

European Monitoring Centre for Drugs and Drug Addiction

The treatment demand indicator in Europe

A common monitoring tool across 30 countries and its value for treatment systems planning

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and the network of TDI European experts

Structured Session: "Needs-based planning for substance use treatment systems: The new generation of principles, methods and models

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Historical context



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Drug problem

- Illicit drug use epidemic (heroin)
- Peak in mid-80s-90s in western EU, then Eastern
- Developments of negative health/social consequences
- HIV epidemic
- Diversification of the drug market and users

Treatment

- Specialised services
- Expansion
- Diversification (objectives and providers)
- Research advancements
- Individualised treatment
- Systemic approach based on needs assessment

Source: Hartnoll R. (2003), rug epidemiology in the European institutions: Historical background and key indicators, Bulletin on Narcotics, vol. LV, N. 1); Pirona A. (2015) European Drug Summer School; EMCDDA, (2010)Drug treatment strategy

The implementation of the drug treatment monitoring systems

Needs

- How many people need treatment?
- What substances and how are used?
- What drug related consequences? Clinical
- What do we need to treat people?
- What to do with the collected data?
- How to report on activities/efforts?

Treatment planners

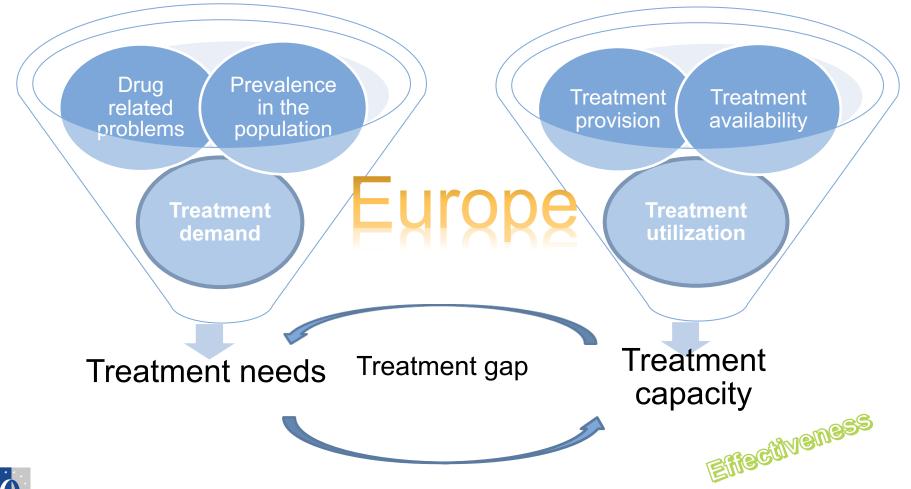
- What should be done?
- How much resources are needed?
- What need to be changed?

Policy makers

- Does treatment work?
- Is it worth investing?
- What is the public health impact?
- International comparison



Assessing treatment gap in Europe



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Treatment Demand Indicator

- One of the 5 EMCDDA key epidemiological indicators
- Offer professionals and researchers with a common European methodology for collecting and reporting core treatment data
- Provide information on people entering treatment specialized drug services in Europe



General population surveys (GPS)

General population surveys are used to obtain information on drug use among the general population.



High-risk drug use (HRDU) This key indicator (formerly 'PDU') collects data on the prevalence and incidence of high-risk drug use.



Treatment demand indicator (TDI) The treatment demand indicator is used to describe the population of problem drug users entering treatment.



Drug-related deaths and mortality (DRD)

The aim of this indicator is to obtain statistics on the number and characteristics of people who die as a consequence of drug use.

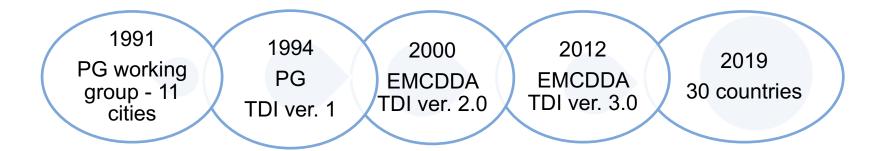


Drug-related infectious diseases (DRID) This key indicator collects data on drug-related infectious diseases, particularly among injecting drug users.

- Has the purpose to gain insight into characteristics, risk behaviors, drug use patterns of people with drug problems – should reflect as much as possible community
- Provide indirect information on treatment availability, offer, provision



The TDI Protocol



- 4 sections and 2 annexes
- Guidelines: 24 items and definitions
- Methodological issues
- Available in 13 languages





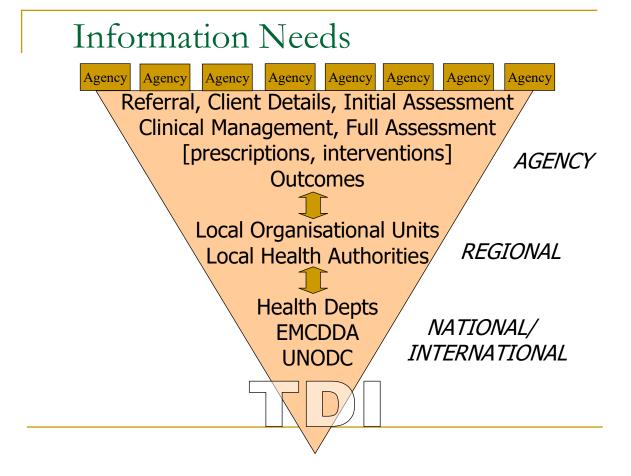
Treatment demand indicator (TDI) Standard protocol 3.0

Guidelines for reporting data on people entering drug treatment in European countries



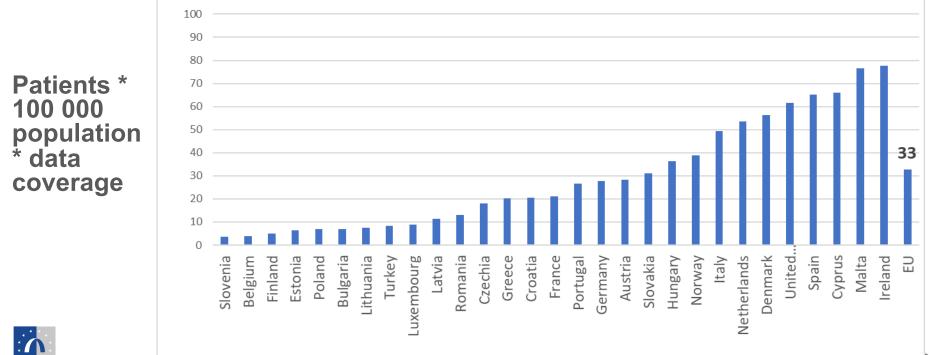
Source: TDI Protocol ver. 3.0 - www.emcdda.europa.eu/themes/key-indicators/tdi

How does TDI work?

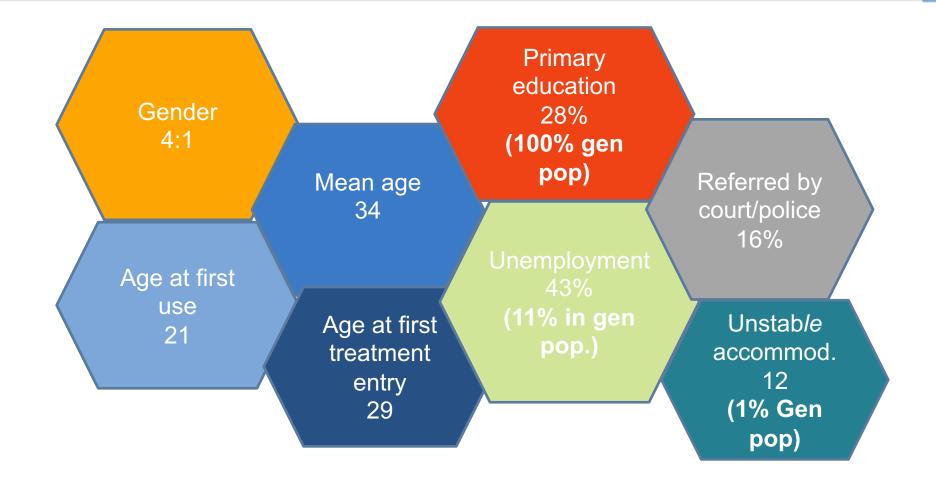


People entering drug treatment in EU-29 in 2017 or most recent available

Key TDI figures	
Countries reporting data	29
Treatment entrants	467864
First time treatment entrants	178242
Units reporting data*	6775



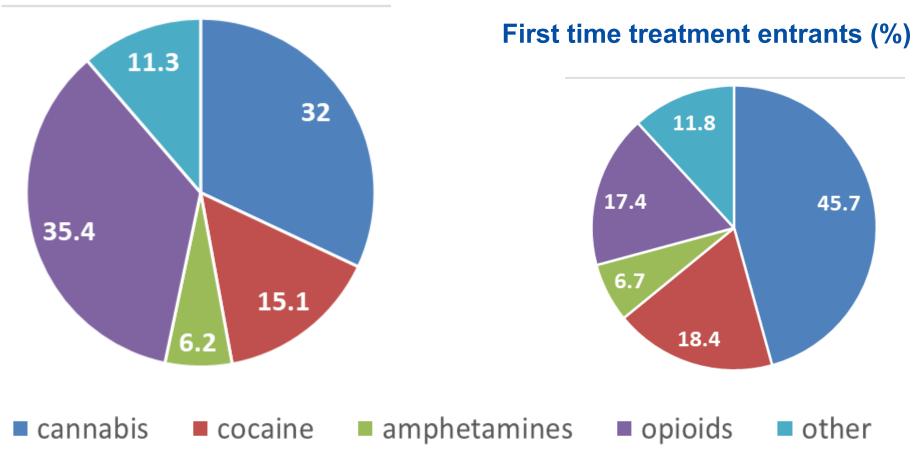
Socio-demographic profile





Primary drug: main reason to enter treatment

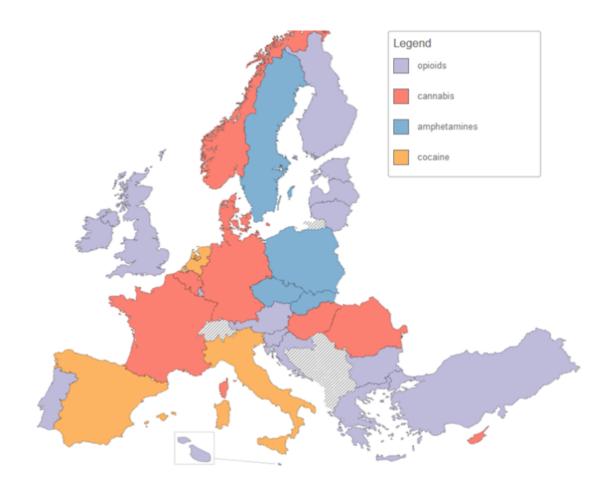
All treatment entrants (%)





Source: 2018 Statistical Bulletin – 2018 EDR - 2019 Statistical Bulletin – 2019 EDR Notes: data on continuous treatment refer to 10 countries and for amphetamines include all stimulants other than cocain **10**

Countries by most frequently reported primary drug for which people enter drug treatment (2017)



Opioids 4% HU – 93% EE

Cannabis 1% EE – 63% HU

Amphetamines <1% IT – 50% CZ

Cocaine: <1 FI, EE, LV – 39% ES



Polydrug use

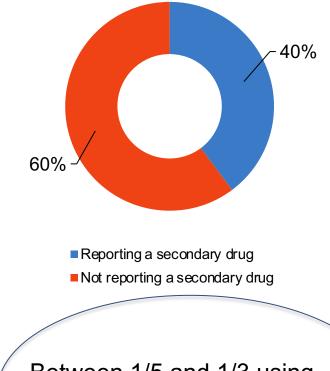
From TDI ver. 3.0

"Secondary drugs:

drugs used in addition to primary drug; they cause problems for the client and/or change the nature of the problem as assessed by the client and the therapist"

"Polydrug use problem:

complementary and additional to information on primary drug. It refer to when two or more drugs are involved in the drug problem to the client, at the same time and it is very difficult to assess which was the primary drug that caused the treatment entry. "

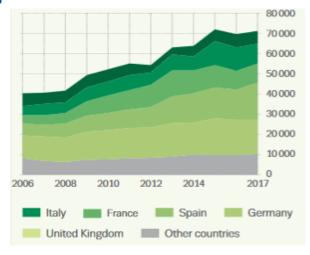


Between 1/5 and 1/3 using alcohol as secondary drug

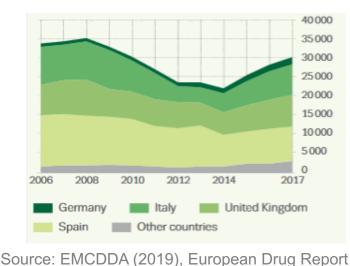


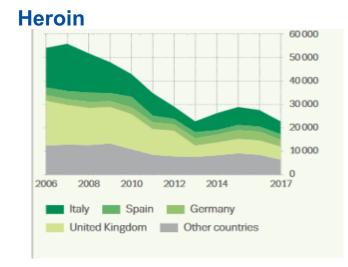
Trends in first treatment entrants by drug

Cannabis

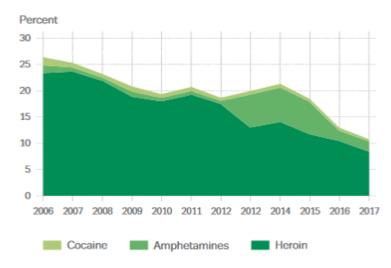


Cocaine



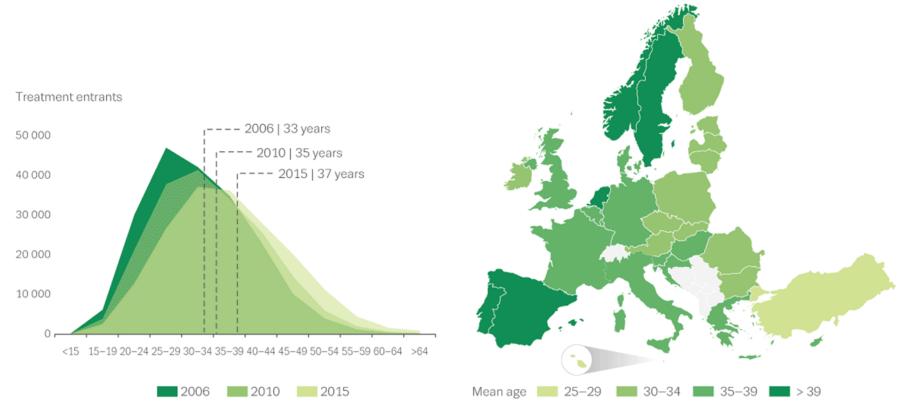


Injection



Ageing population

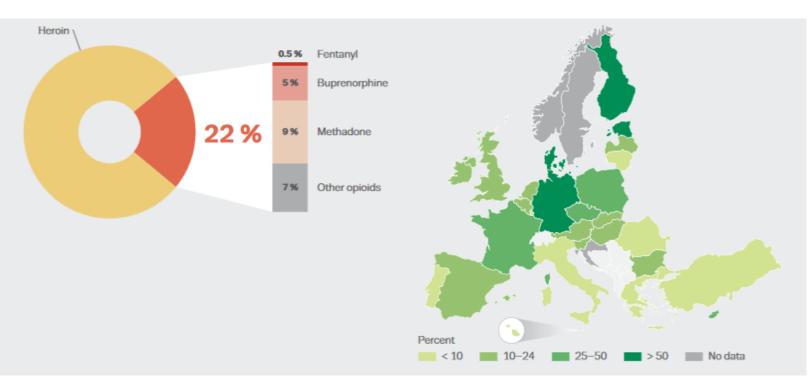
Treatment entrants with opioids as primary drug: shifts in the age structure over time (left) and mean age by country (right)





Synthetic Opioids

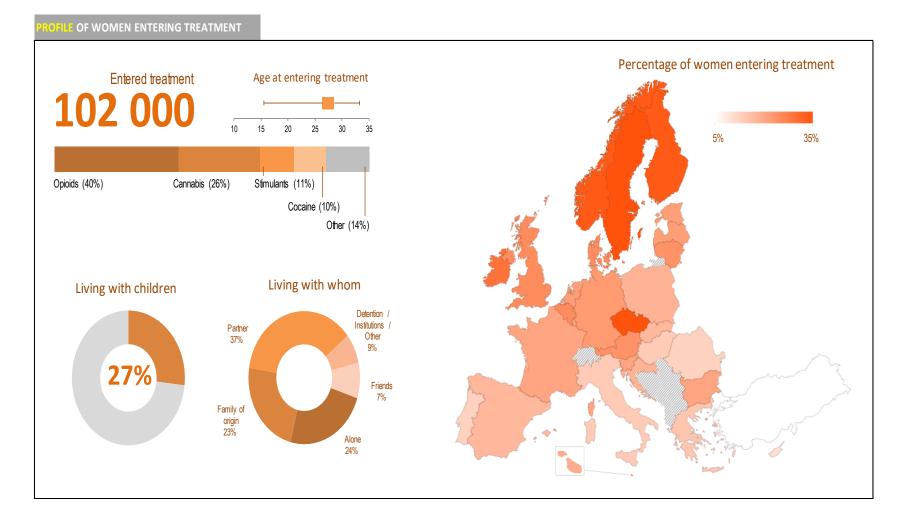
Treatment entrants citing opioids as primary drug: by type of opioid (left) and percentage reporting opioids other than heroin (right)



19 countries with more than 10% of opioids clients reporting opioids other than heroin

Source: EMCDDA (2019), European Drug Report, Luxembourg

Profile of women entering drug treatment in 28 EU + Norway in 2016



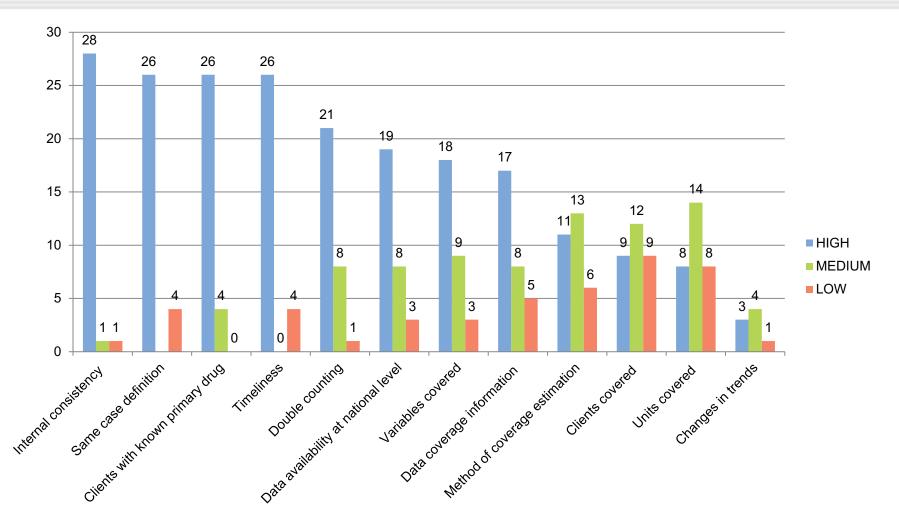


Limitations

- Not full representativeness, limitations in data coverage
- Cautious in trends interpretation
- Double counting
- Only illicit substances as per EMCDDA mandate
- Entries: not people in treatment and not demands!



Data quality of the TDI Indicator: n. countries



Source: 2012 Data Quality Assessment of the 5 Key Epidemiological Indicators



To conclude....

- TDI is one of the largest drug-related data set in Europe
- It is used in different analysis and publications
- TDI help to determine the treatment gap (needs VS capacity)
- Next steps: module on continuous treatments, on-going developments in the area of treatment interventions, best practices, outcome
- Success over the last 20 years thank to the collaborative effort between the EMCDDA and the network of national TDI experts



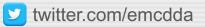


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Thank you!

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