



# Value of health interventions for heroin use

**An effective tool for economic evaluation and policy making.**

Illicit drug use has created an enormous burden at societal, familial and personal levels. Every year, a significant amount of resources are allocated for the treatment and consequences of illicit drug use in Australia and around the world.

This project aims to assess the net social benefit of the current treatment strategy for drug uses and to evaluate, through modelled scenarios, different combinations of treatment. This will lead to decisions and policy that are better informed about the mix and type of treatments in which governments invest.

Heroin is one of the major forms of illicit drugs and several independent heroin treatment strategies or interventions currently exist. State-of-the-art research demonstrates their efficacy and relative cost-effectiveness. However, assessing total potential gains and burden from providing all treatment interventions or varying the mix of heroin treatments has never been attempted. Furthermore, the need to include multiple treatments, multiple important outcomes and the chaotic nature of drug dependence means cost-effectiveness studies are not able to provide evidence on the net benefit of providing heroin treatments over a lifetime.

Evaluations of the current mix of treatment provisions remain very limited. This project develops an individual level model which addresses net social benefit that can accommodate the complexity of individuals going in and out of multiple treatments and their corresponding costs and benefits arising from different treatments during the life-course of heroin users.

This model is intended to serve as an effective tool for economic evaluation and policy making in illicit drug areas in Australia.

This project is funded by NHMRC in collaboration with NDARC, University of New South Wales.



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## PUBLICATIONS

- Hoang, V, Shanahan, M, Shukla, N, Perez, P, Farrell, M & Ritter, A 2016, 'A systematic review of modelling approaches in economic evaluations of health interventions for drug and alcohol problems', *BMC Health Services Research*, vol. 16, pp. 127.

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