



SYSTEMS & POLICY

CHAIR: MEL THOMPSON, TASKFORCE

1. Measuring what matters: using the perspectives of service users, providers and funders to establish a core set of performance measures
2. Reforming treatment system bias
3. Young people's experiences of treatment for substance misuse with co-occurring disordered eating: A qualitative study

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2023



Young people's experiences of treatment for substance misuse with co-occurring disordered eating: A qualitative study

Amanda Mack, TaskForce

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VAADA acknowledges the traditional owners of the land on which the conference is gathered, the Wurundjeri People of the Kulin Nation and pay their respects to Aboriginal culture and Elders past and present.



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YOUNG PEOPLES
EXPERIENCES OF
TREATMENT FOR
SUBSTANCE USE
WITH
COOCCURRING
DISORDERED
EATING: A
QUALITATIVE STUDY

Amanda Mack

TaskForce
Life changing services.



ACKNOWLEDGEMENT T OF COUNTRY



OUTLINE


- Background/Justification
- Aims and Research Question
- Methodology
- Findings
- Implications for Practice
- Acknowledgements





BACKGROUND/ JUSTIFICATION

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Working with young people 25 and under for substance use issues at TaskForce Community Agency, there are significant cooccurring conditions reported, included disordered eating. However, not much is known.

A literature review was undertaken, demonstrating little research on the treatment experiences of young people with cooccurring substance use and disordered eating within Australia.

LITERATURE REVIEW

Reference	Details
Becker-Haimes, 2020	Focused on Assessment and processes
Brack, 2021	Utilised archived data, unable to obtain feedback
Choate, 2013	Treatment guide more than feedback
Dadd, 2015	American high school treatment evaluation
Kaminer, 2008	Broad research including aetiology, with no client feedback
Kaminer, 2016	Based on archived data, no client feedback
Kanbur, 2016	Literature review, limited research, no client feedback
Kirkpatrick, 2018	Archived data utilised, no client feedback
Lindsay, 2012	No clear feedback provided
Ritchel, 2015	Archived data utilised, no client feedback
Sysko, 2009	No client feedback obtained





AIMS AND RESEARCH QUESTION

To understand the treatment experiences of young people attending **ResetLife at TaskForce**, who identify with cooccurring substance use and disordered eating issues.



METHODOLOGY



METHODS

- Clients who had completed treatment approached by a lived experience worker.
- 15 people approached, 13 agreed, 11 interviewed: 7 females, 4 males, mean age 20.3.
- Semi-structured, recorded interviews undertaken. Themes included treatment experiences, strategies/intervention and recovery.
- Interviews were transcribed by an agency and thematic analysis was utilised (Braun & Clark, 2022).

TIMELINE



TREATMENT SETTING



“A really safe and comfortable and relaxed environment, so it didn’t necessarily always feel like treatment as such. Because like I’ve been into places where you sit down, it’s one-on-one or it’s group and it’s really intense, and it’s really treatmentised.”

- ‘Sarah’, female, 24



FINDINGS

RESEARCH RESULTS

Reasons for Use	Treatment Experience	Suggested Improvements
Trauma	Structure and routine	More disordered eating psychological education provided
Psychological impairments	Food	Handouts on disordered eating
Social	Psychological education and skills	Referral information for disordered eating
Need for control	Supports	Life skills training



TREATMENT EXPERIENCES

STRUCTURE AND ROUTINE

● “Because it’s been so helpful, especially for the ResetLife, doing three days a week, really – especially in lockdown as well, really **kept me occupied** so I wasn’t left with those extra three days just thinking about substances, and then possibly using it, and getting it. Yeah, it helped significantly.” - ‘Laura’, female, 21.

● “Just having food here available allowed me to kind of get into the **gist of eating regularly**.” - ‘Janine’, female, 22.

● “I got into the routine of it. Now I’m just feeling more hungrier, as I should, as well as yeah, coming here with – gave me that knowledge. **I’m trying to make those better food choices** but again it’s probably baby steps....I’m definitely **more comfortable eating in front of people**”. - ‘Tracey’ female, 24.

TREATMENT EXPERIENCES

FOOD

● “Oh the food was great, because like at my house sometimes I’m scared to ask for food. But at TaskForce, since everyone is just grabbing food whenever they wanted, then that also helped me to **feel more comfortable when eating around people**. Because everyone would be eating, and I used to be really insecure in front of everyone, or anyone at all.” - ‘Jake’, male, 14.

“What **really helped is when I go to groups and there’ll be food made**. So having the options there is nice because most of the time the cupboards aren’t filled at my house so I didn’t really have the option. Like sometimes it’ll be like sleep for dinner.” - ‘Tracey’, female, 23.

“I was really **thankful that it was there** when I wanted it and needed it, but I also would stare at it and then **tell myself not to eat it**.” - ‘Jenny’, female, 21.

TREATMENT EXPERIENCES

PSYCHOLOGICAL EDUCATION AND SKILLS

● “They **taught us about how the brain worked**. I’d say that was one of the key things that helped me realise things about myself, that – why I was doing them. Because I was being impulsive. I wasn’t letting – I just – I wasn’t thinking. I was just doing things on instinct. I wasn’t thinking about the repercussions that could have happened or would happen or anything like that. Once I learnt about what they were teaching us, **I realised I do need to slow down and think about what I’m doing.**” - ‘John’, male, 20.

“**Strategies and coping mechanisms** to do with that and how to get through situations, triggers, cravings, all that stuff. But then it would trickle into the self care and the eating habits and being **mindful of what I’m eating**, how regularly I’m eating – doing those self-check-ins.” - ‘Sarah’, female, 24.

TREATMENT EXPERIENCES

SUPPORTS



“The **groupwork, the support...**involving my **family in treatment** and having – and that having such a **positive impact on the relationship** that I have with them today.” - ‘Sarah’, female, 24.

“Obviously it comes down to myself, and how I help myself at the end of the day, but I really do think that **I would have not come as far without the extra support** because if I didn’t go to TaskForce, then I wouldn’t really have anyone else.” – ‘Jenny’, female, 21.

“I think just **having the support there when I would need** it is - was good enough for me - is good enough for me.” – ‘Susie’ female, 19.



IMPLICATIONS FOR PRACTICE

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Participants Feedback	Participants Experience	Recommendations for Practice
Treatment helped them to understand themselves and the recovery journey	Experience was positive	Integrated treatment options for substance use and disordered eating
Valuable skills were learnt and transferable to other areas	Referral information and referrals available for disordered eating.	Revised substance use intake procedure with more in-depth questioning regarding disordered eating – tendency to minimize disordered eating (Marel, et al., 2016).
Routine and structure provided a sense of purpose and kept participants busy	Sobriety from substance use did not always result in recovery from disordered eating	



“I never considered it like I had an eating problem. Never thought that I had an eating problem. Yeah, it was something that I never talked about, I felt like no one really cared because I thought no one really cared about food type thing. Yeah, so never talked up about it, never thought anything about it”. - ‘Robert’, male, 22.


IMPLICATIONS FOR CURRENT PRACTICE

- Clinicians trained in eating disorders.
- Psychological education on disordered eating is provided.
- Advising the transferability of skills learned.
- Established referral pathways.
- Taking the time to ask the questions.

FINAL WRAP UP

- Approximately 60% of young people presenting for substance use treatment identify with cooccurring mental health conditions, including disordered eating (although often under reported).
- Little research undertaken into the treatment experience of young people with cooccurring substance use and disordered eating.
- Semi-structured interviews conducted with young people who have completed treatment at TaskForce regarding their treatment experience.
- Structure/routine, support, food, and psychological education and skills have been reported to be useful by the participants.
- Some participants complete substance use treatment still experiencing disordered eating.

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THANK YOU

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QUESTIONS



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