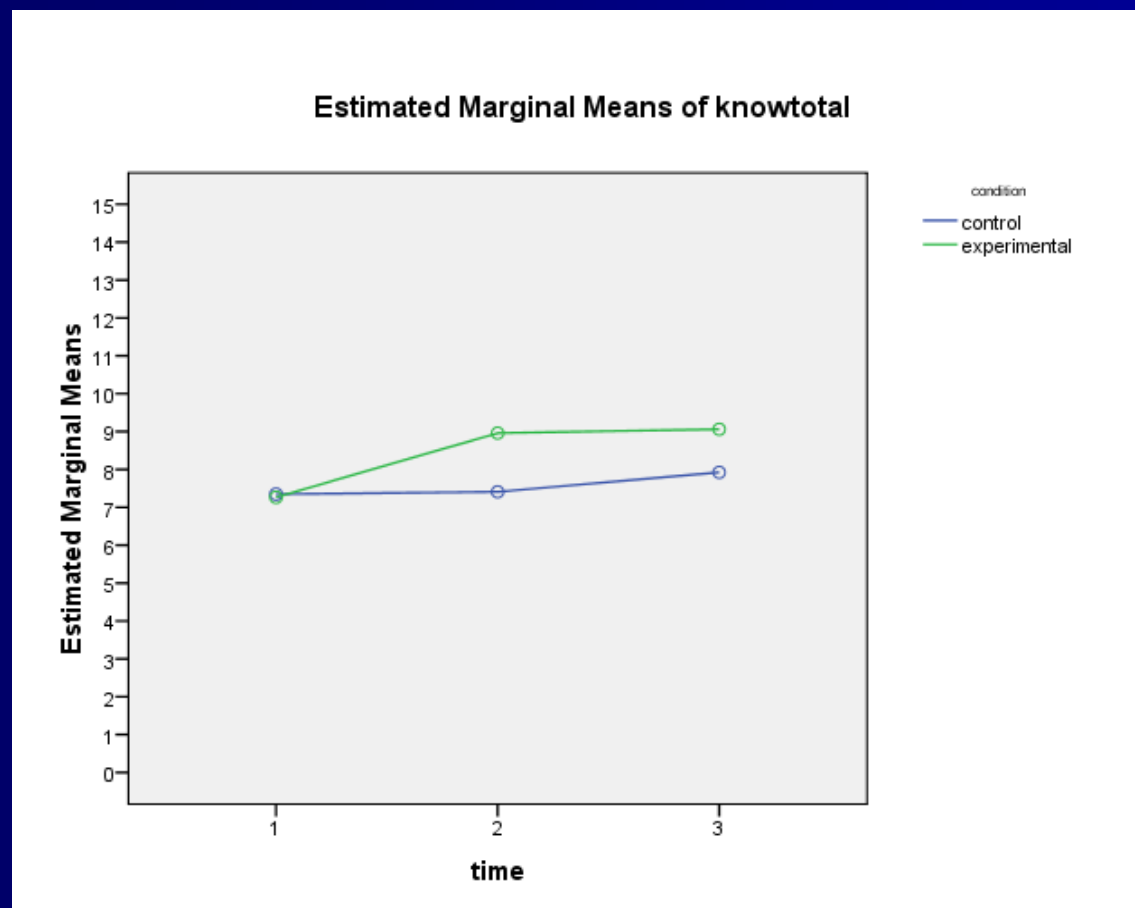
Going Forward: Effect of Condition

- Primary
 - Work performance: No effect
 - Lapse ($t = 1.22$, n.s.)



Going Forward: Effect of Condition

- Secondary
 - Self-efficacy: No effect
 - Knowledge ($t = 2.79, p < .05$)



Going Forward: Effect of Utilization

■ Primary

- Work performance: No effect
- Lapse: No Effect

■ Secondary

- Knowledge: $t = 2.70, p < .05$
- Self-Efficacy
 - Negative affect: $t = 2.06, p < .05$
 - Positive social situations: $t = 2.24, p < .05$
 - Craving: $t = 1.45, n.s.$
 - Physical concerns: $t = 2.22, p < .05$

Going Forward: Promise and Challenge

■ Promise

- Some hints that those in the program condition were less likely to lapse
- Secondary measures of knowledge and self-efficacy were positively impacted
 - Especially among those who fully viewed the entire program

■ Challenge

- Utilization was disappointing
 - Online forum was included but not used
 - Participants were not paid for utilization