
PROGRAMME ON
**SUBSTANCE
ABUSE**

Costs and Effects of
Treatment for Psychoactive
Substance Use Disorders:

A framework for evaluation



WORLD HEALTH ORGANIZATION

ABSTRACT

The Programme on Substance Abuse (PSA), within the Division of Mental Health and Prevention of Substance Abuse (MSA), of the World Health Organization (WHO) held an Advisory Group Meeting in Toronto, Canada, at the Addiction Research Foundation, from 6-10 November 1995, to discuss a global project on the evaluation of effectiveness of treatments for psychoactive substance use problems. They discussed why and how a proper evaluation should be undertaken, with details of the many different types of evaluations including; evaluation assessment, needs assessment, process evaluation, costing frameworks, client satisfaction and outcome and economic evaluation. The group agreed upon a three year project aimed at developing, testing and disseminating international guidelines on the proper implementation of treatment evaluations. The advisory group also presented several recommendations aimed at improving, supporting and standardizing treatment evaluations. This would be achieved by having WHO support and encourage the use of evaluation instruments and documents by governments and relevant agencies, in both developed and developing countries.

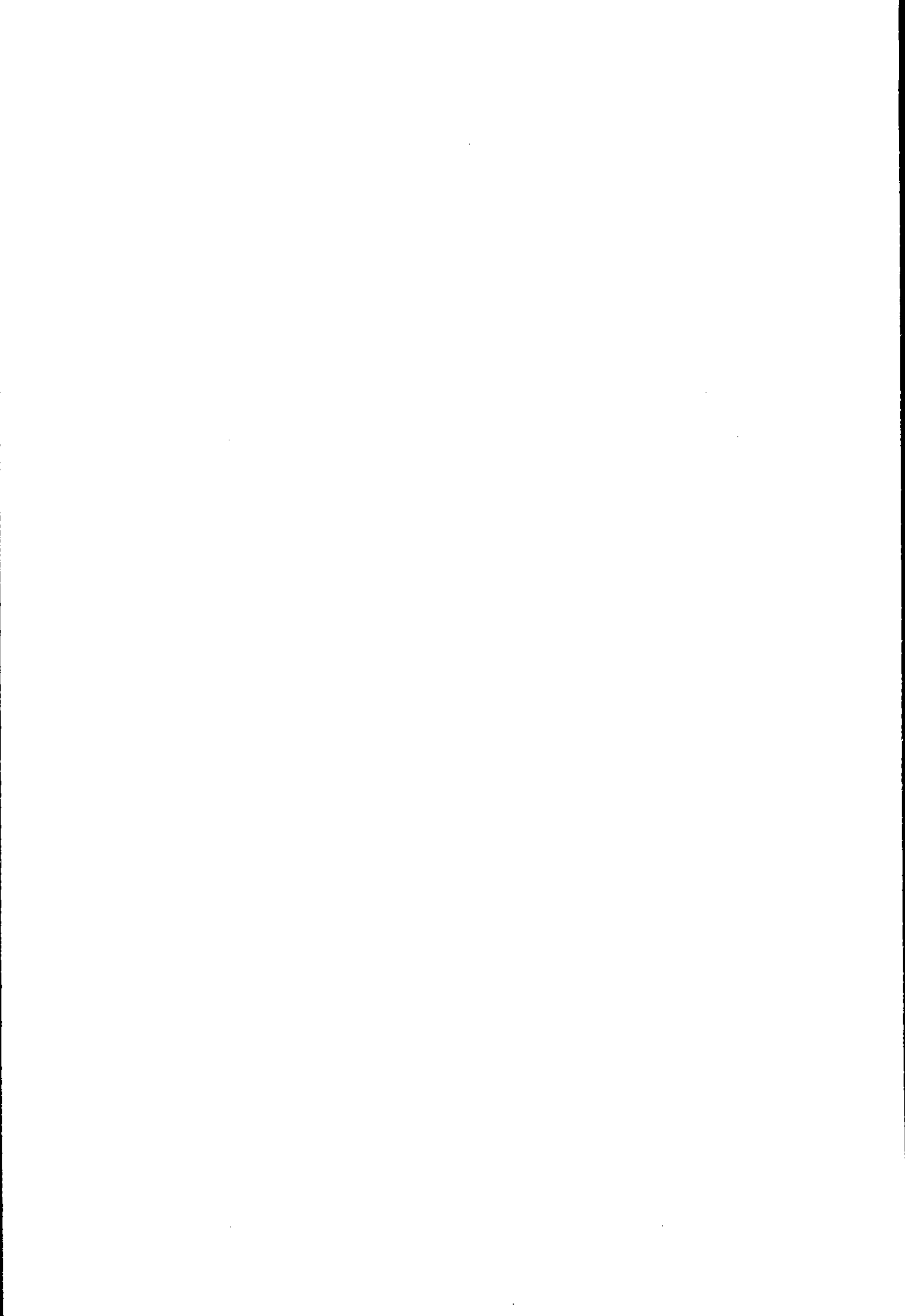
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EXECUTIVE SUMMARY

During the week of 6 to 10 November 1995, the Programme on Substance Abuse (PSA) of the World Health Organization (WHO) held an Advisory Group Meeting on "The Efficacy of Treatment Approaches of Substance Use Disorders", in Toronto, Canada at the Addiction Research Foundation (ARF). PSA brought together seven professionals in the field of substance use with the following purposes and objectives in mind;

- discuss the feasibility of a global project on the efficacy of treatment;
- discuss programme-specific and treatment-modality-specific evaluations of effectiveness of treatment for alcohol/tobacco, licit and illicit drug problems;
- discuss outcome measures for treatment evaluation, and methods for evaluating the effectiveness of treatment;
- discuss the different methods for health system research and the methods used to calculate the economic costs of alcohol and drug problems;
- discuss the methods for cost-benefit analysis of treatment and the methods for a proper evaluation of a project;
- agree upon a strategy and methodology for a cost-effective analysis of treatment and health system research.

The Advisory Group discussed and agreed on a three year project aimed at developing, testing, and disseminating international guidelines on how to conduct treatment evaluation. Phase II of the project consisted of the elaboration of workbooks and preparation of case studies. This phase was initiated in 1996. A second meeting of the Advisory Group will be convened before Phase II activities begin to review the workbooks and case studies, and to generate a training package for field testing in sites for all WHO regions.

Each site will be responsible for the identification of appropriate outcome measurements of health, social, occupational and psychological status related to the treatment of substance use disorders, both at the individual as well as the community level. Comparisons between these indicators across different sites will allow the analysis of cross-cultural comparability of evaluation approaches and generalization of results.

BACKGROUND

From the public health perspective, it is becoming increasingly evident that substance use plays a major role in morbidity and mortality on a worldwide scale. Despite efforts in supply control and primary prevention, there are large numbers of individuals who develop harmful or dependent patterns of use, thereby suffering from substance use disorders requiring treatment. Treatments are specific activities directed at those who have drug and alcohol problems in the hope of improving their health status and quality of life. **Health**, as defined by the World Health Organization, is **not only the absence of infirmity but a state of complete physical, mental and social well-being**. The term treatment should, therefore, be used to define the process that begins when psychoactive substance users come into contact with a health provider or service, and continues through a systematic succession of specific interventions until the highest attainable level of health and well-being is reached. It includes a comprehensive approach to detection, assistance, health care, and social integration of persons presenting problems due to psychoactive substance use.

A definition as such recognizes the entitlement of users to be treated with humanity and respect for the inherent dignity of the human person, and protects their right to live within their communities, and to enjoy health and well-being. It also protects the users rights to fully participate in educational, social, cultural, recreational, religious, economic, and political activities, including the provision of opportunities for gainful economic activities for users, and the integration of children affected by psychoactive substance use in ordinary schools.

Failure to provide adequate treatment is likely to prove costly to health services and the community; substance users would still seek help, and would inevitably turn to health services, not necessarily the right kind. Untreated individuals with psychoactive substance use problems are also likely to block up the courts and the penal system if they are routed in only that one direction (*WHO Technical Report Series No. 836, Geneva, 1993*).

WHO regards treatment and rehabilitation programmes as essential to public health. WHO has carried out many projects addressing standards of various treatment and care interventions, the range of approaches available worldwide, and identification of those which have been more carefully evaluated in studies of treatment efficacy. At present, however, the extent and quality of care available to psychoactive substance users are often inadequate, particularly because some service providers may regard drug users as unworthy of help.

The WHO-sponsored studies have indicated that treatment is multidimensional and may consist of numerous descriptors such as modality, setting, philosophy, stage, and target. Treatment includes five broad types of modalities: biophysical, pharmacological, psychological, sociocultural and mixed modalities that combine more than a single type. Treatment settings may include specialized substance abuse facilities, other health care facilities and other settings such as the criminal justice system, the workplace, religious, and educational facilities. Treatment philosophies include moral, spiritual/existential, biological, psychological, sociocultural and integrative models. Stages of treatment may include acute, active and maintenance. Substance abuse treatment targets may differ according to the substance used, the interactive unit with which the therapist deals, e.g. individual, couple, group, social network, and the characteristics of the individual or interactive unit (*Approaches to Treatment of Substance Abuse. WHO/PSA 93.10*).

There are a wide variety of treatment approaches used internationally, ranging from minimal interventions, brief interventions, medical detoxification, supportive counselling, family counselling, hypnosis, cognitive therapies, relaxation therapy, to psychotherapy and traditional healing practices for drug related problems. There are currently no internationally accepted standardized measurements of outcomes or ways of evaluating different approaches to allow cross cultural comparability or generalization of results to different settings. As a direct result, the needs of society are not being met, and the scarce resources that are available tend not to be used in the most efficient way possible. Most existing treatment approaches have not been evaluated and cost effectiveness analyses are still scarce. However, such analyses are very important due to reforms in the structure of health and social care that are occurring in many nations and scarcity of resources available for the treatment of substance use disorders (*National Drug and Alcohol Treatment Responses in 23 Countries. Results from a key informant survey. WHO/PSA 93.15*).

To date, most existing treatment approaches have not been evaluated, and non-scientific information and beliefs have often been used for decision making leading to a distortion in the development, support and use of national treatment services. As a result, the needs of populations are often not met and scarce resources are not being used in the most beneficial way.

Quality treatment must be available, accessible and affordable to those in need, taking into account the scarcity of resources and the existing services in a community. The development of rational policies related to service provision and funding for such services is best achieved by assessing needs and evaluating the costs and effects of various treatment approaches. A cost benefit analysis would generate the necessary information on how to allocate available resources in the most efficient way. Therefore, there is an urgent need to provide a practical model for evaluation and cost estimation which can be adapted to the various countries and cultural settings.

EVALUATION OF TREATMENT

While recognizing the great difficulty of conducting properly controlled and valid research in this area, the questions of cost and effectiveness are capable of being investigated. The task is deserving of priority in order to assure the effective use of available resources.

To rationalize treatment resource allocation based on evaluation, it is first necessary to educate policy and decision makers, as well as programme managers, of the need for evaluation. An appreciation of the benefit and need of proper evaluation must be developed before evaluation can be fully accepted and implemented on a regular basis.

More than one evaluation approach may be needed in the process of developing an evaluation model with a wide applicability to activities, services, programmes and treatment systems. However, developing and disseminating evaluation models and tools does not guarantee their application as there are considerable barriers to effective evaluation in most jurisdictions.

Approaches available to deal with substance use problems differ considerably among nations, as do the patterns of substance use that are of concern. A range of treatment approaches can be directed to the alleviation of alcohol and drug use problems. Services may also focus on a single substance or multiple substances, including those that are generally legally available, such as alcohol and tobacco, psychoactive medications that may be available either with or without prescriptions, volatile solvents, and illicit drugs. In spite of the diversity of drug use problems and treatment responses among and within nations, common techniques can still be applied to evaluation.

Evaluation of substance use related services can occur at multiple levels, including treatment activities/components, treatment services, treatment programmes/agencies or treatment systems (see figure). At the simplest level, evaluation may focus on individual treatment activities or components such as individual counselling or pharmacotherapy. At the service level, evaluations focus on individual or combined effects of interrelated treatment activities. At the programme or agency level, the evaluation focuses on single or multiple treatment services that are provided by a single administrative entity. At the systems level, the evaluation focuses on the full complement of programmes that are available in a defined community, in larger geographic regions or on a national level. This report and accompanying material will focus on each of these evaluation levels.

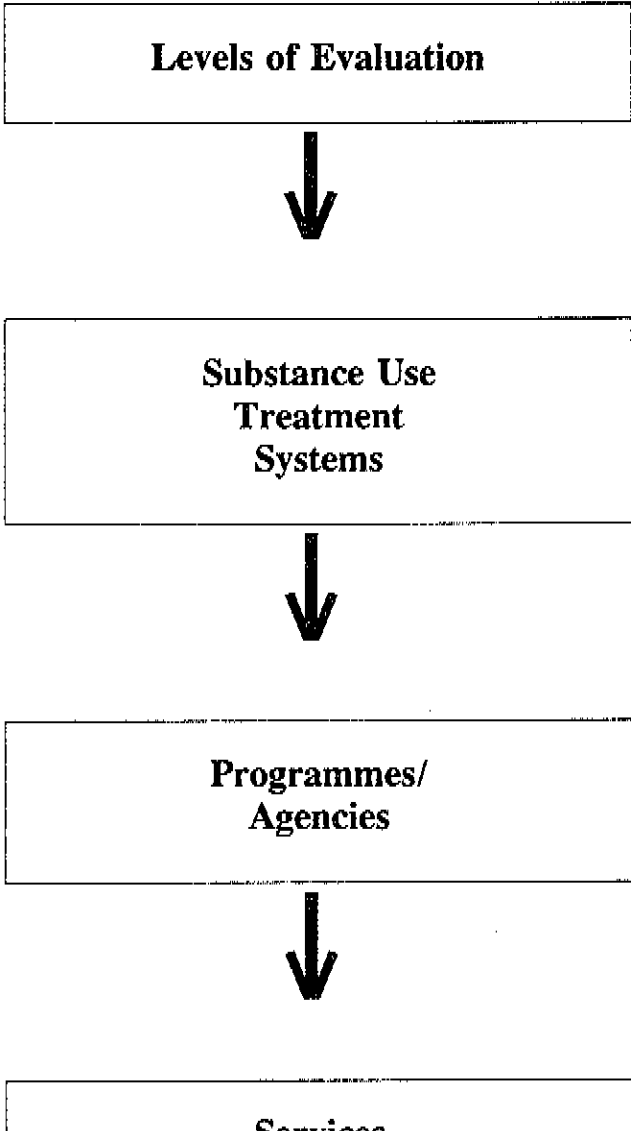
Evaluation must be understood in the broader context of a vision for psychoactive substance use services, their role in reducing tobacco, alcohol and other substance use problems in society and in the planning and delivery of these services. This broader context is reflected in the following Vision Statement and Goals:

Vision:

A society that strives to reduce substance use problems through the provision of accessible and affordable treatment services and strives unrelentingly to improve their quality and effectiveness, within the constraints of available resources.

Goals:

Two broad goals have been developed to help guide the achievement of this vision. One goal concerns the overall allocation of resources for services for persons with substance use problems. The other goal concerns the distribution of these resources across the continuum of psychoactive substance use services.



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