Dear Student,

As promised here is a workable solution based on the outline that you were told to utilize. I suggest treating the problem from the point of view of a Q&A, answering questions in accordance with a treatment program. For this particular solution, the basis is SAMHSA's medication treament program as it is officially rolled out DHHS and related agencies and treatment centers. You can use the listed resources to further explore the topic. Following the logic model, ensure you have elements of input, activities, output and outcome/impact. All the best with your studies.

Sincerely,

AE 105878/Xenia Jones

**Opioid Treatment Program Evaluation**

1. Cover page (should be a separate page)

Opioid Treatment Program Evaluation:
SAMHSA's Medication Treatment Program

by (Your name)

Submitted to (Your Professor/Instructor)

Course Name/Class/Subject

Department/College University

Abstract: This paper looks into SAMHSA's Medication Treatment Program for opioids to review its processes and impact.

2. Introduction that provides some information about program evaluation and the treatment center of your choice.

Introduction - Opioids are chemical substances that impact on our brain's opioid receptors to decrease the feeling of pain. They are found naturally in some plants and animals or can be developed synthetically. There are illegal opioid substances like heroin and opium and the natural occurring morphine (that is utilized in medicine where the use is legally regulated). There are also the synthetic versions that are available by prescription to suppress symptoms and for those undergoing treatment like fentanyl, oxycidine, codeine and hydrocodone. According to the NIH (2017), "These drugs are chemically related and interact with opioid receptors on nerve cells in the body and brain. Opioid pain relievers are generally safe when taken for a short time and as prescribed by a doctor, but because they produce euphoria in addition to pain relief, they can be misused (taken in a different way or in a larger quantity than prescribed, or taken without a doctor’s prescription). Regular use—even as prescribed by a doctor—can lead to dependence and, when misused, opioid pain relievers can lead to overdose incidents and deaths." Dependence and abuse of these drugs, especially the illegal variety (heroin) is a reality in society and can lead to tragic consequences for so many.

3. Program stakeholders: Who are the likely stakeholders for this opioid treatment program?

SAMHSA's (2017) Medication-Assisted Treatment For Opioid Addiction in Opioid Treatment Programs has been in place for some time with its official iteration as policy since 2005. It is a research-based program that holds that, "t opioid addiction is a medical disorder that can be treated effectively with medications when they are administered under conditions consistent with their pharmacological

efficacy and when treatment includes necessary supportive services such as psychosocial counseling, treatment for co-occurring disorders, medical services, and vocational rehabilitation. Medication-assisted treatment for opioid addiction (MAT) has been effective in facilitating recovery from opioid addiction for many patients." This program's stakeholders have a macro reach what with over 2.5 million of Americans suffering from opioid use disorder (NIH, 2017). First of course, we have the government agency SAMHSA as it is their program. Then we have the larger DHHS that utilizes the program as a protocol to apply across the board. Then we have the treatment centers, their staff, the patients and the people directly affected by them (family, friends, and their communities). Then by and large, the wider society, for if the program works, the number of addictions and addicts/dependents could be lessened, reducing risk.

4. Inputs: What are the inputs of this treatment program? What are the connections between the various inputs?

In terms of input (money, staff, equipment), since this is a large-scale program, we are looking at a plan that involves Federal resources. The larger SAMHSA budget for the treatment program runs into millions as specialized staff is required to administer it. Staff also need training and continual updating of skills and knowledge with new approaches. Equipment does not only include the medication utilized, but specialist centers that can be the site for treatment, including those that require in-house intervention. Each element arte connected as without the other, treatment can't take place or advance. Specialist screen and determine the need of each patient with careful assessment and put together a program. The program draws from resources including medical equipment, site and personnel.

5. Program process: Describe the treatment program process. Can the process help achieve a successful evaluation?

 Patients are screened and assessed then based on that a program that combines medication as well as counseling and CBT are introduced side-by-side especially in cases of co-occurring issues (i.e. addiction and depression). According to SAMHSA (2017), "Effective treatment attends to multiple needs of the individual, not just his or her drug use. Counseling (individual and/or group) and other behavioral therapies are critical components of effective treatment for addiction. Medications are an important element of treatment for many patients, especially when combined with counseling and other behavioral therapies." It is possible to hope that such a program can lead to successful evaluations especially if applied actively and comprehensively, with great awareness of the elements contained in the program and with cooperation from its main stakeholders - patient, doctor/specialist leading the treatment and counsellor.

6. What are the outputs of the treatment program?

A proper induction to the program requires detailed medical assessment for the purpose of pharmacology so as to determine the medication. The program has produced over the years validated results from medication in terms of what drugs, what doses and which approaches to utilize at various stages of the treatment. It has also produced protocols of pairing of pharmacological approaches to counseling approaches and related therapies in relation to specific contexts of co-occurring illnesses (i.e. heroin addiction and schizophrenia, painkiller addiction and depression, etc.). These validated approaches have become standardized protocols that have come to be useful overtime in the roll-out of the program. Successful patients have come to live and maintain lives without recidivism.

7. What are the treatment program outcomes?

Not all patients that go through the program successfully complete it due to various factors including individual factors that cite their family and cultural situations and their environment. But of the many approaches available, SAMSHA's medication assisted by counseling program has proven most effective in opioid treatment across the DHHS. As such, it has been in place since 2005 and has continued to be innovated upon over the years. Patients who successfully complete the program avoid recidivism, are able to manage themselves and lead productive lives.

8. What are the challenges likely to be faced during the evaluation process? Note: this section is not about service delivery challenges.

Evaluating the success of the program individually is easy enough as the program can be deemed a success if the patient finds treatment in the process and over the years manage to fall back into recidivism. On a larger scale, the evaluation of the program is determined by the goals of each center and the overall goal of SAMHSA - there are targets to reach so as to determine if the program is an effective investment of resources to tackle the issue. There are concerns over access, meeting of targets from population numbers to scheduled impact turnaround. The issue here is in terms of validity of effective program claims in centers that depend of funds for the program to run them. This however is resolved by external assessors of program effectiveness.

9. Summary: Summarize how all these steps of program evaluation come together to make the program evaluation exercise a success.

Patients, doctors, the executive board, the larger society have a say in the effectiveness of the program. Their input is given as feedback to SAMHSA as well as internal and external assessors. A logical assessment of the program is utilized to see if the inputs into the program (resources, funds, equipment, and budget) are utilized effectively in program processes and the outputs the processes/activities have as a means of their delivered services targeted at opioid treatment. The results are measured in outcome and impact at an individual and mezzo level including measures of recidivism and impact overtime.

10. References

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