

Providing cannabis treatment through the post: Research summary

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Cannabis is the most commonly used illicit substance in Australia,¹ and cannabis dependence affects approximately 10 per cent of people who use the drug.² Accessible evidence-based treatments are thus essential; however there are several reasons why individuals may be unable or unwilling to access treatment. For example, over a quarter of cannabis users (27.4%, SD=1.2) live in rural locations³ where access to treatment is limited. Further, many users are unaware that cannabis-specific treatments exist⁴ and users may fear stigma from presenting to drug treatment services.^{5,6} One potential alternative mode of treatment delivery that can overcome these barriers is treatment delivered through the post. The National Cannabis Prevention and Information Centre (NCPIC) recently completed a pilot study in order to assess the feasibility of this mode of treatment for cannabis dependence. Thirty four participants finished this study by completing the six treatment modules, post-treatment assessments, and a one-month follow-up assessment.

Treatment modules used cognitive-behavioural and motivational interviewing techniques, and incorporated personalised feedback at four points during the study. This treatment was found to be effective insofar as the average amount of cannabis smoked reduced when comparing participants before treatment and after the one-month follow-up. Before treatment, participants reported smoking an average of 35 cones per week, and after the one-month follow-up they reported an average of only 11 cones per week. This difference was statistically significant. Further, of the 34 participants who commenced treatment, eight had quit smoking by the end of the study. The rest of the participants also appeared to benefit from the treatment; they demonstrated a reduction in smoking of 65 per cent on average.

This pilot study has shown promising results and the issue warrants further attention in future research that uses a controlled study design to account for external factors that may have influenced the findings. Nonetheless, it seems likely that the needs of individuals unwilling or unable to access face-to-face treatment services can be met by alternative modes of treatment delivery; in this case, through the postal system.

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