

# THE ALCOHOL AND DRUG OUTCOME MEASURE

The alcohol and drug outcome measure (ADOM) is a brief outcome measure. It consists of 18 questions relevant to New Zealand alcohol and other drug (AOD) services. Service users and providers were involved in its development. This group included Maori and Pacific service users. The tool can be used in a range of AOD treatment services. It focuses on a range of substances. The questionnaire is designed for service users and clinicians to complete together.

## What is ADOM?

The ADOM is a two-part questionnaire for use with AOD treatment service users. It collects information about changes in substance use and aspects of health and functioning. Part A has questions about the type and frequency of alcohol and other drug use. Part B has questions about how the use of alcohol and other drugs affects the person's life in different ways, for example, relationships, work, health and accommodation.

## Why collect this information?

ADOM results can show what changes have occurred for AOD service users since receiving AOD treatment services. This helps service users to review their goals. Service users can also discuss the results with the staff member working with them. This may result in adjusting their treatment or intervention plan. The ADOM results also show how well the service is meeting the needs of service users. The results can identify what improvements could be made.

## Who should use ADOM?

The ADOM was targeted for use with adults attending mainstream AOD treatment services including outpatient, day patient, detoxification and opioid substitution treatment programmes. The service user and clinician/practitioner need to complete the ADOM together. As a post-treatment outcome measure, the ADOM could be completed via telephone contact. When used to assist treatment planning, the ADOM should be used during reviews of treatment progress with service users and where possible their significant others and whanau.

## Development of the ADOM

### Who developed the ADOM?

The ADOM was developed by the Alcohol and Drug Outcomes Project (ADOPT) team. The project team included the Clinical Research and Resource Centre and Auckland Community Alcohol and Drug Services from Waitemata District Health Board in collaboration with the National Addiction Centre (NAC), University of Otago. An advisory board, including AOD service users representatives, assisted the ADOPT team.

### Why develop another AOD outcome measure?

We need to monitor service user outcomes such as reducing substance use and improving mental health along with personal and social role functioning. To do this we need relevant and effective measurement tools. The ADOM has been developed to meet the specific needs of New Zealand AOD treatment service users and support recovery. It will enhance an outcomes focused culture within AOD and mental health services.

### How was the ADOM developed?

AOD experts were consulted to create the questionnaire. It was then tested with AOD service users and staff. Changes were made based on their feedback. The tool then underwent psychometric testing to assess its suitability as a routine outcome measure. The psychometric testing showed that Part A of the questionnaire is a valid and reliable measurement tool for use in AOD services. However, Part B requires further trialling.

### Using the ADOM with mental health service users

Research has shown that there is a high level of AOD misuse among people with mental health problems (Sinclair, Latifi & Latifi, 2008; Weaver et al, 2003). However, more testing of the ADOM is required to see whether it is suitable or valid for users of mental health services who have AOD issues.

### What is the next step for ADOM?

The implementation of ADOM nationally is being considered by the Ministry of Health. Currently the ADOM report and measure are freely available for download at [www.tepou.co.nz](http://www.tepou.co.nz).

## Key contact

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**For the most up to date information on this project please visit [www.tepou.co.nz](http://www.tepou.co.nz)**

Sinclair, J.M., Latifi, A.H. & Latifi, A.W. (2008). Co-morbid substance misuse in psychiatric patients: prevalence and association with length of inpatient stay. *Journal of Psychopharmacology*, 22, (1), 92-99.

Weaver, T., Madden, P., Charles, V., Stimson, G., Renton, A., Tyrer, P., Barnes, T., Bench, C., Middleton, H., Wright, N., Paterson, S., Shanahan, W., Seivewright, N. & Ford, C. (2003). Comorbidity of substance misuse and mental illness in community mental health and substance misuse services. *The British Journal of Psychiatry*, 183, 304-313.