Treatment Systems needs estimation session

Needs-Based Planning for Substance Use Treatment Systems: A New Generation of Principles, Methods and Models

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Needs-based Planning

• Planning, commissioning, and then financing health services
• Using the best possible information on the needs of the population and the anticipated use of services to make capacity and cost projections
• A core element of epidemiological and services research in the field for several years.
Journal of Studies on Alcohol and Drugs (January, 2019, Supplement)

• 15 articles in a special supplement
• Designed to provide decision makers and researchers with an update on current work in substance use services.
• Articles provide a crucial counterpoint to the status quo, community/political pressure for certain types of programs, proliferation of fad treatments, and market-based solutions to the provision of health care services despite lack of evidence.
• Articles are grouped into three areas: (a) planning of treatment systems, (b) needs-based planning models, and (c) system performance measurement.
Service System

• An arrangement of facilities, programs, and personnel designed to function in a coordinated way
• Includes linkages between specialized care and other types of services, such as mental health, general medicine, social welfare, criminal justice and mutual help organizations
Why a systems perspective to needs-based planning?

- Services for substance use disorders expanded dramatically in developed countries after the 1970’s— but often in a fragmented and arbitrary way.
- Most treatment research has focused on modalities, not systems
- Resource allocation decisions and treatment policies have a major effect on the development of SUD services, but there is little knowledge to guide service planning, or to indicate whether services achieve their public health objectives
- Low and middle income countries are investing in services as prevalence rates increase, so system-level analysis may be helpful as a planning tool.
Where is the research?

- Most research on addiction treatment is focused on the rather narrow interface between a caregiver and a patient.
- A small but growing number of academic researchers have invested their careers in the study of the more esoteric interface between treatment service systems and population health.
- Ironically, the assumed population-wide impact of treatment is often the driving force behind the funding of addiction treatment services, but most research remains focused on rather narrowly defined clinical issues.
- And there is little research to demonstrate conclusively that treatment services impact morbidity and mortality at the population level.
Conceptual Model of Population Impact

- Policies in other systems
- System policies: Siting, Financing, Monitoring
- Specialized structural resources: Facilities, Programs, Personnel
- Other resources: Mental health services, Primary care services, Criminal justice, Harm reduction
- System Qualities: Accessibility, Coordination, Economy, Coerciveness, Stigma
- Effects on service users
- Drug-using population characteristics: Case mix, Social capital, Drinking/drug use subcultures
- Impact on population

Policies → System Characteristics → Effectiveness → Population Impact
Progress in needs-based planning

- defining core concepts and principles (Ritter et al., 2019b; Rush & Urbanoski, 2019); developing models and measures that capture the complexity of treatment need (Hirschovits-Gerz et al., 2019; Mota et al., 2019; Rush et al., 2019; Tremblay et al., 2019); and applying those innovations within more dynamic system modeling that incorporates incidence, natural recovery, and outcomes,
Benefits of a needs-based systems approach

- Improve access, efficiency, economy, effectiveness, continuity of care, thereby improving the population impact of treatment services
- Focus attention on components having greatest impact on morbidity and mortality
- Draw attention to cost implications
- Guide allocation of scarce resources
Challenges ahead

• New epidemics appear in conjunction with new psychoactive substances and emerging trends, for example the growing problem of prescription opioid dependence in some countries.

• Demographic changes such as global migration and changes in the age structure of the population

• Some services become, which speaks to the need for regular, repeated needs assessment exercises to adjust the system to current needs.
Conclusion

- Needs-based planning has come a long way since the days of the Jellinek Estimation Formula derived from liver cirrhosis rates and subsequent attempts to document the extent of the “treatment gap” from population surveys of substance use disorders.

- New concepts have been incorporated into planning models, and new epidemiological methods have been applied to the development of regional and national plans for the design, implementation, and funding of a comprehensive range of services.

- Population impact could be improved through needs-based planning

- The way forward seems clear: advocate for needs-based planning, continue to improve our models and measures, and support the kinds of research that have both practical and theoretical implications.