



Substance use, intoxication and withdrawal management workshop

Evaluation report, January to June 2025

Acknowledgements

We sincerely thank and acknowledge all trainees who participated in the training and completed the survey.

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Te Pou is a national centre of evidence-based workforce development for the mental health and addiction sectors in Aotearoa New Zealand.

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Summary of findings

Te Pou delivered seven substance use, intoxication, and withdrawal workshops (3 in-person, 4 online) between January and June 2025. A total of 138 participants attended, with a post-workshop survey response rate of 72 percent.

Participants worked in community (66 percent) and clinical (33 percent) settings, with attendees from all Health New Zealand | Te Whatu Ora regions. The Midland region had the highest representation at 33 percent.

All respondents indicated an intention to apply workshop learnings in their work. Key areas of application included:

1. Recognising substance use and withdrawal
2. Supporting tāngata whai ora with practical approaches
3. Making appropriate referrals
4. Team collaboration and knowledge sharing

Post-workshop feedback indicated:

- knowledge of problematic substances and their impacts in Aotearoa increased nearly threefold (2.8 times), equipping participants with a broader understanding of substance-related harm.
- ability to identify individuals experiencing or considering withdrawal more than doubled (2.6 times), enhancing early intervention potential.
- confidence and awareness of support resources rose nearly threefold (2.9 times), strengthening participants perceived readiness to respond.
- 85 percent of respondents felt confident initiating referrals, offering the potential for strengthened pathways to care.
- 90 percent reported improved ability to recognise stigma, and 84 percent felt more confident challenging it in clinical decision-making, potentially supporting more mana enhancing and equitable practice.

Participants consistently rated the workshops as engaging, informative, and inspiring, with 100 percent rating facilitation as “good” or “very good.” The positive feedback supports continued delivery and expansion, with recommendations to broaden regional access and enhance content based on participant suggestions such as adopting more interactive formats, offering flexible delivery options and ensuring inclusive content.

Background and methodology

Substance use and withdrawal remain significant challenges across Aotearoa. Interactions with someone using substances or in stages of withdrawal occurred in varied settings such as police cells, prisons, hospitals, and community services, often where staff lack specialised training (Ministry of Health, 2024). These challenges also affect professionals outside healthcare, including social workers, peer support workers, and first responders (Dee & Pyne, 2022).

To address this skill gap, Te Pou delivers online and in-person workshops that strengthen the capability of frontline workers in both clinical and community environments. These workshops support the Mental Health and Addiction service goals by promoting early identification of substance-related issues, timely referrals, and an initial introduction towards safe withdrawal management. They help build a skilled workforce, reduce long-term service demand, and advance a more equitable health system (Health New Zealand | Te Whatu Ora, 2024).

The workshops aim to build participants' knowledge and confidence in responding to substance use, intoxication, and withdrawal. Key learning outcomes include the ability to:

- recognise and support someone who is intoxicated
- engage effectively with people who use substances
- support and respond to someone contemplating or undergoing withdrawal
- understand the function of substance use and the impact of stigma on help-seeking.

These workshops are designed for people with prior experience or training in addiction services and are offered at no cost. For those without previous experience, it is recommended to first complete the Blueprint for [Addiction 101 workshop](#) before attending. Participants can earn continuing professional development (CPD) points through the Drug and Alcohol Practitioners' Association Aotearoa–New Zealand (dapaanz).

At the end of each workshop, participants are invited to complete an online feedback survey (Refer to Appendix A for the full list of survey questions). Time is allocated during the session for this purpose, and a follow-up email is sent one week later to encourage additional responses. This report summarises participant feedback from workshops held between January and June 2025, based on responses collected through these surveys.

In previous years, separate workshops were delivered for the community and clinical workforce, each accompanied by a distinct set of feedback questions. This separation presented challenges in drawing cohesive insights across the programme, as the differing contexts and priorities of each group led to fragmented data and limited comparability. Our last evaluation highlighted challenges in synthesising insights across these groups. To address these challenges, the workshops were refreshed to include both clinical and community participants in the same sessions. Alongside this, the survey approach was streamlined to use a unified set of questions across all participant groups. This has enhanced data quality and fostered richer,

shared learning. As part of our ongoing efforts to enhance evaluation quality and utility, we are now moving to a six-monthly reporting schedule. This change is intended to increase the comparability of consecutive reports, enabling us to better track progress, identify trends, and respond more effectively to emerging needs.

Overview of workshops January - June 2025

Over the six-month period, a total of seven workshops were delivered, attended by 138 participants. Of these, 99 completed the post-workshop survey, resulting in a 72 percent response rate (see Table 1). This strong level of engagement indicates that the feedback is likely representative of the overall participant experience, enhancing the reliability and credibility of the findings.

Table 1. Overview of workshops January - June 2025

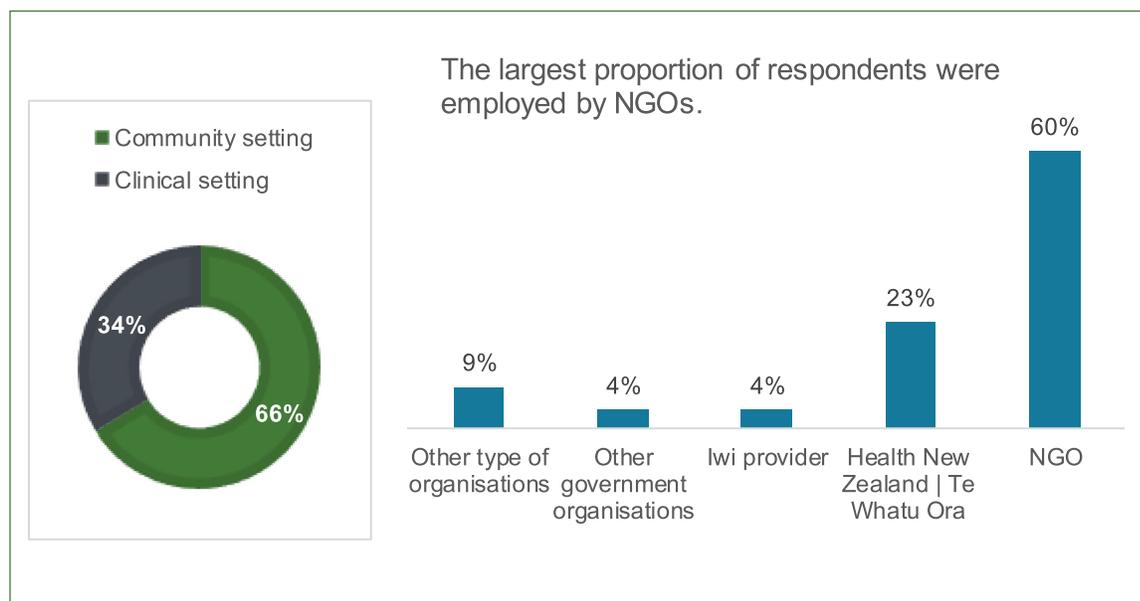
Workshops January - June 2025			
Format	Workshops	Workshop participants (n)	Survey respondents (n, response rate)
In-person	3 (Auckland, Dunedin and Rotorua)	69	45 (65%)
Online	4	69	54 (78%)
Total	7	138	99 (72%)

Key workshop outcomes

Respondents profile

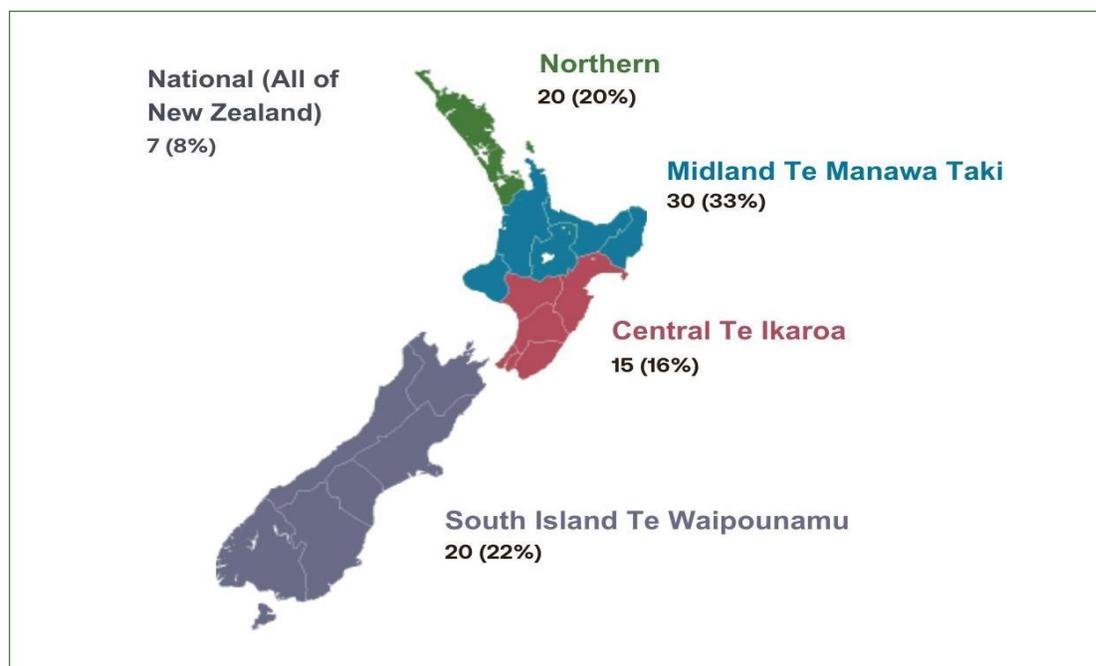
Most respondents (66 percent) worked in community settings, while 33 percent were in clinical roles. The majority were employed by NGOs (60 percent), followed by Health New Zealand | Te Whatu Ora (33 percent), with smaller numbers working for Iwi providers (4 percent) and other organisations (9 percent) such as a private company, Te Pūkenga and other community-based organisations. See Figure 1.

Figure 1. Overview of settings respondents worked in (92 respondents)



One-third of respondents were based in the Midland region (33 percent), followed by the South Island (22 percent), Northern region (20 percent), and Central region (16 percent). An additional eight percent reported working nationally. See Figure 2.

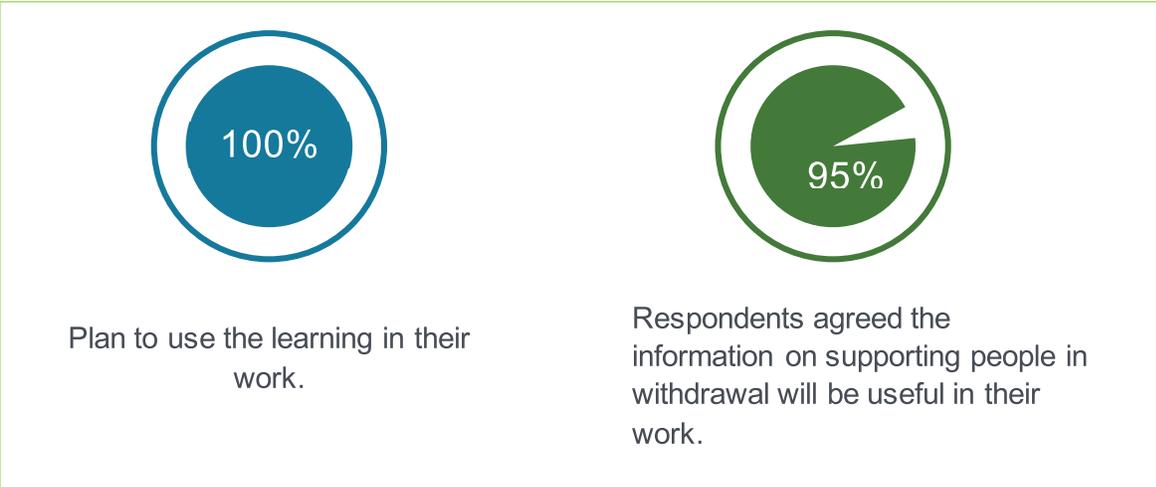
Figure 2. Health New Zealand | Te Whatu Ora region (92 respondents)



Implementation of workshop learnings

All respondents (100 percent) indicated they intend to apply the learnings from the workshop in their work and a majority (95 percent) agreed that the content related to supporting people in withdrawal will be useful in their work. See Figure 3.

Figure 3. Percentage of respondents planning to use the learning (85 respondents)



Respondents further provided in detail on how they plan to implement their learning. Their responses can be broadly categorised into four key themes (see Figure 4.), reflecting the diverse ways in which the workshop content is expected to inform and enhance their practice.

Figure 4. Key themes on how respondents plan to use the learning (73 respondents)



1. Recognising substance use and withdrawal

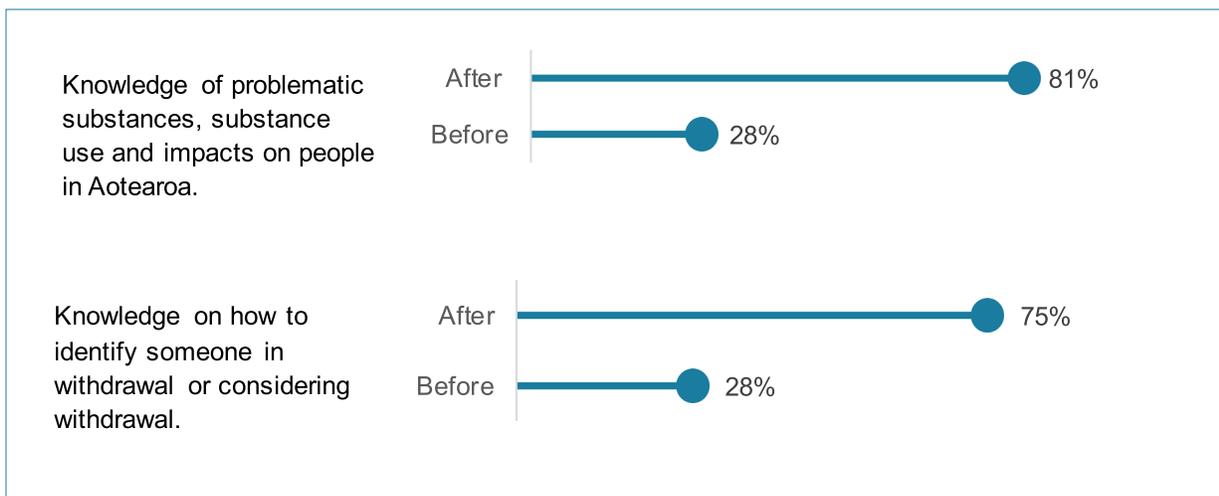
Respondents shared that the workshop effectively supported them in recognising symptoms of substance use and withdrawal, including the ability to identify signs of intoxication across a range of substances including poly-substances and substances that are less commonly disclosed, such as GHB. They highlighted managing withdrawal safely and effectively. Some participants' comments:

“Noticing signs of withdrawal and what to do. More awareness around the risks of Benzo prescribing. If clients are mixing their substances, some basic advice and sign posting.”

“There are key questions that need to be asked in my assessment process which I will now implement. I now have a better understanding of withdrawal symptoms.”

These insights were reflected in participants’ ratings, which showed increase in knowledge of problematic substances and substances use impacts in Aotearoa, and the ability to identify someone in withdrawal or considering withdrawal after the workshop. (see Figure 5).

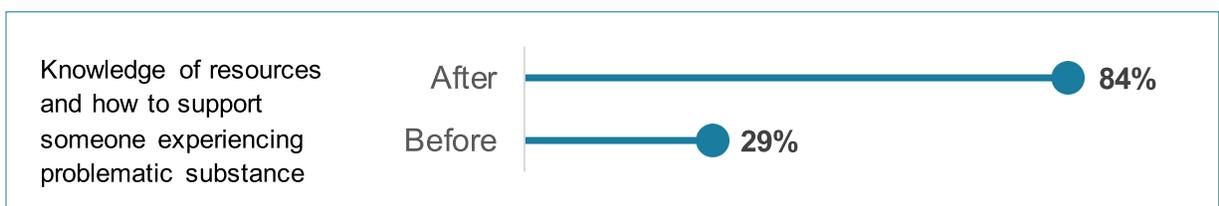
Figure 5. Respondents' ratings of “good” and “very good” on a statement about knowledge before and after the workshop (87 respondents)



2. Supporting tāngata whai ora with practical insights

Respondents shared their intention to apply approaches such as harm reduction approach, motivational interviewing, de-escalation techniques, and respectful care to enhance their support for tāngata whai ora. This was reflected in post-workshop ratings, which showed a 2.9 times increase in knowledge of available resources and confidence in supporting individuals experiencing problematic substance use (see Figure 6).

Figure 6. Respondents' ratings of “good” and “very good” on a statement about knowledge before and after the workshops (87 respondents)



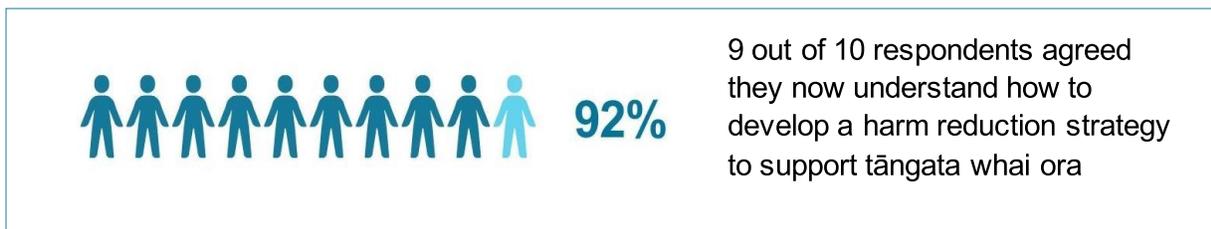
Several respondents emphasised the importance of engaging more meaningfully with tāngata whai ora by facilitating conversations, providing education, and offering accurate, relevant information. Some examples shared by respondents:

“The emphasis on harm reduction approaches was a good reminder and confirmation that this approach is often the best when applying support for tāngata whai ora who are still actively in substance use.”

“Implementing what I have learnt. Using motivational interviewing. Signs of withdrawal or intoxication and how to manage this.”

Many also indicated a strong intention to adopt harm reduction approaches, with 92 percent agreeing or strongly agreeing that they now understand how to develop a harm reduction strategy to support tāngata whai ora (See Figure 7).

Figure 7. Respondents' ratings of “agree” and “strongly agree” after workshop (87 respondents)



3. Making appropriate referrals

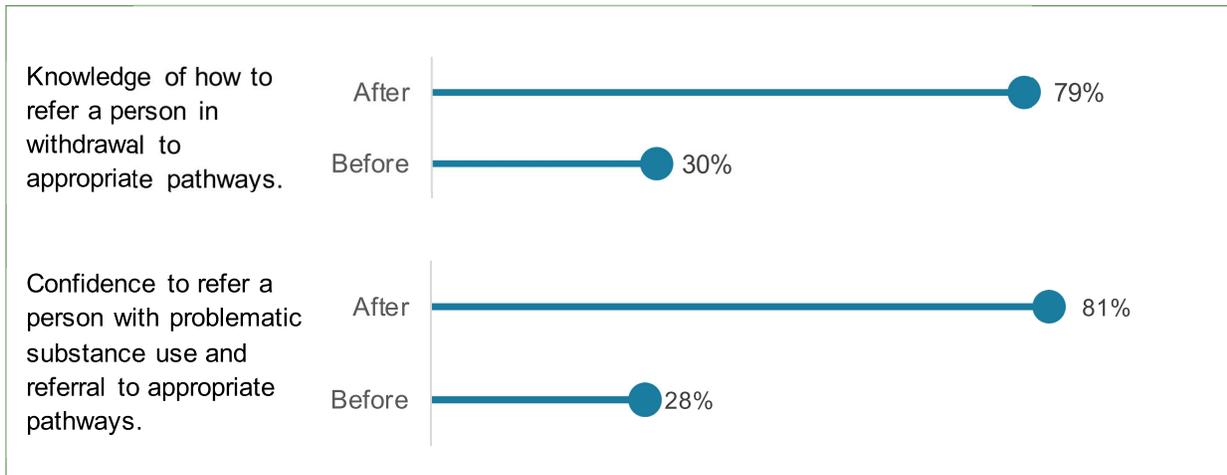
Many respondents reported increased knowledge and confidence in using screening tools, navigating referral pathways, planning treatment, and documenting processes. Some comments from respondents:

“In continuously improving referral assessment and development of treatment care plan”

“I’m better informed to educate tāngata whai ora on the withdrawal process and risks. Documenting a referral pathway for managed withdrawal and for managing intoxication.”

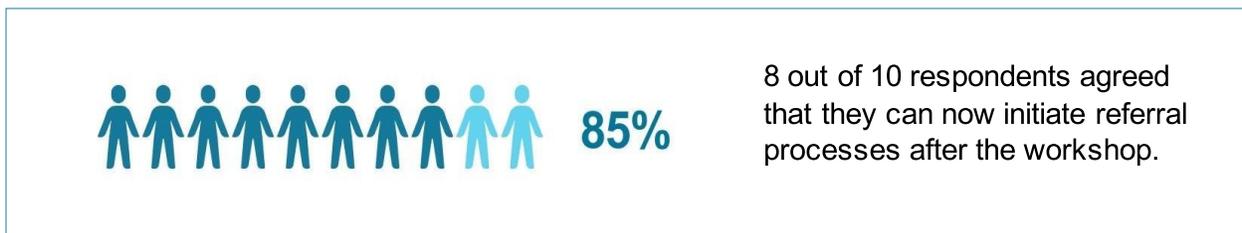
This was reflected in the post-workshop ratings, which showed a positive shift in respondents' knowledge and confidence to refer a person with problematic substance use and a person in withdrawal to appropriate pathways (see Figure 8.).

Figure 8. Respondents' ratings of "good" and "very good" on a statement about knowledge before and after the workshop (87 respondents)



A majority of respondents (85 percent) agreed or strongly agreed that they can now initiate referral processes after the workshop.

Figure 9. Respondents' ratings of "agree" and "strongly agree" after workshop (87 respondents)



4. Team collaboration and knowledge sharing

Some respondents shared how they plan to take the knowledge and resources back to their team and organisations they work in. Some examples include:

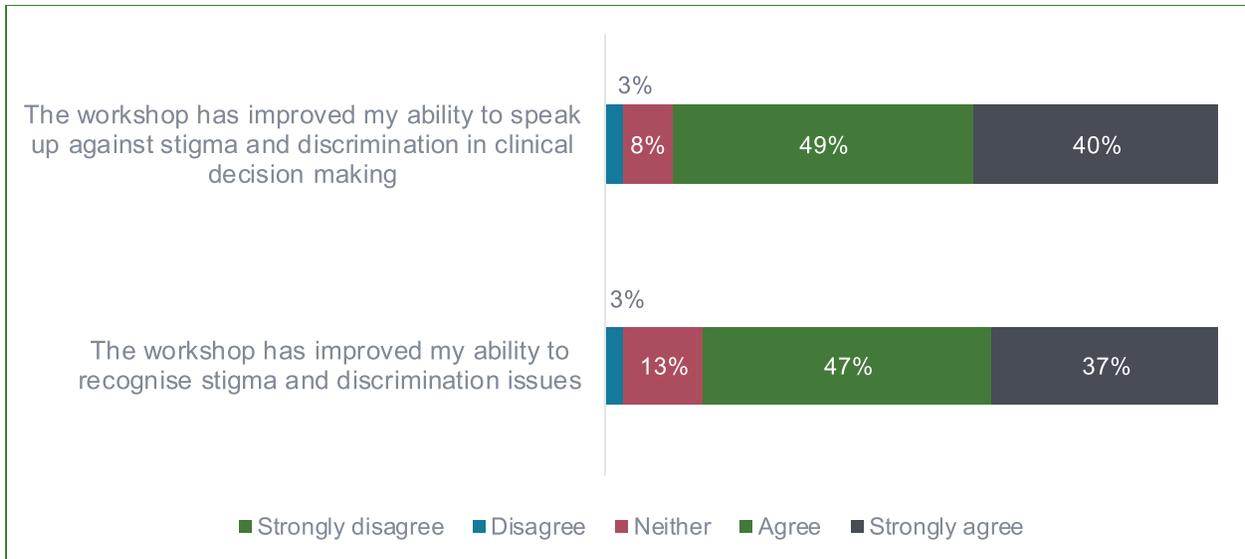
“Taking resources into workplace. Having further discussions with team members and encouraging inquiry. Planning a study day to take place in our organisation with this content.”

“Share with the wider team and help advocate for tāngata whai ora to help them on their journey to recovery”

Stigma and discrimination

An increased ability to recognise and respond to stigma and discrimination was one of the key intended outcomes of the workshops. Most respondents (90 percent) agreed or strongly agreed that the workshop had improved their ability to recognise issues related to stigma and discrimination. Additionally, 84 percent agreed or strongly agreed that the workshop had improved their ability to speak up against stigma and discrimination in clinical decision-making.

Figure 10. Respondents' ratings of "agree" and "strongly agree" after workshop (77 respondents)



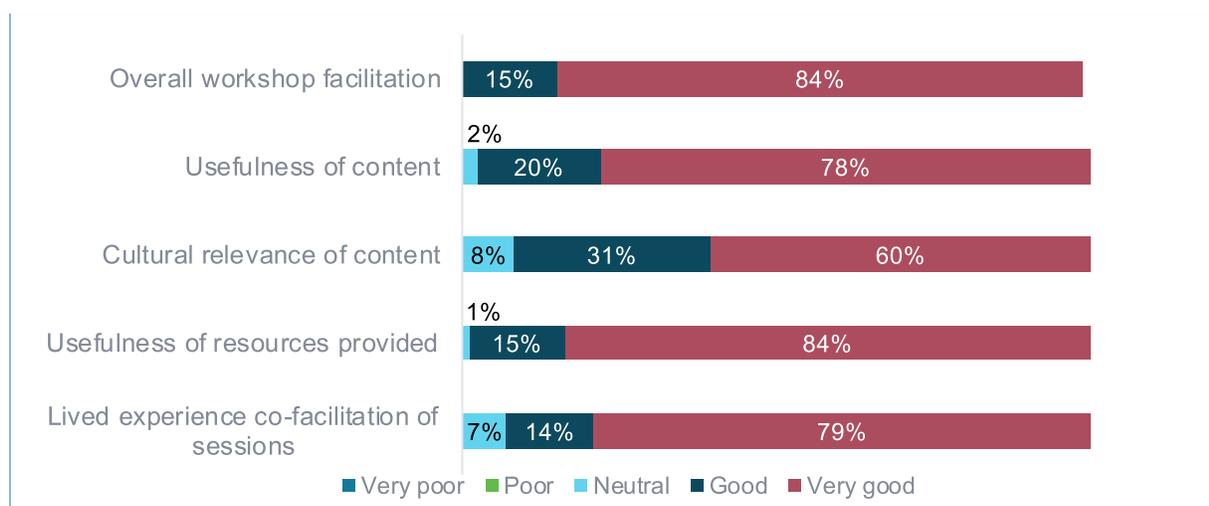
Overall ratings and comments

Respondents were asked to rate various aspects of the workshops. The overall facilitation was rated as “good” or “very good” by 100 percent of respondents. Ninety-eight percent rated the usefulness of the content positively, while 91 percent felt the cultural relevance of the material was good or very good. The usefulness of provided resources received a 99 percent positive rating, and 93 percent rated the lived experience co-facilitation as “good” or “very good” (see Figure 11.). These ratings were also supported in the qualitative feedback.

Participants consistently described the workshops as engaging, informative, and inspiring. Many felt welcomed and supported, and praised the facilitators for their expertise, clarity, and ability to share lived experience. Several attendees highlighted the workshops as fun, enlightening, and worthwhile, with strong recommendations for others to attend. One respondent shared:

“Very inspiring and informative. Helped me greatly to keep reminding me of what I know but also provide coverage of important information and guidance from skilled clinical and peer support staff, to build on my practice. All facilitators were engaging and knowledgeable of lived experience and clinical practice. The booklet is a valuable resource, that I will use regularly.”

Figure 11. Overall rating on the workshops (86 respondents)



Suggestions for improvement

Respondents were invited to share suggestions for improving future workshops. Of the 63 who commented, several praised the workshop or had no suggestions. Over half (34 participants) provided constructive ideas, highlighting valuable opportunities for ongoing improvement. These suggestions have been categorised into four key areas: content, format and delivery, learning enhancements, and inclusivity and engagement. A summary of these categories is presented in Figure 12.

While the cultural relevance of the workshop content was rated highly overall (91 percent), a small number of respondents (three) suggested that the training could be further enriched by incorporating more culturally specific material.

Figure 12. Suggestions for improvement (63 respondents)

Content	<p>More focus on withdrawal, alcohol, cannabis, GBL/GBH, and meth contamination.</p> <p>Include motivational interviewing and service navigation.</p> <p>More cultural specific content working with Māori and Pasifika.</p>
Format and Delivery	<p>More workshops, ideally quarterly or weekly.</p> <p>Longer sessions for group work and lived experience sharing.</p> <p>Consider shorter overall duration and split morning/afternoon options.</p>
Learning Enhancements	<p>Use quizzes, visual aids, practice scenarios, and send slides.</p> <p>Include mindfulness breaks and breathing exercises.</p>
Inclusivity and Engagement	<p>Encourage pronoun use and add captions to videos.</p> <p>Create post-workshop connection groups if interest exists.</p>

Conclusion and future direction

The feedback clearly demonstrates that the workshop successfully delivered its intended learning outcomes. Participants reported that the workshop was highly effective in equipping them with practical knowledge and skills to support people experiencing substance use, intoxication, and withdrawal. The positive feedback reflected in both quantitative ratings and qualitative comments demonstrates that attendees found the content relevant, culturally responsive, and applicable to their work.

Participants reported improved ability to recognise and respond to withdrawal symptoms, greater confidence in harm reduction strategies, better referral practices, and a strong commitment to team-based knowledge sharing. Additionally, they reported a deeper understanding of the function of substance use and the impact of stigma, with most feeling empowered to identify and speak out against stigma and discrimination in their practice. The success of the workshop is underscored by the fact that 100 percent of respondents intend to apply the learnings in their work.

These outcomes align closely with Mental Health and Addiction service goals, particularly in promoting equity and culturally responsive care. Practical tools like harm reduction and stigma awareness enhance frontline effectiveness, especially for those supporting tāngata whai ora.

The strong positive feedback and improved ratings reinforce the value of these workshops and underscore the importance of continuing them to support workforce development. To further enhance impact and reach, it is recommended that future workshops incorporate participant suggestions—such as adopting more interactive formats, offering flexible delivery options, ensuring inclusive content, and expanding access to in-person sessions across regions to engage a broader segment of the workforce.

References

Health New Zealand | Te Whatu Ora. (2024). *Mental Health and Addiction Targets: Implementation Plans July 2024 – June 2027*. Retrieved from <https://www.tewhatauora.govt.nz/assets/Publications/Health-targets/Mental-Health-and-Addiction-Targets-Implementation-Plans.pdf>

Ministry of Health. (2024). *Mental Health and Problematic Substance Use: New Zealand Health Survey: 2016/17 and 2021–23*. Wellington: Ministry of Health

Appendix A: Survey questions

Substance use, intoxication and withdrawal management – Post workshop evaluation 2025

Tēnā koe

Thank you for participating in this workshop.

Please take the next 5 minutes to respond to the post workshop evaluation survey. Your feedback is important as it helps Te Pou understand what parts of the workshop are working and what parts need more work.

Participation is voluntary. The survey is anonymous. Data will be collected and used for programme promotion, improvement, and periodic monitoring reports to Te Whatu Ora. No one will be identified in the reports and completion statistics.

Please direct any questions about the evaluation to Katie Palmer du Preez on katie.palmerdupreez@tepou.co.nz.

* 1. Did you attend your workshop online or in person?

In-person

Online



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In-person workshops

* 2. Which city was your in-person workshop held in?

Wellington

Rotorua

Auckland

Christchurch

Dunedin

Other (please specify)

3. When did you attend the workshop?

Date / Time

Date



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Online workshops

* 4. Which online sessions did you attend? (Please tick all that apply)

- Part one
- Part two
- Part three

5. When was the final session of your online workshop?

Date / Time

Date



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Your work setting

* 6. What type of organisation do you work for?

- Te Whatu Ora Health New Zealand
- NGO
- Iwi provider
- Other government organisations
- Other type of organisations (please specify)

* 7. Which Te Whatu Ora—Health New Zealand district do you mainly work in?

- | | |
|--|--|
| <input type="radio"/> Te Tai Tokerau | <input type="radio"/> Whanganui |
| <input type="radio"/> Waitematā | <input type="radio"/> Capital, Coast and Hutt Valley |
| <input type="radio"/> Te Toka Tumai Auckland | <input type="radio"/> Te Matau a Māui Hawke's Bay |
| <input type="radio"/> Counties Manukau | <input type="radio"/> Wairarapa |
| <input type="radio"/> Waikato | <input type="radio"/> Waitaha Canterbury |
| <input type="radio"/> Lakes | <input type="radio"/> Te Tai o Poutini West Coast |
| <input type="radio"/> A Toi Bay of Plenty | <input type="radio"/> Nelson Marlborough |
| <input type="radio"/> Tairāwhiti | <input type="radio"/> Southern |
| <input type="radio"/> Taranaki | <input type="radio"/> South Canterbury |
| <input type="radio"/> Te Pae Hauora o Ruahine o Tararua MidCentral | <input type="radio"/> All of New Zealand (national) |

* 8. Which of the following best describes the place where you work

- I work in a community setting
- I work in a clinical setting



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Knowledge, confidence and skills

Please answer the following questions as they relate to your experience before and after the workshop.

* 9. My knowledge of problematic substances, substance use and impacts on people in Aotearoa.

Not knowledgeable A little knowledgeable Somewhat knowledgeable Knowledgeable Very knowledgeable

<u>Before</u> the workshop	<input type="radio"/>				
<u>After</u> the workshop	<input type="radio"/>				

* 10. My knowledge of resources and how to support someone experiencing problematic substance use.

Not knowledgeable A little knowledgeable Somewhat knowledgeable Knowledgeable Very knowledgeable

<u>Before</u> the workshop	<input type="radio"/>				
<u>After</u> the workshop	<input type="radio"/>				

* 11. My knowledge on how to identify someone in withdrawal or considering withdrawal.

Not knowledgeable A little knowledgeable Somewhat knowledgeable Knowledgeable Very knowledgeable

<u>Before</u> the workshop	<input type="radio"/>				
<u>After</u> the workshop	<input type="radio"/>				

* 12. My knowledge of how to refer a person in withdrawal to appropriate pathways.

Not knowledgeable A little knowledgeable Somewhat knowledgeable Knowledgeable Very knowledgeable

<u>Before</u> the workshop	<input type="radio"/>				
<u>After</u> the workshop	<input type="radio"/>				

* 13. My confidence to refer a person with problematic substance use and referral to appropriate pathways.

Not confident A little confident Somewhat confident Confident Very confident

Before the workshop/webinar	<input type="radio"/>				
After the workshop/webinar	<input type="radio"/>				



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Statements

* 14. Please rate your agreement with the following statements.

Strongly disagree Disagree Neither Agree Strongly agree

I now have the understanding to develop a harm reduction strategy to support tāngata whai ora (people seeking wellness).

Due to the workshop, I can now initiate referral processes.

The information provided on supporting a person in withdrawal from substances will be useful for my work when required.



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Stigma and discrimination

* 15. Please rate your agreement with the following statements

Strongly

disagree Disagree Neither Agree Strongly agree

The workshop has improved my ability to recognise stigma and discrimination issues

The workshop has improved my ability to speak up against stigma and discrimination in clinical decision making



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Workshop content, facilitation and resources overall

* 16. Please rate the workshop content, facilitation, and resources overall.

Very poor Poor Neutral Good Very good

Usefulness of content

Cultural relevance of content

Overall workshop facilitation

Usefulness of resources provided

Lived experience co-facilitation of sessions



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General feedback

17. Please comment on your ratings

18. Do you plan to use your learning from this workshop in your work?

Yes

No

19. If yes, how do you plan to use your learning in your work?

20. Any suggestions for workshop improvements



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Thank you for taking the survey!

If you have any questions about your participation in the workshop or future workshops that Te Pou conducts, please reach out to Jason Jones on Jason.Jones@tepou.co.nz.