



# An Outcome Evaluation of Drug Treatment in Afghanistan

May 2020

## BACKGROUND

Afghanistan has remained one of the biggest producers and exporters of opium. Opium production comprises 7% of Afghanistan's estimated Gross National Product (GNP) and between 20% to 32% of the total GNP when including illegal drug trafficking (UNODC/MCN, 2017). The ravages of war and poverty have likely contributed to increasing levels of illicit drug abuse in Afghanistan (U.S. Department of State, 2011).

The U.S. Department of State's Bureau of International Narcotics and Law Enforcement Affairs (INL), in partnership with the Colombo Plan Drug Advisory Programme (CPDAP), began funding the operation of several Afghan drug treatment centers in 2005. A network of 103 drug abuse treatment (DAT) Centers across Afghanistan provide residential, outpatient, and home-based treatment services to Afghans. The CPDAP has trained center staff on the eight basic and ten advanced Universal Treatment Curriculum (UTC) courses, as well as providing quality monitoring and operational training and technical assistance (with the assistance of UNODC). An evaluation by the Pacific Institute for Research and Evaluation (PIRE) in 2012 found significant reductions in illicit drug use, drug use consequences, and criminal behavior for patients who completed residential treatment.

Due to rapid social changes and growth of the Afghan treatment system, PIRE, in collaboration with CPDAP, conducted a second evaluation between 2015 and 2018. The study had similar aims of examining changes in illegal drug use and criminal behavior due to the program, but additionally sought to examine whether treatment outcomes varied by gender, treatment modality, and center sponsor (NGOs or MoPH).



## METHODS

A probability sample of 32 Afghan DAT Centers, located in 18 of the 34 Afghan provinces, participated in this evaluation. Six of the sampled DAT Centers served females and 26 served males exclusively. Eighteen DAT Centers utilized a residential, 11 utilized a home-based, and three utilized an outpatient treatment modality. The clients interviewed at baseline consisted of 1,022 clients within one to five days after completing detoxification. Eight hundred sixty-five (865 or 85%) were re-interviewed 12 months later after completing primary treatment (and most of the secondary treatment). Urine drug screens were also conducted with all clients. Drug use was defined by self-report data and then corrected by urine screen data if the urine screen indicated use had indeed occurred.

# FINDINGS

## Illicit Drug Use

There were substantial declines in illicit substance, including opioids and methamphetamines, one year following treatment. These effects were presumably due to the UTC treatment received by clients.

- Only statistically significant changes ( $p < .01$ ) are reported.
- All clients (100%) used illicit substances in the past 30 days at baseline (defined as benzodiazepines, hashish, opioids, sedatives, stimulants, or methamphetamines).
- At follow-up, 70% of clients reported or tested positive for using at least one illegal drug [30% decrease; Odds Ratio (OR)=.002]
- 96% of clients used opioids at baseline and 59% used at follow-up (39% decrease, OR=.02).
- 59% of clients used methamphetamines at baseline and 32% used at follow-up (46% decrease, OR=.21)

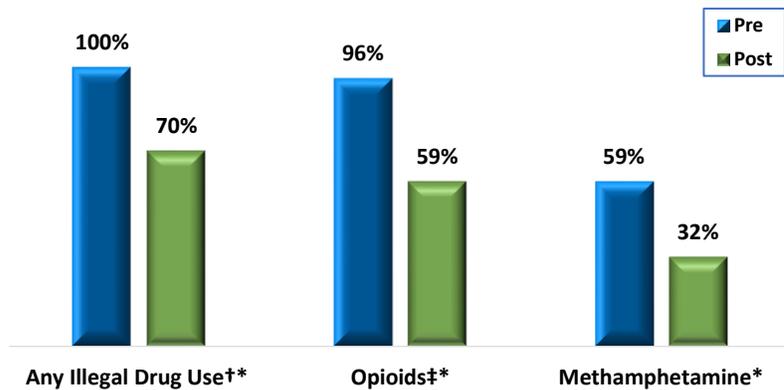


Figure 1. Significant changes in pre-post illegal drug use at baseline and post-test.<sup>1</sup>

## Gender Differences in Illicit Drug Use

There was no evidence to suggest differentially significant ( $p < .05$ ) changes for men or women receiving treatment, where it is desirable for men and women to show similar levels of change.

Due to the larger sample size for men, when examining the genders individually, the changes were only consistently significant for men.

- 48% decrease in past 30-day use of any illegal drugs for female clients (OR could not be computed) and a decrease of 27% for male clients (OR=.35).
- 50% decrease in past 30-day use of opioids for female clients (OR=.01) and a decrease of 36% for male clients (OR=.02).
- 41% decrease in past 30-day methamphetamine use for female clients (or OR=.35) and a decrease of 47% for male clients (OR=.20).

<sup>1</sup> Notes: † includes the use of opioids, stimulants, cocaine, methamphetamines, ecstasy, other amphetamines, sedatives, benzodiazepines, barbiturates, other sedatives, hallucinogens, hashish, other hallucinogens, and inhalants

‡ includes opium, heroin, crystal, sosigan, mandrex + heroin, and other opioids such as morphine and Demerol

\* Change over time statistically significant,  $p < .01$ , two-tailed

Source: Pacific Institute for Research and Evaluation. (2018). *Research Monograph: An Outcome Evaluation of Drug Treatment in Afghanistan*.

# FINDINGS

## Treatment Setting Differences in Illicit Drug Use

Clients in residential, outpatient, and home-based treatment centers showed similar decreases in use of any illegal drugs and methamphetamines, where there was no evidence to suggest differential change by modality.

While decreases were similar, residential treatment showed slightly more favorable decreases in illegal substance use than other treatment modalities.

- All clients (100%) across all modes used illicit substances in the past 30 days.
- At follow-up, the percentage of clients who used illegal drugs decreased to 66% for residential treatment (OR=.003), 70% for outpatient treatment (OR could not be computed), and 79% for home-based treatment (OR could not be computed). This decrease was only statistically significant for residential treatment ( $p < .01$ ).
- 98% of residential treatment clients, 90% of outpatient treatment clients, and 93% of home-based treatment clients used opioids. Opioid use decreased to 57% for residential treatment (OR=.01), 50% for outpatient treatment (OR=.05), and 68% for home-based treatment (OR=.03). Each of these differences was statistically significant, but residential treatment showed the largest decrease in opioid use ( $p < .01$ ).
- 66% of residential treatment clients, 42% of outpatient treatment clients, and 51% of home-based treatment clients used methamphetamines. Methamphetamine use decreased to 34% for residential treatment (OR=.16), 15% for outpatient treatment (OR=.23), and 33% for home-based treatment (OR=.34). These decreases were statistically significant for residential and home-based modalities, but not outpatient ( $p < .01$ ).

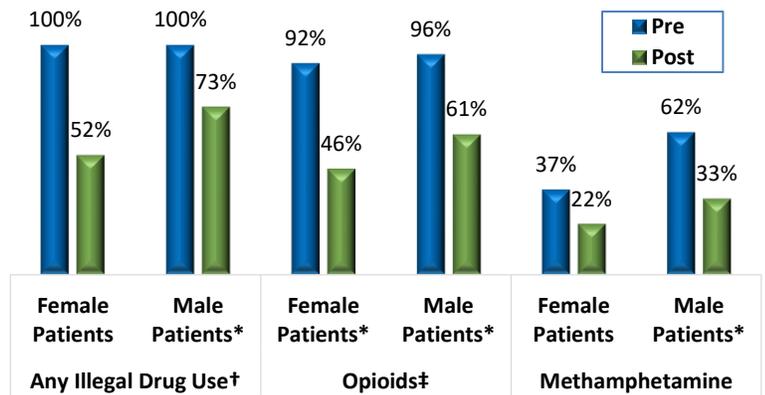


Figure 2. Significant changes in pre-post illegal drug use at baseline and post-test by gender.<sup>1</sup>

## Treatment Operator Differences in Illicit Drug Use

There were virtually no differences in treatment outcomes as a result of a DTC being operated by a NGO or by MoPH. DTCs run by government or non-governmental organizations were both successful in showing a client decrease in usage of any illegal drugs.

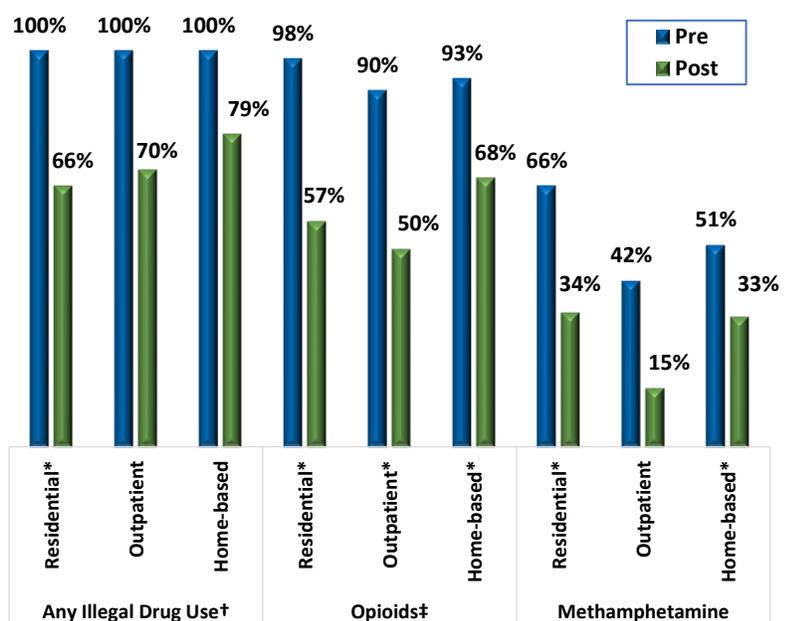


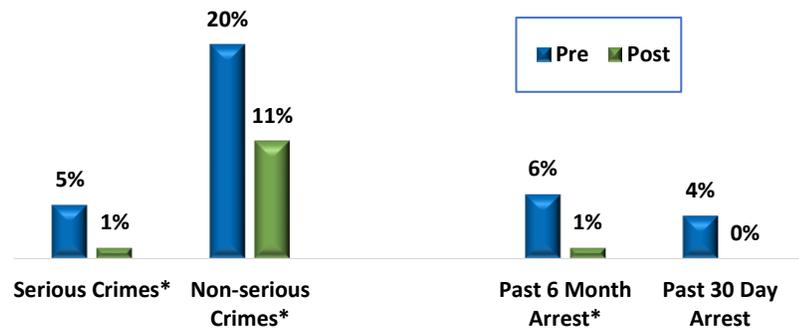
Figure 3. Significant changes in pre-post illegal drug use at baseline and post-test by modality.<sup>1</sup>

## FINDINGS

### *Societal Benefits of Drug Treatment through Crime Reduction*

**There were substantial declines in serious and non-serious criminal behavior that corresponded to receiving the UTC treatment. All changes observed were similar or larger than the 2012 evaluation.**

- All changes that could be tested (i.e., non-zero values) were statistically significant ( $p < .05$ ).
- Self-reported serious crimes (such as robbery, arson, and violence against others) in the past month decreased from 5% to 1% at follow-up (80% reduction,  $OR = .36$ ).
- Self-reported non-serious crimes (such as forgery, buying and selling stolen property, and theft) in the past month decreased from 20% to 11% at follow-up (45% reduction,  $OR = .48$ ).
- Self-reported past six months arrests decreased from 6% to 1% at follow-up (86% reduction,  $OR = .21$ ).
- Self-reported past month arrests decreased from 4% to 0% at follow-up (100% reduction,  $OR$  could not be calculated).



**Figure 4. Significant decreases in past month criminal behavior and arrests.<sup>1</sup>**

## HIGHLIGHTS

- 30% decrease (100% to 70%) in any illicit drugs one year after primary treatment
- Men (27% decrease) and women (48% decrease) had large decreases in any substance use that were not significantly different
- Clients in residential (66%), outpatient (70%), and home-based (79%) treatment centers showed similar levels of use of any illegal drug at follow-up; however, the evidence is slightly biased towards favoring residential centers.
- Minimal differences in treatment outcomes due to NGO or by MoPH being the treatment center operator.
- 80% reduction in serious crimes and 45% reduction in non-serious crimes at treatment completion.

## SUMMARY & RECOMMENDATIONS

The results of the Afghanistan drug abuse treatment evaluation show positive change (i.e. statistically significant reductions) in illegal drug use and criminal behavior. Our results suggest that although the reductions in illegal drug tended to be larger for women than men, both genders showed large decreases in drug use. Meaningful reductions in substance use occurred in all three treatment modalities (residential, outpatient, and home-based). The differences in treatment modality tended to favor inpatient treatment but were similar overall. Based on the foregoing, we make the following recommendations.

1. DAT Centers should provide continued treatment and outreach services to former clients who relapse.
2. Treatment emphasis should continue to be placed on ensuring that clients complete primary and secondary treatment.
3. Ensure DAT Center staff have ongoing access to training on UTC basic and advanced courses.