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Student name: Ketrina Bardhi

Student ID: 2324052

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**Beyond Detox –Exploring the Effective strategies in Long Term Recovery from
Drug Addiction in the United Kingdom**

1.Abstract

Purpose: This research seeks to investigate the efficacy of strategies that facilitate long-term recovery from drug addiction in the United Kingdom, extending beyond the detoxification phase. The study aims to investigate the roles of medication-assisted treatment, behavioural therapies, and recovery support systems in relapse prevention and prolonged abstinence, while also identifying the organisational and therapeutic factors that affect recovery outcomes.

Methodology: A qualitative secondary research design was used, employing a scoping literature review to collate existing evidence rather than collect new data. Relevant studies published between 2013 and 2024 were identified using Google Scholar and analysed through Braun and Clarke's six-step thematic analysis approach to identify common themes around long-term recovery. Inclusion criteria focused on UK-based research, adult populations, peer-reviewed publications, and studies examining recovery beyond detoxification.

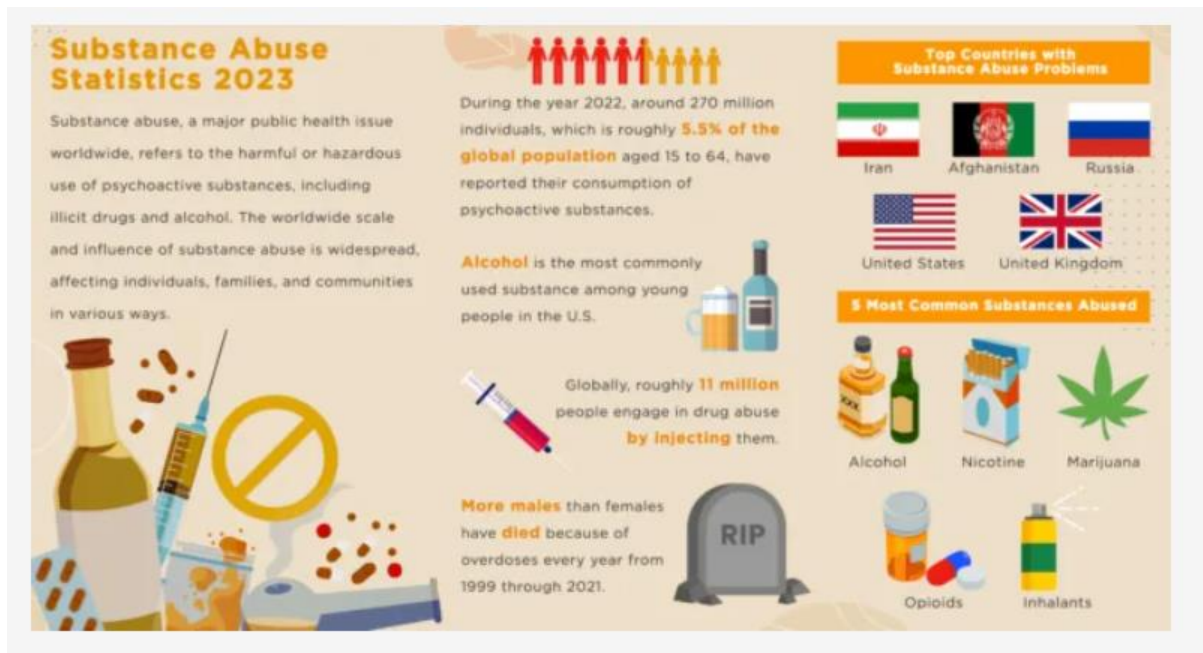
Findings: The review found that detoxification alone does not ensure long-term abstinence, as numerous individuals are susceptible to relapse within months without ongoing interventions. Evidence showed that using both medication and behavioural therapies to treat opioid use disorder helped people stay in treatment and get better. Contingency management strategies, which promote abstinence through positive incentives, were identified as effective in maintaining long-term engagement and mitigating relapse. The benefits were greatest when medication and behavioural support were incorporated into recovery systems.

Results: The scoping review confirms that long-term recovery requires more than detoxification; supportive therapeutic strategies are essential. Integrated approaches involving medication, behavioural therapy, and contingency management are associated with improved adherence and relapse prevention. Strengthening recovery support systems post-detox is crucial, as they provide ongoing structure, encouragement, and resources that sustain abstinence. These findings highlight the need for continued, comprehensive treatment plans for individuals after detox to improve long-term recovery outcomes.

2.Introduction

Drug and alcohol addiction is still a big public health problem in England, and recent data show how big and long-lasting it is. During the time from April 2023 to March 2024, 310,863 adults used drug and alcohol treatment services, and 137,477 of them left treatment. These numbers show that a lot of people are getting help, but they also show that people are constantly coming and going from treatment. For a lot of people, recovery is not just one thing that happens when they detox; it is a long-term process that needs ongoing help from professionals and the community. Because of the pressure this puts on services, just providing access to detox or short-term interventions is not enough to meet people's needs or get long-lasting results (Office for Health Improvement & Disparities, 2024).

Studies of adult substance abuse services in England show that effective treatment and recovery systems can lower the harm caused by drugs and alcohol, keep people from going to the hospital when they do not need to, and close the gap in health outcomes. There are, however, worries about differences in the quality of services, the availability of aftercare, and how long recovery-oriented support lasts after someone has finished detox. This indicates a disparity between the initial treatment provision and the enduring support necessary to sustain abstinence, restore social functioning, and avert relapse. The high volume of individuals engaging with services annually, coupled with evidence of persistent harm, emphasises the necessity to identify the most effective strategies for maintaining recovery beyond the detoxification phase (Nuffield Trust, 2025).



(TherapyDen, 2023)

2.1 Rationale

Detoxification alone does not ensure recovery, as many individuals relapse within months without continued treatment (NIDA, 2025). Evidence indicates that integrating medication for opioid use disorder with behavioural therapies significantly enhances retention and abstinence rates (Biondi et al., 2022). Contingency management, which provides positive reinforcement for abstinence and engagement, has been shown to deliver long-term benefits (Ginley et al., 2020; Better Care Playbook, 2025). A metaanalysis found that CM combined with medication improved adherence and relapse prevention (Kellogg et al., 2023). Therefore, this research seeks to evaluate the combination of these approaches to determine their role in sustained recovery.

2.2 Research Question

What are the most effective strategies for supporting long-term recovery from drug addiction in the United Kingdom beyond the detoxification stage?

2.3 Objectives

- To identify the key factors influencing relapse prevention and long-term abstinence.
- To assess the effectiveness of medication-assisted and behavioural therapies in sustaining recovery beyond detox.

- To recommend strategies that strengthen recovery support systems for individual's post-detox.

3. Background

Long-term recovery from drug and alcohol dependence is still a big problem for public health in the UK. This is because many people relapse or go back into treatment after detox or short-term care. In 2020/21, 275,896 adults in England were in touch with substance misuse services, which shows that treatment is still widely available (Office for Health Improvement & Disparities, 2021). However, this level of activity does not always lead to long-term recovery. Many people find it hard to stay sober over time without the right aftercare and long-term support (Rolová et al., 2023).

Evidence indicates that recovery support services—such as peer support, structured aftercare, and psychosocial interventions—are essential for fostering long-term stability. A thematic analysis of UK rehabilitation centres revealed that the quality of aftercare and the experiences of service users significantly impact long-term recovery outcomes (Lomas, 2024). Implementation research on Contingency Management in United Kingdom contexts has shown promising effectiveness; however, it has also highlighted obstacles such as limited resources and apprehensions regarding service alignment, which could hinder broader adoption (Getty, McQuarrie and Brobbin, 2025). This indicates that although effective models are available, systemic obstacles may hinder their implementation in treatment services.

Because there is a lot of demand for treatment and several types of aftercare, it is especially important to find out which recovery strategies lead to long-term abstinence, lower the risk of relapse, and make it easier to reintegrate after treatment. This proposal seeks to examine UK-based research and service evaluations to pinpoint critical factors linked to long-term recovery beyond detoxification and to suggest strategies for enhancing support (Black, 2021).

4.Methods:

4.1 Research Design

This study will utilise a qualitative secondary research design employing a scoping review methodology to investigate effective long-term recovery strategies beyond detoxification. The research will concentrate on identifying, reviewing, and summarising existing published evidence rather than gathering new primary data, while integrating insights from studies involving individuals who have undergone detoxification and participated in recovery programs (Flick, 2023)

4.2 Database

Data will be collected from Google Scholar and analysed using Braun and Clarke's (2021) six-step thematic analysis to identify recovery themes.

4.3

Keywords

Drug addiction, long-term recovery, detoxification, relapse prevention, behavioural therapy, qualitative research, scoping review, thematic analysis, United Kingdom.

4.4 Inclusion Criteria

- Studies published between 2013 and 2024.
- Research focused on long-term recovery from drug addiction beyond detoxification.
- Studies conducted in the United Kingdom.
- Peer-reviewed articles available in English.
- Studies including adults (18 years and above).
- Publications accessible through Google Scholar.

4.5 Exclusion Criteria

- Studies published before 2013.
- Research focused solely on detoxification or short-term treatment.
- Studies conducted outside the United Kingdom.
- Articles not peer-reviewed or lacking full-text access.
- Publications not in English.
- Studies involving participants under 18 years old.

5. Results

5.1 Table of findings:

The table below displays the characteristics of the studies selected in the scoping review.

Author/s and publication year	Aim	Methodology and methods	Findings
1.Sinclair, D. L., Chantry, M., De Ruyscher, C., Magerman, J., Nicaise, P. & Vanderplasschen, W. (2024)	To analyse and identify the current evidence on recovery-oriented interventions for individuals with substance use disorders, with the objective of comprehending the extent, characteristics, and diversity of research on interventions beyond immediate treatment.	• Scoping review following PRISMA-ScR guidelines. • Systematic search of Scopus, Web of Science and PubMed for studies from 2000–2024. • Inclusion criteria: peer-reviewed empirical studies with adults and a focus on recovery-supportive interventions. • Screening of titles/abstracts, full-text review, data extraction, and thematic synthesis. • Final sample: 25 studies published	• Interventions that helped people recover were linked to better outcomes in substance use, well-being, social functioning, housing, and jobs. • Effective components encompassed peer engagement, robust relationships between service users and providers, and comprehensive support, including housing and employment assistance.

		between 2005–2024.	• Most studies originated outside the UK, indicating a deficiency of UK-specific evidence. • The authors emphasised the necessity for additional research on recovery-oriented practices across various national contexts.
2. Corner, T., Arden-Close, E. & McAlaney, J. (2023)	To examine how quality of life (QoL) and well-being evolve in individuals in recovery from addiction (drug, alcohol, or other addictions) over time.	• Quantitative study using survey data. • Sample: 115 individuals recruited via a rehabilitation charity (snowball sampling). • Measures: WHOQOL-BREF for quality of life, PANAS-X for positive/negative affect and coping strategies. • Analysis of differences across types of addictions (drugs vs alcohol)	• Quality of life improved with a longer recovery. • No major differences in emotional well-being or coping mechanisms between individuals recovering from drug addiction and those recovering from alcohol addiction. • The study indicates that recovery involves more than limited prohibition and is

		and correlations between time in recovery and well-being.	associated with enhanced well-being and life satisfaction over time.
3.Humphreys, G., Armstrong, M., Brown, J. & Carter, L. (2025)	To discover out how a lived-experience recovery organisation helps people with substance use disorders and what factors help them stay sober for a long time.	• Qualitative research design. • Semi-structured interviews with adults engaged in a UK-based recovery community. • Thematic analysis to identify patterns in experiences of support, challenges, and recovery progress. • Focus on peer support, community involvement, and daily routines.	• Participants stated that getting support from their peers on a regular basis was a big part of staying drug-free. • Feeling like you are not alone in your recovery gave you more confidence and motivation to stay in it. • Structured activities like groups, volunteering, and mentoring helped people stay on track and not go back to their old habits. • The study emphasised that recovery was enhanced by community,

			identity, and belonging rather than solely by medical treatment.
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5.2 Themes

The analysis of the findings has generated two themes.

Themes	
Theme1	Additional research is required on recovery-focused interventions, especially in the UK, to better understand them, plan for future services, and improve long-term recovery outcomes for people with substance use disorders in different situations and settings.
Theme2	Recovery is a gradual process linked with increased quality of life. Longer time in recovery improves well-being, demonstrating that successful recovery extends beyond abstinence and requires continued support to maintain positive outcomes.
Theme3	A regular routine, and support from other individuals helped people recover eventually. Community connection boosted motivation and confidence, showing that staying sober for a long time requires more than just medical help. It also requires meaningful relationships and structured activities.

Theme 1: The Need for UK-Based Research on Long-Term Support after Addiction

The objective of this study was to examine and delineate the existing evidence regarding recovery-oriented interventions for individuals with substance use disorders, emphasising the scope, characteristics, and diversity of research beyond immediate treatment. We did a scoping review according to PRISMA-ScR rules. We systematically searched Scopus, Web of Science, and PubMed for studies published between 2000 and 2024. We included peer-reviewed empirical studies that looked at recovery-supportive interventions and involved adults. The process included looking at titles and abstracts, reading full texts, pulling out useful information, and putting it all together in a thematic way. A final sample of 25 studies released from 2005 to 2024 was examined. Interventions that helped people get better were linked to better outcomes for substance use, well-being, social functioning, housing, and jobs. Peer engagement, strong ties between service users and providers, and full support, like help with housing and finding a job, were all parts that worked well. Most of the studies took place outside of the UK, which shows that there is not enough evidence from the UK and that more research is needed on recovery-oriented practices in different countries (Sinclair et al., 2024).

Theme 2: The Importance of Continued Support and Quality of Life

The goal of this study was to look at how the quality of life and well-being of people recovering from addiction, including drug, alcohol, and other types of dependency, change over time. A quantitative research design was employed, utilising survey data from 115 participants recruited via a rehabilitation charity through snowball sampling. The WHOQOL-BREF was used to measure quality of life, and the PANAS-X was used to measure emotional well-being, affect, and coping strategies. The analysis investigated disparities among addiction types, contrasting individuals recovering from drug use with those recovering from alcohol use, and examined the correlations between recovery duration and well-being. The findings indicated that quality of life enhanced with prolonged recovery duration; however, no significant disparities in emotional well-being or coping mechanisms were observed between the two addiction groups. The results indicate that recovery encompasses more than mere abstinence and is associated with enhanced well-being and life satisfaction as the recovery period advances (Corner, Arden-Close and McAlaney, 2023).

Theme 3: How Routine and Community Support Sustain Long-Term Recovery

The objective of this study was to investigate how a lived-experience recovery organisation assists individuals with substance use disorders and to determine the factors that facilitate their sustained abstinence. Employing a qualitative research design, the researchers executed semi-structured interviews with adults involved in a UK-based lived-experience recovery organisation. The data were thematically analysed to discern patterns in participants' experiences regarding support, challenges, and recovery progress, with a specific focus on peer support, community engagement, and daily routines. The results showed that getting regular support from peers was especially important for helping people stay drug-free. This is because feeling understood and not alone in their recovery gave them more confidence and motivation to keep going. Structured activities like groups, volunteering, and mentoring gave people a sense of purpose, a routine, and someone to hold them accountable, which helped them stay away from unhealthy habits. The study underscored that recovery was enhanced through community, identity, and belonging, rather than depending exclusively on conventional medical treatment (Humphreys and Finch, 2025).

6. Discussion

The research question asked: What strategies facilitate enduring recovery from substance addiction in the United Kingdom beyond detoxification? The examination of existing evidence revealed three principal themes:

- (1) recovery is enhanced when support persists post-detox through structured interventions;
- (2) peer support and community recovery systems are integral to maintaining abstinence
- (3) broader social conditions, including housing and purposeful activities, affect long-term success.

Theme 1 demonstrated that ongoing intervention post-detox enhances recovery outcomes. A national scoping review of recovery-supportive interventions indicated that recovery is more sustainable when treatment incorporates continuous support,

including holistic services, collaboration, and practical assistance. These services improved outcomes like less drug use, better health, and better social functioning. The evidence indicates that detoxification alone does not yield enduring recovery, and that prolonged involvement with services is crucial (Sinclair et al., 2024).

Theme 2 emphasised that peer support, lived-experience recovery organisations, and community connection are essential for sustaining abstinence. A qualitative study conducted in the UK revealed that participants in lived-experience recovery services experienced a sense of belonging, established routines, and sustained motivation, which contributed to their drug-free status. Participants articulated that their connections with individuals who had analogous experiences enhanced their confidence in sustaining sobriety and offered emotional support during adversities. The results indicate that long-term recovery is affected not only by treatment but also by identity, community, and social relationships (Corner, Arden-Close and McAlaney, 2023).

Theme 3 was about the bigger things that help people get better. The government says that stable housing, meaningful activities, and chances to get involved in the community are all important for helping people stay well after treatment. These supports help people rebuild their lives and stay sober. The chance of relapse goes up without them. This shows that getting better for a long time requires more than just medical care (Humphreys and Finch, 2025).

6.1 Why the results are important for health and social care

These findings are significant for health and social care as they illustrate that successful recovery diminishes the necessity for repeated treatment, enhances well-being, and fortifies families and communities. Community-based services, peer support, and recovery networks give people structure, motivation, and a sense of who they are, which helps them stay stable and avoid relapse. Organisations can improve outcomes and lessen the need for treatment services by helping people recover after

detox and investing in housing, jobs, and social activities. A system that focusses on long-term recovery helps people and is good for society (NHS England, 2024).

6.2 Limitations of the research

A disadvantage of this review is that the evidence came from only three research articles. These offer valuable perspectives, but they may not encompass all recovery services throughout the UK. Furthermore, this research utilised secondary data instead of primary interviews, thus constraining the findings to the parameters of existing literature. More research is needed to assess recovery services, particularly in the UK, to produce more robust and comprehensive evidence regarding long-term outcomes (Best et al., 2019; Office, 2023).

7. Conclusion

The current research examined strategies that facilitate long-term recovery from drug addiction in the United Kingdom, extending beyond the detoxification phase. The results showed that recovery is a long-term process that needs ongoing support, not just short-term treatment. Evidence indicated that sustained recovery is enhanced when individuals participate in structured interventions, such as behavioural therapies, peer support, and community-based services. These methods help people stay sober and keep their lives stable by giving them consistency, motivation, and accountability. The review also talked about how important social factors like housing, meaningful activities, and supportive relationships are. These things make people feel better and more confident, and they lower the chance of relapse. The analysis was limited by the small number of sources and the absence of long-term outcome data; however, the conclusions suggest that ongoing investment in recovery-oriented services is imperative. Helping people after detox helps them stay sober, builds stronger communities, and eases the burden on treatment services.

8.Recommendations

To improve long-term recovery outcomes and lower the risk of relapse, services that help people with drug addiction should use a variety of coordinated methods:

- Make it easier for people to get integrated treatment models that use both medication and behavioural therapies to help them stay sober for a long time.

- Use contingency management techniques, which reward good behaviour with incentives to boost motivation and participation.
- Give people structure and routine through group sessions, volunteering, mentoring, and other activities that help them build their identity and confidence.
- Strengthen recovery networks in the community so that people feel connected, supported, and understood as they go through their recovery.
- Give people more chances to get peer support, since relationships with people who have been through similar things can help them feel less alone and stronger.
- Make sure that aftercare services include social support, like help with finding a place to live, a job, and meeting daily needs.
- Offer long-term follow-up and recovery planning to encourage ongoing support after detox.

9.References

Biondi, B.E., Vander Wyk, B., Schlossberg, E.F., Shaw, A. and Springer, S.A. (2022) 'Factors associated with retention on medications for opioid use disorder among a cohort of adults seeking treatment in the community', *Addiction Science & Clinical Practice*, 17(1). doi:10.1186/s13722-022-00299-1.

Black, C. (2021) *Review of drugs part two: prevention, treatment, and recovery*. GOV.UK. Available at: <https://www.gov.uk/government/publications/review-of-drugs->

[phase-two-report/review-of-drugs-part-two-prevention-treatment-and-recovery](#)

(Accessed: 6 December 2025).

Bolívar, H.A., Klemperer, E.M., Coleman, S.R.M., DeSarno, M., Skelly, J.M. and Higgins, S.T. (2021) 'Contingency management for patients receiving medication for opioid use disorder', *JAMA Psychiatry*, 78(10), p.1092. doi:10.1001/jamapsychiatry.2021.1969.

British Healthcare Business Intelligence Association (2024) *Your essential guide: Legal and ethical guidelines for healthcare data analytics*. Available at: https://www.bhbia.org.uk/assets/Downloads/Guidelines/legal-and-ethical-guidelines-for-analysts_september2024_final_nb.pdf (Accessed: 30 October 2025).

Center for Health Care Strategies (2013) *About us*. Available at: <https://www.chcs.org/about-us/> (Accessed: 12 October 2025).

Corner, T., Arden-Close, E. and McAlaney, J. (2023) 'Wellbeing in Addiction Recovery: Does It Differ across Addictions?', *International Journal of Environmental Research and Public Health*, 20(14), p.6375. doi:10.3390/ijerph20146375.

Flick, U. (2022) *An introduction to qualitative research*. London: SAGE.

Getty, C., McQuarrie, T. and Brobbin, E. (2025) 'Contingency management interventions for substance use and addictive behaviours: Review of the United Kingdom evidence base', *Addiction*. doi:10.1111/add.70240.

Ginley, M.K., Pfund, R.A., Rash, C.J. and Zajac, K. (2021) 'Long-term efficacy of contingency management treatment based on objective indicators of abstinence from illicit substance use up to 1 year following treatment: A meta-analysis', *Journal of Consulting and Clinical Psychology*, 89(1), pp.58–71. doi:10.1037/ccp0000552.

GOV.UK (2025) *Part 1: Introducing recovery, peer support and lived experience initiatives*. Available at: <https://www.gov.uk/government/publications/recovery-support-services-and-lived-experience-initiatives/part-1-introducing-recovery-peer-support-and-lived-experience-initiatives> (Accessed: 6 December 2025).

Humphreys, G. and Finch, N. (2025) 'Experiences of a lived experience recovery organisation for those in abstinence-based substance use recovery: a thematic analysis', *Substance Abuse Treatment, Prevention, and Policy*, 20(1). doi:10.1186/s13011-025-00671-9.

Kabir, A. (2024) *Thematic analysis: A practical guide*, 39, pp.142–145. doi:10.58837/chula.ppj.39.8.

Lomas, C.D. (2024) 'A thematic analysis of British rehabilitation centres clients reviews 2020–2024', *Alcoholism Treatment Quarterly*, pp.1–21. doi:10.1080/07347324.2024.2441167.

National Institute on Drug Abuse (2020) *Treatment and recovery*. Available at: <https://nida.nih.gov/publications/drugs-brains-behavior-science-addiction/treatment-recovery> (Accessed: 13 October 2025).

NHS England (2024) *10-year strategic plan for the drug and alcohol treatment and recovery workforce (2024–2034)*. Available at: <https://www.england.nhs.uk/wp-content/uploads/2024/05/PRN00937-10-year-strategic-plan-for-the-drug-and-alcohol-treatment-and-recovery-workforce-2024-to-2034.pdf> (Accessed: 7 December 2025).

Nuffield Trust (2025) *Adult substance misuse services*. Available at: <https://www.nuffieldtrust.org.uk/resource/adult-substance-misuse-services-1> (Accessed: 6 December 2025).

Office for Health Improvement & Disparities (2021) *Adult substance misuse treatment statistics 2020 to 2021: report*. Available at: <https://www.gov.uk/government/statistics/substance-misuse-treatment-for-adults-statistics-2020-to-2021/adult-substance-misuse-treatment-statistics-2020-to-2021-report> (Accessed: 7 December 2025).

Office for Health Improvement & Disparities (2024) *Adult substance misuse treatment statistics 2023 to 2024: report*. Available at: <https://www.gov.uk/government/statistics/substance-misuse-treatment-for-adults-statistics-2023-to-2024/adult-substance-misuse-treatment-statistics-2023-to-2024-report> (Accessed: 7 December 2025).

Rolová, G., Lukavská, K., Tibenská, A.G., Skorkovský, T., Miovský, M., Vevera, J. and Gabrhelík, R. (2023) 'Factors associated with abstinence in addiction inpatient treatment cohort: a five-year follow-up', *Journal of Substance Use*, 30(1), pp.1–7. doi:10.1080/14659891.2023.2226204.

Sinclair, D.L., Chantry, M., Ruyscher, C.D., Magerman, J., Nicaise, P. and Vanderplasschen, W. (2024) 'Recovery-supportive interventions for people with substance use disorders: a scoping review', *Frontiers in Psychiatry*, 15. doi:10.3389/fpsy.2024.1352818.

TherapyDen (2023) *From alcohol to opioids: A deep dive into substance abuse statistics*. Available at: <https://www.therapyden.com/blog/substance-abuse-statistics> (Accessed 6 December 2025).

