Foreword

The Independence Initiative is a Merseyside wide but Sefton based relapse prevention service that deals with clients who are recovering from drug misuse problems. We focus solely on one-to-one interaction in order to provide specifically tailored action plans for our clients. We provide a wide range of interventions including counselling, pre-vocational training, complementary therapies and information technology training as well as help for clients wishing to access mainstream training, educational or employment opportunities.

At the Independence Initiative we apply a unique model of intervention where staff act as ‘brokers’ helping clients to organise and attend training/education or gain employment. All interactions are on a one-to-one basis with the view that this removes our clients from the presence of other recovering drug users and therefore minimises the risk of relapse. Another facet of this unique strategy is that we do not accept self-referrals, all clients are referred by other agencies in consultation with staff here at the Independence Initiative. Individuals must make a commitment to long term change before they can be referred to the service.

With a view to ensuring that we are correctly addressing the needs of our clients, and are being effective in improving their lives, it was decided that an independent evaluation should be carried out. What follows is a summary of these findings, which I feel are encouraging for all those involved with the Independence Initiative. Finally, I would like to offer my thanks to the staff and the clients at the service, whose co-operation made this evaluation possible and whose hard work and perseverance has given rise to the favourable findings in this report.

Dave Roberts
Chief Executive
The Independence Initiative

Evaluation Objectives

In January 2001 the Centre for Public Health (formerly the Public Health Sector) at Liverpool John Moores University was commissioned to undertake an evaluation of the impact of the work of the Independence Initiative. The objectives of this evaluation were as follows:

To:
• Examine the impact of the Independence Initiative’s service provision on their client group by analysing client progress within specific areas of well-being
• Examine the effectiveness of and individuals’ perceptions regarding the Independence Initiative’s unique approach to intervention
• Explore the relationship with and perceptions of workers at other key drug related services in the area
• Collate data relating to the uptake of Independence Initiative interventions and service activity

In as much as this evaluation aimed to assess the effectiveness of the Independence Initiative it also aimed to evaluate the unique model of intervention applied at the service.

Methodology

➢ Analysis of data relating to the Independence Initiative reported to Drug Monitoring Unit (January 1998 to September 2000).

➢ Re-examination of data from the project ‘The Development of Outcome Monitoring Mechanisms for Drug Treatment Services within Sefton’ (McVeigh & Bellis, 2001), in which 21 Independence Initiative clients, a number of drug service commissioners and the Independence Initiative’s Chief Executive were interviewed.

➢ Interviews conducted with ‘new’ (in contact less than 6 months) and ‘established’ (in contact between 6 months and 2 years) Independence Initiative clients. The original randomly selected sample at interview one (May/June 2001) contained 25 ‘new’ and 28 ‘established’ clients. This reduced to 17 ‘new’ and 22 ‘established’ clients at interview two (January 2002). Issues covered included drug misuse, criminality, health and well-being, and employment, education and training. In addition 6 ‘long-term’ clients (in contact for over 3 years) were interviewed regarding their current circumstances and their experience of the Independence Initiative.

➢ Telephone interviews with key personnel at other drug related services within Merseyside. Services included a community drugs team, a drugs counselling and support service, a probation drugs service, a residential rehabilitation service and an inpatient detoxification service. Topics covered included perceived aims of the Independence Initiative, the service’s strengths and weaknesses, referral issues, and future development.
Key Findings

- Figures from the Inter Agency Drug Misuse Database suggest that over recent years (January 1998-September 2000) the intake of the Independence Initiative has expanded substantially, both numerically and geographically. Indeed, numbers of active clients rose from 69 to 157 in this period, and whilst in January 1998 99% of clients resided in Sefton, by September 2000 this proportion had dropped to 76%.

- The increase in client numbers has occurred consistently across age and sex. This is important as the National Treatment Agency (Department of Health, 2002) and the National Drug Strategy (Stationary Office, 1998) have identified females and individuals under the age of 25 as potentially under-represented in drug services. Proportional increases identified in this research suggest that this is not the case for the Independence Initiative.

- Data surrounding drug use suggests that clients are being referred to the Independence Initiative at an earlier point in their drug rehabilitation. Between January 1998 and September 2000 the proportion of clients reporting methadone as their main problem drug substantially reduced, and the proportion stating heroin as their main problematic drug increased.

- There is a particularly high level of consensus between clients, the Chief Executive of the Independence Initiative and commissioners regarding the aims and priorities for the service - i.e. stabilisation of lifestyle and the achievement and maintenance of a drug free status. There is also a high level of consensus and awareness amongst these groups relating to the specific services provided by the Independence Initiative.

- There is evidence that contact with the Independence Initiative has a positive impact on many areas of client’s lives. For example:
  - Reductions in self-reported levels of drug use particularly heroin and crack cocaine.
  - Greater levels of perceived control of drug problems.
  - Reductions in both arrests and self reported criminal activity.
  - A reduction in the proportion of clients receiving methadone prescription and also a slight reduction in the mean dosage level.
  - Positive effects on indicators of general health and well-being e.g. reductions in A&E attendance, reduced hospital in-patient nights and increased satisfaction with physical health, mental health and quality of relationships.
  - Higher levels of clients in employment, training, education or voluntary work.

- Qualitative feedback from clients was overwhelmingly positive and reveals high levels of satisfaction with the Independence Initiative’s interventions and service. Areas highlighted as particular strengths include the one-to-one model used and the assistance given with accessing education and employment, as well as the role of staff in general, and key workers in particular.

- Referral agencies also provided considerable positive feedback relating to the Independence Initiative. As with clients, the one-to-one approach of the service and the protection this affords vulnerable drug users was particularly praised. In addition, staff at the Independence Initiative and the range of services offered are highly regarded. Referral agency staff reported that they have confidence in the high level of service provided and the environment in which this is delivered.

- Agencies felt that the expansion of the Independence Initiative was a positive development and had not compromised the quality or standard of service provision, indeed, several agencies stated that continued expansion would be beneficial to drug service provision across Merseyside.

- Groups interviewed highlighted some potential areas for development. These include issues raised by clients around overcrowding, the need for more resources and the location of the service. In addition, referral agency staff suggested that communication could be improved and feedback formalised. They also commented that more pre-referral contact with agencies would be beneficial and that the service needed to keep expanding both in terms of its premises and its intake (geographical and numerical).
Review of Independence Initiative Data Reported to Drug Monitoring Systems

According to data reported to the Inter Agency Drug Misuse Database (IAD), in the five six monthly periods covering January 1998 to September 2000 the Independence Initiative has expanded its client base both numerically and geographically. Indeed, client numbers have increased from 69 to 157 (See Fig.1) with geographical expansion characterised by the finding that in period one 99% of clients lived in Sefton whilst in period five only 76% resided there. In addition, the random sample selected for the interview section of this evaluation contained more Liverpool residents than Sefton residents, providing further support for this shifting trend. Figure 2 gives a representation of this geographical expansion.

The majority of the Independence Initiatives current clients are male (69%) and over 25 (82%). However, in light of the Government’s policy to ensure that women and young people are adequately represented in drug services (The Stationary Office, 1998) it is important to emphasise that these groups are not under-represented within the service. Indeed, proportions are in line with other services within Merseyside, and representation of these two groups has grown in proportion to the service’s increased overall intake.

It would appear that over time clients are being referred to the Independence Initiative at an earlier stage in their rehabilitation. This is demonstrated by changes in main problematic drug of misuse for clients over the period January 1998 to September 2000. Figures reported to the IAD show that the numbers of clients reporting methadone as their main problematic drug reduced considerably from 36 clients to a single client over this period. At the same time there has been a significant increase in the number of clients reporting heroin as their main problem drug.

Summary of findings from ‘Sefton Drug Services: Outcomes for Joint Commissioning and the new NHS’

Some interesting patterns emerged in findings from the Independence Initiative interviews carried out during the study that led to the report ‘Sefton Drug Services: Outcomes for Joint Commissioning and the New NHS’ (McVeigh and Bellis, 2001). Interviews were carried out with clients, the Chief Executive of the Independence Initiative and a group of five commissioners drawn from a range of organisations. Issues examined included specific intervention provision and priorities for the service.

Independence Initiative clients generally displayed high levels of awareness and uptake of most services provided by the Independence Initiative. This was especially true for counselling and complementary therapies (at least two thirds of clients had accessed these services), but there was also high uptake levels for family support, dependant child, and welfare advice services (each accessed by around six in ten clients).

Findings also revealed a high level of agreement between the three groups regarding the specific services offered by the Independence Initiative. For example, the majority of commissioners felt that blood borne infection services (something not offered by the Independence Initiative) should not be provided. However, there was some disagreement regarding alcohol care and criminal justice advice, services provided by the Independence Initiative and accessed by clients, which a sizeable proportion of commissioners (60% and 80% respectively) felt should not be provided.

There was consensus between the groups regarding the overall aims of the service. The areas proposed as priorities in service provision amongst all three groups were the stabilisation of lifestyle and the achievement of a drug free status. Compared to other services and intervention models examined in the study, the level of consensus for the Independence Initiative was particularly strong.
Profile
A total of 53 randomly sampled clients were interviewed, 25 ‘new’ clients (in contact for 6 months or less) and 28 ‘established’ clients (in contact for between 6 months and two years). Of this number, 39 completed follow-up interviews. The majority of interviewees were male, white British, and lived independently. The largest proportion of interviewees lived within the Liverpool Drug Action Team (DAT) area with smaller percentages living in Sefton, Wirral and Knowsley. The geographical distribution of the randomly selected interviewees lends support to suggestions that the service is expanding geographically.

Comparison of ‘New’ and ‘Established’ Clients at Interview One
Differences between ‘new’ and ‘established’ clients regarding drug use and criminality suggest that the Independence Initiative is having a positive impact on client’s lives. ‘New’ and ‘established’ clients have similar levels of historical drug use, however, ‘established’ clients report lower levels of current drug use than ‘new’ ones (14% to 28% respectively). In addition, self-reported criminal activity was significantly lower amongst ‘established’ clients with only 4% of this group reporting that they had committed a crime in the last 6 months compared to 24% of ‘new’ clients.

Comparison between Interview One and Two
It should be noted that the following comparisons are based only on those clients who attended both interviews, unlike figures above that utilise all data available at interview one.

The positive impact suggested by comparison of ‘new’ and ‘established’ clients is supported by evidence comparing responses from interview one and two. Improvements can be seen in drug use, criminality, treatment levels, and health and well-being as well as less pronounced benefits around employment, education and training.

Drug Use
In the period between interview one and interview two (May/June 2000 to January 2001) both ‘new’ and ‘established’ clients reported reductions in heroin (Fig. 3) and crack cocaine use (Fig. 4) (the priority drugs in the National Drug Strategy). From a client’s point of view it is important to feel in control of their drug problems and the Independence Initiative appears to be having a substantial positive effect in this area. Both ‘new’ and ‘established’ clients reported feeling more in control of their drug misuse at interview two than at interview one.

Criminality
Findings indicate a reduction in criminality in the period between interviews. Indeed, at interview one, four clients admitted having committed a crime (other than possession of an illicit substance) in the past six months, whilst all clients at interview two reported that they had not been involved in any criminal activity.

Drug Treatment
Findings reveal a drop in the number of clients receiving methadone from 39% at interview one to 23% at interview two (Fig. 5). Also, of the nine clients who were in receipt of methadone at interviews one and two, five had reduced their dosage in the period between interviews, and there was a slight overall reduction in the mean dosage of methadone from 37mg at interview one to 35mg at interview two.
Health and Well-Being

The Independence Initiative is having a positive impact on clients’ perceived health as well as their actual health. Clients reported fewer Accident & Emergency presentations and hospital in-patient nights (in the past 6 months) at interview two than at interview one. A&E presentation rates dropped from 0.49 to 0.2 (mean number in last 6 months) and in-patient nights reduced from 0.3 to 0.1 (mean number in last 6 months). In addition, clients rated their physical health, mental health and the quality of their relationships more highly at interview two than at interview one (Fig. 6). These findings evidence a general stabilisation of the lifestyle of Independence Initiative clients in addition to improved health and well-being.

Employment, Training and Education

Improvement from interview one to two is not as pronounced in this area as others, but interviews revealed some encouraging trends. Levels of full-time employment had increased amongst 'new' clients and had remained constant amongst ‘established’ clients. There was also a slight increase in the number of ‘new’ clients reporting that they were engaged in part-time employment, training, education or voluntary work. It could be considered a positive outcome that the levels of clients in receipt of sickness/invalidity benefits had decreased in the period between interviews.

Overall, findings suggest that the Independence Initiative is having a positive effect in the critical areas of its clients’ lives and this is reflected in qualitative feedback received which particularly praised the one-to-one approach of the service and the opportunities to progress towards employment, training or education.

There was some constructive criticism of the Independence Initiative, issues raised (many only after prompting) included overcrowding, the need for more resources and the travel required to attend the service. Many of the issues raised are being addressed by the service.

Client Interviews: Long-Term Clients

While the views of only a relatively small sample of long-term clients were obtained, they were able to provide a valuable insight into their contact with the Independence Initiative. All interviewees had a history of injecting polydrug use but indicated that they now had varying degrees of control over their problematic drug use. Three interviewees described themselves as ‘drug-free’, and the other three clients were taking relatively small amounts of one illicit substance each, only one was taking heroin.

Interviewees were engaged in diverse activities at the Independence Initiative, which they generally felt were highly beneficial. In addition, four individuals were engaged in employment or external training/education. This provides an indication of long-term clients ‘moving on’ from specialist interventions at the Independence Initiative into employment and mainstream education/training. The success of the service in facilitating this transition was supported by client comments, which emphasised the services value in aiding their re-integration into mainstream society.

Long-term clients felt that the Independence Initiative had been particularly effective in helping to stabilise their lifestyle (the main priority for service provision according to the Chief Executive and service Commissioners). The provision of constructive activities and support in overcoming drug problems were also considered to have been particularly effective (Fig. 7).

All interviewees provided positive feedback relating to their contact with the Independence Initiative, describing how the service had been successful in combating their problematic drug use and providing structure to their lives. In addition, clients were able to formulate constructive criticism on specific aspects of service delivery such as the need for more resources and greater flexibility in appointment booking.
Referral Agency Interviews

Interviews with staff representatives from referral agencies paint a positive picture of the Independence Initiative. Understanding and recognition of the value of the Independence Initiative’s philosophy and the unique model of intervention was high amongst referral agency staff. Indeed, interviewees cite the one-to-one ethos of the scheme and the protection of vulnerable clients as particular strengths of the Independence Initiative, as did the clients themselves.

Areas identified by the referral agency staff as needing development mirror issues raised by clients such as the geographical location of the service, and the size of the premises. An issue raised by several referral staff was the need for increased feedback to referral agencies, whilst some staff felt information exchange was good, others felt it was ‘patchy’ and that there was a need for formalised communication protocols.

The need for pre-referral interaction between the Independence Initiative and other agencies was also highlighted as an area for development. It was suggested this would be beneficial in ensuring all clients who are sufficiently stable and motivated have the opportunity to attend the Independence Initiative, and would also mean referral could be set as a target for clients.

Referral agency staff were confident that the Independence Initiative was maintaining its high standards. Indeed, most staff stated that they had referred an increasing number of clients over the past 2 years. Despite the increase in numbers of clients at the Independence Initiative, referral agency staff had received little or no negative feedback about the service.

Increases in referrals were mostly attributed to the good performance of the service and confidence in referring clients to the organisation. In addition, referral agency staff made reference to the requirement to help clients achieve more than the stabilisation of their drug problems, and to facilitate the on-going development of clients in achieving their potential and re-integration into ‘mainstream society’.

Summary

The overriding themes to emerge from this research are those of development, consensus and effectiveness. The Independence Initiative demonstrates development in a focused direction with positive consequences for clients and effectiveness throughout the service.

The Independence Initiative has developed its client base in recent years, increasing intake and attracting clients from more diverse geographical areas, whilst still maintaining a representative client population. The aims of the service are well known; clients, the Chief Executive and commissioners all agree on the priorities of stabilisation of lifestyle and achievement/maintenance of a drug free status. Referral agency staff also demonstrate a good knowledge of the aims and ethos of the service. Clients and referral agency staff alike praise the service ethos, particularly the one-to-one approach which interviewees feel protects vulnerable drug users and minimises the danger of relapse.

The service has a positive impact on its clients’ lives, maybe the most important measure of its effectiveness. Clients report reductions in drug use, treatment levels, and criminality as well as increases in their perception of control over their drug habit. Better quality of lifestyle is evidenced by reduced A&E presentations and hospital in-patient nights, as well as improved perceptions of the quality of physical health, mental health and relationships. There is also evidence of clients’ reintegration into society with some increases seen in levels of employment, training, education and voluntary work.

References


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The Independence Initiative: An evaluation of effectiveness

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