SMART Recovery
A summary of the research

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Agenda

1. MUTUAL AID GROUPS
2. SMART RECOVERY
3. EVIDENCE FOR SMART RECOVERY
4. SMART TRACK

Centre for Health Psychology Practice and Research (CHPPR)
Introduction

**Mutual Aid** is an important element of addiction recovery

Evidence primarily derived from **12-step** models.

**Tailoring / choice** is important within addiction services and support

**SMART Recovery** represents an alternative
<table>
<thead>
<tr>
<th>Evidence &amp; practice guidelines</th>
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<tbody>
<tr>
<td><strong>Cochrane Systematic Review</strong>¹</td>
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<tr>
<td><strong>NICE Guidance</strong>²,³</td>
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<tr>
<td><strong>Pathways project</strong>⁴</td>
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</table>
Mutual aid: Mechanisms of action

**Social**\(^{5,6}\)
- Recovery supportive\(^7\)
- Cognitive transformations\(^5\)
- Increased self esteem; reduced social isolation\(^8\)
- Group cohesion\(^9,10\)

**Behavioural**
- Active Coping\(^7,5\)
- Behavioural activation\(^10,11\)

**Cognitive**
- Self efficacy\(^7,5\)
- Motivation\(^5,8\)
- Cognitive restructuring\(^9\)
References


SMART Recovery

Centre for Health Psychology Practice and Research (CHPPR)
What is SMART Recovery?
SMART Recovery International

- 3,500 groups (pre-COVID)
- Available in 23 countries
- Large majority of groups in United States, Australia & UK
- Groups delivered by trained facilitator
Impact of COVID-19

- Pre-pandemic – small number of online groups available
  - 40 US, 5 UK, 6 Aust

- All 3,500 groups internationally closed

- Rapid transition to online groups
  - 1,200+ online groups available in the US

- Desire to continue to offer online groups
  - Improve access, confidentiality

Evidence for SMART Recovery
“SMART Recovery will continue to evolve as the scientific findings about addiction treatment and recovery evolve.”

Horvath & Yeterian, 2012
SMART Recovery Australia
Research Advisory Committee
Understanding SMART Recovery in Australia

Cross-sectional survey of SMART Recovery participants
- Describe who is attending the groups
- Examine the experience of facilitators & group participants
- Start to understand the mechanisms of the groups

National facilitator data collection project
- Provide regular description of participants attending SMART Recovery
Who attends SMART Recovery in Australia?

Over 350 groups delivered across Australia (pre-COVID)
- On average 6 people attend each group
- 18 years average length of substance abuse issues
- Each week about 20% of group members ‘new members’
- Male (67%) and Female (33%)
- 59% of group members 35 to 54 years of age

Relatively high rates of mental illness co-morbidity
- 66% previously attended mental health treatment
- 47% currently prescribed mental health medication
- 48% high or very high on K10
Primary Behaviour of Concern

Proportion of Attendances

<table>
<thead>
<tr>
<th>Primary Behaviour of Concern</th>
<th>Returning</th>
<th>New</th>
</tr>
</thead>
<tbody>
<tr>
<td>Amphetamines</td>
<td>23.0358929</td>
<td>18.7007404</td>
</tr>
<tr>
<td>Alcohol</td>
<td>52.055784</td>
<td>47.2414617</td>
</tr>
<tr>
<td>Cannabis</td>
<td>6.35070563</td>
<td>5.23047528</td>
</tr>
<tr>
<td>Cocaine</td>
<td>2.77253028</td>
<td>3.98853594</td>
</tr>
<tr>
<td>Heroin</td>
<td>2.7280809</td>
<td>2.34057798</td>
</tr>
<tr>
<td>Pharmaceutical</td>
<td>1.79464385</td>
<td>0.8836876</td>
</tr>
<tr>
<td>Ecstasy</td>
<td>1.27791977</td>
<td>2.31669453</td>
</tr>
<tr>
<td>Gambling</td>
<td>0.8000889</td>
<td>0.9792214</td>
</tr>
<tr>
<td>Tobacco</td>
<td>0.77786421</td>
<td>0.78815381</td>
</tr>
<tr>
<td>Other</td>
<td>7.32859207</td>
<td>17.5304514</td>
</tr>
</tbody>
</table>

Primary Behaviour of Concern
## Most helpful aspects of SMART

<table>
<thead>
<tr>
<th></th>
<th>Participants</th>
<th>Facilitators</th>
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<tbody>
<tr>
<td>Group process</td>
<td>43%</td>
<td>25%</td>
</tr>
<tr>
<td>Tools and strategies</td>
<td>22%</td>
<td>35%</td>
</tr>
<tr>
<td>Structure and facilitation of the sessions</td>
<td>10%</td>
<td>11%</td>
</tr>
<tr>
<td>Psycho-education</td>
<td>8%</td>
<td>3%</td>
</tr>
<tr>
<td>Underlying philosophy of SMART groups</td>
<td>8%</td>
<td>26%</td>
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Use of CBT skills

Participants report using a combination of CBT skills in the real world.

People who report using CBT skills more tend to report better functioning.

Group cohesion and establishing between group plans predict use of CBT skills.

Does SMART Recovery promote positive changes in outcome?

What factors influence outcome?
## Methods

### Studies
- ✓ Randomised
- ✓ Non-Randomised
- ✓ Cross sectional
- ✗ Qualitative Only

### Participants
- ✓ ‘Problematic’ addictive behavior
- ✓ Current/ past
- ✓ Patient/carer report, self-report assessment and/ or clinical interview

### Interventions
- ✓ Group SMART Recovery
- ✓ Trained facilitator
- ✓ Stand alone/ in combination

### Comparison
- ✓ Active
- ✓ Inactive
- ✓ No comparison

### Outcomes
- ✓ Severity of addiction & its consequences
- ✓ Treatment engagement
- ✓ Other process measures
- ✓ Feasibility
- ✓ Clinician and/ or patient rated with or without collateral
- ✓ Objective and/ or subjective
- ✓ Any follow-up period
Key Findings (N = 12)

- Does SMART Recovery promote positive changes in outcome?

<table>
<thead>
<tr>
<th>Setting</th>
<th>Key Outcomes</th>
</tr>
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<tbody>
<tr>
<td>Community</td>
<td>✓ Alcohol (days abstinent, drinks per day, consequences)</td>
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<tr>
<td>Comorbidity</td>
<td>✓ Functioning (hospitalisation)</td>
</tr>
<tr>
<td></td>
<td>✓ Quality of life (perceived health status)</td>
</tr>
<tr>
<td>Correctional</td>
<td>✓ Risk of reoffending (Getting SMART + SMART Recovery)</td>
</tr>
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</table>
What factors influence outcome?

**Preliminary findings**

- Attendance (and alcohol)
- Self-efficacy (and sobriety)
- Use of 7-day plan (and behavioural skills)
- Quality of facilitation (and group cohesion)
- Group cohesion (and cognitive skills)
Future research

- Better controlled studies are needed
- Well conducted longitudinal research is needed
- Research should consider the impact on mental health
- No published research examining SMART Recovery for Indigenous people*

SMART Track: a mobile health app for SMART Recovery

Centre for Health Psychology Practice and Research (CHPPR)
Acknowledgements

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SMART Recovery Australia

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SMART Track

- Build the evidence base and useful to the individual

Stage One:

- Develop a tool to collect routine outcome monitoring data and provide tailored feedback

Stage Two:

- Feasibility study – will people use it? Is it helpful?


ROM: 7-day plan
Feedback

You may find the results below helpful, but you don’t have to use them if you don’t want to.

7-day plan
No progress data yet

Behaviour of concern

Effect of substance use
Doing well

Self-care
Doing well

Relationships
Doing well

Outlook on life
Doing well

Resources
Doing well

Mental health
Not great

Helpful advice
The process of recovery can feel like a journey. Looking after yourself physically and mentally can be really helpful - what works best for you?

Use this section to write down any thoughts, feelings and/or comments about the feedback that you want to remember.
Interactive Urge Log

How intense is your urge?

Low
Medium
High

Log recent urge

What has prompted the urge on Tuesday 16 Oct 9:52 am?
ⲟ, think about, where you were, who was around you and what you were doing.

How long did it last?
5 Minutes

Add as motivation:

Track Urges

Number of urges this week

Low: 1
Medium: 2
High: 1

Your best week had a total of 1

Average urge time
Low: 5 minutes
Medium: 5 minutes
High: 5 minutes

Common days your urges happen
Tuesdays

Common time of the day your urges happen
Mornings

You were usually feeling
Hppy, Lonely, Warned, Nibbled

Your last trigger
Holidays
Resources

- Readings
- Lived experience stories
  https://www.livesofsubstance.org/
- Services
Feasibility Study (n=72)

- 61% Male, 81% Born in Australia
- 48% Employed
- 75% mental health treatment (ever)
- 68% alcohol primary behaviour of concern

Participants engaged with SMART Track

- 94% created an account
- 88% used Smart Track at least once (post-set up)
- 58% used Smart Track for five or more weeks
Participants used SMART Track for ROM

Proportion of Study Participants vs Number of Weeks Post Baseline
Participants experienced SMART Track as user friendly, engaging and useful

“[I’m] behind on all that computer stuff but I found this one of the easiest apps to use.” Rhonda

“There is one thing that the app captures that is I think helpful, which I don’t capture myself is urges.” Harold

“Even a village idiot like me could use it!” Dougal

“I’d only been sober for about 30 days, so for me having that tracking there to be able to track when I was getting urges and stuff, was going to be a good thing.” Giles
Facilitators appreciated the added value that SMART Track brought to the groups

“[Smart Track is] useful to the client or the attendee themselves, because they can access it throughout the weekend, after hours, any time they wish.”  

Cecil

“I use it myself and I love it!”  

Shelly

“I would ask] can you tell me about whether the app has kind of helped you do what you wanted to do for the week?” And people were very happy to report on that sort of stuff”  

Annalise
Conclusions

- Informed by end user expertise
- Feasible & acceptable
- Challenge is promoting its integration within SMART Recovery groups
- We are in the process of completing an update of the App
SMART Recovery International
Global Research Network

• Brings together a network of International researchers interested in SMART Recovery

• To join the research network visit the SMART Recovery International website

https://www.smartrecoveryinternational.org/global-research-advisory-network
Questions

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