Research ideas for KBS special workshop on treatment systems

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There are at least five kinds of research useful for investigating alcohol and drug services at the system level.

### *.1. Systems mapping research*

This involves the description of system structures and qualities. According to Harold Klingemann, treatment mapping research can reflect a variety of perspectives as well as interactions between professionally-run and lay service providers. This approach allows for cross-country comparisons of treatment systems in various stages of development and is useful for service planning at local and national levels. A variety of data collection tools have been developed for treatment mapping purposes, but these instruments do not examine broad treatment systems issues. A new instrument, the WHO SAIMS, soon to be introduced by WHO, could serve this purpose.

### *2.* *Systems analysis*

This involves identifying the gap between population-based treatment needs and current treatment services. These analyses are rarely conducted, even though they allow the researcher to examine the extent to which services meet population needs.

### *3 . System monitoring research*

This involves the collection of quantitative data on system performance including: service utilization, continuity of care, attrition, service costs, and the impact of treatment services on health and social indicators. When these data are integrated with qualitative data on treatment system organization, they reflect the extent to which the system is meeting population needs. When systems are monitored over time, questions regarding how resources should be allocated and organized within the system to meet population needs can be addressed.

4. ***Comparative researchon treatment services and systems***

When standardized research methods are used, data collected at national levels can be compared to answer policy questions. Klingemann, Hunt and others have begun work in this area and have provided some examples of comparative cross-national treatment research.They have also outlined some of the difficulties of conducting comparative cross-national research, including securing funding for international collaborative studies, defining the unit of analysis due to the heterogeneity of treatment systems across country contexts, and variability in the availability and quality of treatment-related information.

5. ***Comparative research on the population impact of treatment systems***

Babor, Stenius and Romelsjo (2007) have developed a model of drug and alcohol treatment systems that suggests multilevel research on the population impact of treatment systems. Comparative analyses, especially when combined with prospective monitoring of changes in system indicators over time, should be able to answer basic questions about the optimal amount, organization and integration of treatment services to serve the needs of a given population. It should also allow the investigation of mediators and moderators of population effects within different treatment systems. The figures below suggest the kinds of research that might combine qualitative and quantitative methods to explore how structural resources and system qualities affect individual-level effectiveness indicators, and how effectiveness in turn affects population health indicators, such as cirrhosis rates, drink driving arrests, etc. Figure 2 suggests how system integration across various sectors of the health and social service systems can be conceptualized and investigated as one of the more important ingredients of a treatment service system.

**Figure 1. Conceptual Model of Population Impact of Treatment Systems**

**Structural**

**Resources**

* Facilities
* Programs
* Personnel

**Treatment**

**Policies**

Planning

Financing

Monitoring

Regulation

**Effectiveness**

**Population**

**Health**

**System Qualities**

* Equity
* Efficiency
* Economy

**Moderating Factors**

* Case Mix
* Social Capital
* Drinking/drug use

subcultures

Policies

System Characteristics

Effectiveness

Population Impact

