

# One-year Training on Integrated Cognitive-Behaviour Intervention for Social Workers working with Youth Drug Abusers - BDF150022

1 May 2016 to 31 October 2018

The University of Hong Kong

Department of Social Work & Social Administration



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**Social Work &  
Social Administration**  
The University of Hong Kong



## One-year Training on Integrated Cognitive-Behaviour Intervention for Social Workers working with Youth Drug Abusers - BDF150022

### Content

- Introduction
- Project Content
- Output and Outcome Evaluation Results
- Conclusion

## Introduction



- Youth drug abuse is a major problem in Hong Kong. Given the disconcerting pattern of using multiple kinds of drugs in adolescents (11-20 years old) and alarming rising trend of drug abusers at 21-30 years of age in recent years and of their psychosocial consequences on society, there is an urge need to develop effective treatments and relapse prevention for youth drug abusers. At present, there is a lack of a systematic training for anti-drug social workers to use psychological treatments to work with youth drug abusers in Hong Kong.
- “One-year Training on Integrated Cognitive-Behaviour Intervention for Youth Drug Abusers” project aims at developing an integrated cognitive-behavioural therapeutic (CBT) model for helping young drug abusers. It will provide systematic training, intervention and supervision in two phases. Phase 1 provides comprehensive training workshops for frontline anti-drug social workers in the anti-drug field. In Phase 2, social workers will deliver integrated CBT to young drug abusers intends to train social workers to acquire knowledge and skills in implementing the treatment model.

## Project Content



Phase I: The 3-month anti-drug social worker training (3-months)

- To provide training for 120 social workers to be equipped with knowledge and clinical skills in working with youth with drug abuse

Phase II: The 9-month intervention and group supervision (9-months)

- To provide advanced clinical skills training and supervision in cognitive behavior therapy for 40 anti-drug social workers to work with youth with drug abuse

## Project Content



- Phase I: 3-month anti-drug worker training

Session 1 : Knowledge related to drug abuse (3-hours)

Session 2 : Knowledge of existing services for drug abusers & Relapse prevention (3-hours)

Session 3 : Engaging the family in intervention (3-hours)

Session 4 : Introduction to various early detection and assessments tools (3-hours)

Session 5-6 : Motivational interviewing (6-hours)

Session 7-12 : CBT training (18-hours)

## Project Content



- Phase I: 3-month anti-drug worker training

Session 1: Knowledge related to drug abuse (3-hours)

Session 2: Knowledge of existing services for drug abusers & Relapse prevention (3-hours)



*Speaker: Dr. Cheung Wai Him, Psychiatrist  
Dimensions Center*

## Project Content



- Phase I: 3-month anti-drug worker training

Session 3: Engaging the family in intervention (3-hours)



*Speaker: Ms. Silvia Cheng, Social Worker  
Caritas HUGS Center*

Session 4: Introduction to various early detection and assessments tools (3-hours)



*Speaker: Dr. Cheung Wai Him, Psychiatrist  
Dimensions Center*

## Project Content



- Phase I: 3-month anti-drug worker training

Session 5-6: Motivational interviewing (6-hours)



*Speaker: Ms. Cindy To, Clinical Psychologist  
Kwai Chung Hospital*

## Project Content



- **Phase I: 3-month anti-drug worker training**

Session 7-12: CBT training (18-hours)



*Speaker: Prof. Daniel Fu Keung Wong  
Department of Social Work and Social Administration,  
The University of Hong Kong*

## Project Content



- **Phase II: 9-month intervention and group supervision**

Intervention conducted by trained anti-drug workers

The whole intervention process lasts for 9 months. The first 3 months will be devoted to the engagement process and motivational interviewing skills will be used more often during this period.

CBT conceptualization and techniques will then be used by the anti-drug workers throughout the rest of the intervention, focusing on helping the clients to identify and address their dysfunctional beliefs (permissiveness beliefs and maintenance beliefs), build adaptive skills to manage urges and cravings, replace drug-using activities with constructive and rewarding activities, and to learn to build up better interpersonal relationships.

Finally, in the last two months, anti-drug workers will also work on relapse prevention with the clients.

## Project Content



- **Phase II: 9-month intervention and group supervision**

Supervision provided by Professor Daniel Wong

In the first three months, focuses will be placed on helping the anti-drug workers to learn the skills in

- (1) motivating their clients into therapy
- (2) working with clients to develop their treatment goals
- (3) understanding their clients' cognitive and behavioural pattern of urge and craving, drug taking behaviours, and dysfunctional beliefs
- (4) using the various assessment tools

In the next 4 months, time will be devoted to helping the anti-drug workers to acquire the cognitive and behavioural skills and techniques in facilitating changes in the youth drug users. These include: the 5-Steps to curbing urge and cravings, advantage and disadvantage analysis, behavioural experiments, exposure, and etc. In the last two months, skills on relapse prevention will be taught during supervision.

## Project Content



- **Phase II: 9-month intervention and group supervision**

### *Group Supervision Photographs*



## Project Content



- Phase II: 9-month intervention and group supervision

### *Group Supervision Photographs*



## Output Evaluation Results



	Description of Indicator (with targets)	Output Achieved
<b>Output Indicator 1</b>	To provide systematic training to 120 anti-drug social workers (with at least 96 participants complete 9 sessions of workshop) in phase I training	121 anti-drug social workers and medical staff recruited and participated in the systematic training workshop (with 115 participants completed 9 sessions of workshops)
<b>Output Indicator 2</b>	To provide advanced clinical skill training and supervision in cognitive behavior therapy for 40 anti-drug social workers, among which 80% (or 32 participants) received training certificate in phase II training (i.e. complete 7 sessions of group supervision)	53 anti-drug social workers and medical staff recruited and participated in our group supervision (with 49 participants completed 7 sessions of group supervision)
<b>Output Indicator 3</b>	To treat 120 youth drug abusers with the integrated CBT model, which involves at least 1,200 counseling sessions in phase II training	Treated 175 youth drug abusers with the integrated CBT model, which involves 1,588 counselling sessions

## Outcome Evaluation Results



	Description of Indicator (with targets)	Evaluation Method	Outcome Achieved
<b>Outcome Indicator 1</b>	70% of anti-drug social workers show enhancement in their knowledge and general counselling skills in handling drug abuse cases	Self-constructed scale on drug-related knowledge and skills (Pre and post-test survey)	Out of 115 anti-drug social workers and medical staff completed phrase I training, 88 of them showed enhancement in their knowledge and general counselling skills in handling drug abuse cases. 76.5% showed improvement in this aspect
<b>Outcome Indicator 2</b>	70% of anti-drug social workers show enhancement in their knowledge and clinical skills in cognitive behavioral therapy	Cognitive Therapy Rating Scale (Pre and post-test survey)	Out of 46 anti-drug social workers and medical staff completed pre and post-test survey, 39 of them showed enhancement in their knowledge and clinical skills in cognitive behavioral therapy. 84.8% showed improvement in this aspect

## Outcome Evaluation Results



	Description of Indicator (with targets)	Evaluation Method	Outcome Achieved
<b>Outcome Indicator 3</b>	Young drug abuser's frequency of drug use in the past 3 months (significant reduction in drug use after completing the 9 months intervention, which will be maintained at 4-month follow-up)	Beat Drugs Fund Question Set No.6 (Pre and post-test survey)	Out of 98 drug abusing cases completed pre and post-test survey, 73 of them reported still using drug at pre-test and 25 of them reported not using drug at pre-test. Among those who reported using drug at pre-test, 63 of them (86.3%) reduced drug use frequency after completing the 9 months intervention. Among those who reported not using drug at pre-test, 20 of them (80%) avoided relapse
<b>Outcome Indicator 4</b>	Young drug abuser's readiness / motivation to reduce drug use / quit drugs	Beat Drugs Fund Question Set No.13 (Pre and post-test survey)	Out of 98 drug abusing cases completed pre and post-test survey, 53 of them showed enhancement in their readiness / motivation to reduce drug use / quit drugs. 54.1% showed improvement in this aspect



## Outcome Evaluation Results



	Description of Indicator (with targets)	Evaluation Method	Outcome Achieved
<b>Outcome Indicator 5</b>	Young drug abuser's self-efficacy in avoiding drug use	Beat Drugs Fund Question Set No.3 (Pre and post-test survey)	Out of 98 drug abusing cases completed pre and post-test survey, 66 of them showed enhancement in their self-efficacy in avoiding drug use. 67.3% showed improvement in this aspect
<b>Outcome Indicator 6</b>	Young drug abuser's permissive attitude towards drug abuse	Beat Drugs Fund Question Set No.18 (Pre and post-test survey)	Out of 98 drug abusing cases completed pre and post-test survey, 79 of them showed enhancement in their permissive attitude towards drug abuse. 80.6% showed improvement in this aspect

## Experience Gained



### Reasons behind success

- Good preparation before project implementation. Before the start of our project, project PI has obtained support from 11 anti-drug agencies (including Tung Wah Cross Centre, Hong Kong Christian Service PS33 and Hong Kong Federation of Youth Groups Youth Crime Prevention Centre etc). They agreed to send their staff to receive training and supervision in our project.
- Expand the scope of professions of participants. In order to recruit enough anti-drug workers in this project, our team has decided to expand our targeted participants. We targeted on anti-drug social workers as well as other healthcare professionals such as psychiatric nurses and occupational therapists.

## Experience Gained



### Reasons behind success

- Professional speakers: In order to provide quality training to anti-drug workers, our project team invited the most experienced professionals in the field as our trainers. We had Dr. Cheung (seasoned Psychiatrist in the anti-drug field), Ms. Cindy To (experienced Clinical Psychologist who are working with drug users), Ms. Silvia Cheng (Social Worker with excessive clinical experiences on working with drug users' family members) and Professor Daniel Wong (sophisticated trainer, researcher and supervisor on providing CBT training and supervision)

## Conclusion



### Conclusion

- All the project outcomes have been achieved in this project. The drug-related knowledge and competence of anti-drug workers in using Integrated Cognitive-Behavioral model with drug abusers have been increased. Moreover, our project has contributed to the anti-drug field in Hong Kong. The effective outcome assessment has proved that the Integrated Cognitive-Behavioral model is effective in helping Chinese youths to reduce drug use as well as to gain positive changes. A new local culturally-attuned Cognitive Behavioral Therapy has been introduced to the anti-drug field.

## Suggestion



## Suggestion

- We would recommend a systematic training for all frontline workers in the anti-drug field. It is stressful and challenging on working with drug users in our society. There is a huge need on providing a culturally-attuned integrated interventions to our clients. In order to have better equipment, a holistic training would be needed in the field.
- Moreover, all frontline workers would be benefit from an on-going supervision. It is not only polishing their counseling skills and techniques. More than that, it could provide a valuable experience for frontline workers to relieve their emotional stress. On-going supervision is an effective way on preventing frontline workers burnout.



**End**